



Term Life Insurance

can provide money for your family if you die or are diagnosed with a terminal illness.

How does it work?

You choose the amount of coverage that's right for you, and you keep coverage for a set period of time, or "term." If you die during that term, the money can help your family pay for basic living expenses, final arrangements, tuition and more.

Why is this coverage so valuable?

If you buy a minimum of \$25,000 of coverage now, you can increase your coverage in the future up to \$200,000 to meet your growing needs. You won't have to answer any health questions or take a health exam.

Who can get Term Life coverage?

If you are actively at work at least 20 hours per week, you may apply for coverage for:

You:	Choose from \$25,000 to \$200,000 in \$25,000 increments. You can get up to \$200,000 with no health questions. This is your guaranteed issue amount.
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What else is included?

A 'Living' Benefit — If you are diagnosed with a terminal illness with less than 12 months to live, you can request 75% of your life insurance benefit (up to \$500,000) while you are still living. This amount will be taken out of the death benefit, and may be taxable.

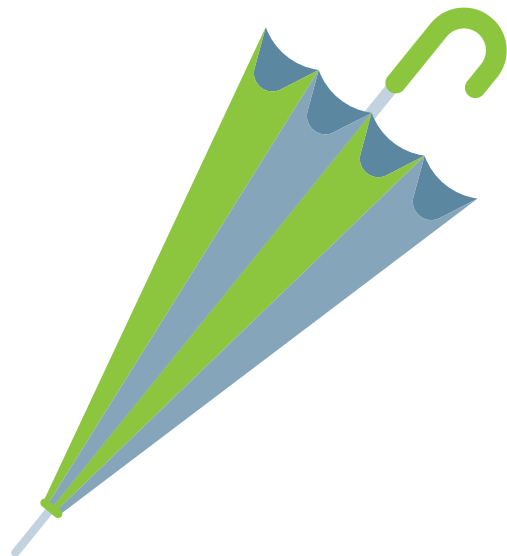
These benefit payments may adversely affect the recipient's eligibility for Medicaid or other government benefits or entitlements, and may be taxable.

Recipients should consult their tax attorney or advisor before utilizing living benefit payments.

Waiver of premium — Your cost may be waived if you are totally disabled for a period of time.

Portability — You may be able to keep coverage if you leave the company, retire or change the number of hours you work.

Employees or dependents who have a sickness or injury having a material effect on life expectancy at the time their group coverage ends are not eligible for portability.



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How much coverage can I get?

Calculate your costs

1. Enter the coverage amount you want.
2. Divide by the amount shown.
3. Multiply by the rate. Use the rate table (at right) to find the rate based on age.
(Choose the age you will be when your coverage becomes effective on 01/01/2022.)
4. Enter your cost.

	1	2	3	4
Employee	\$ _____,000	÷ \$25,000 = \$ _____	X \$ _____	= \$ _____
Total cost				

Employee monthly rate	
Age	Per \$25,000 of coverage Cost
15-24	\$1.750
25-29	\$1.750
30-34	\$2.250
35-39	\$3.000
40-44	\$4.000
45-49	\$6.000
50-54	\$10.250
55-59	\$17.000
60-64	\$26.250
65-69	\$50.250
70-74	\$81.750
75+	\$81.750

Billed amount may vary slightly.

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Exclusions and limitations

Actively at work

Eligible employees must be actively at work to apply for coverage. Being actively at work means on the day the employee applies for coverage, the individual must be working at one of his/her company's business locations; or the individual must be working at a location where he/she is required to represent the company. If applying for coverage on a day that is not a scheduled workday, the employee will be considered actively at work as of his/her last scheduled workday. Employees are not considered actively at work if they are on a leave of absence or lay off.

Employees must be U.S. citizens or legally authorized to work in the U.S. to receive coverage. Employees must be actively employed in the United States with the Employer to receive coverage. Employees must be insured under the plan for spouses and dependents to be eligible for coverage.

Exclusions and limitations

Life insurance benefits will not be paid for deaths caused by suicide occurring within 24 months after the effective date of coverage. The same applies for increased or additional benefits.

Delayed effective date of coverage

Insurance coverage will be delayed if you are not an active employee because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective.

Age Reduction

Coverage amounts for Life for you will reduce to 50% of the original amount when you reach age 70, and will reduce to undefined% of the original amount when you reach age undefined. Coverage may not be increased after a reduction.

Termination of coverage

Your coverage under the policy ends on the earliest of:

- The date the policy or plan is cancelled
- The date you no longer are in an eligible group
- The date your eligible group is no longer covered
- The last day of the period for which you made any required contributions
- The last day you are actively employed (unless coverage is continued due to a covered layoff, leave of absence, injury or sickness), as described in the certificate of coverage

This information is not intended to be a complete description of the insurance coverage available. The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. For complete details of coverage and availability, please refer to Policy Form C.FP-1 et al or contact your Unum representative.

Life Planning Financial & Legal Resources services, provided by HealthAdvocate, are available with select Unum insurance offerings. Terms and availability of service are subject to change. Service provider does not provide legal advice; please consult your attorney for guidance. Services are not valid after coverage terminates. Please contact your Unum representative for details.

Unum complies with state civil union and domestic partner laws when applicable.

Underwritten by: Unum Life Insurance Company of America, Portland, Maine

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