

Accidental Death and Dismemberment Amendment #2

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



To be attached to and made a part of Group Policy No. 70279 issued by Securian Life Insurance Company to Montefiore Medical Center. This amendment is effective as of September 1, 2018. Continued payment of premiums shall constitute acceptance of the conditions stated in this amendment.

As a change to the policy, an employee on a sabbatical leave of absence may continue coverage for up to twelve months from the last day he or she was actively at work. Premium payment is required during this leave. As a result of this change, the section entitled, "Can an insured's coverage be continued during sickness, injury, leave of absence or temporary layoff?" found on page 3 of the policy, is amended to read as follows:

Can an insured's coverage be continued during the employee's sickness, injury, leave of absence or temporary layoff?

Yes. Insurance may, according to uniform practices established by the employer under its plan of insurance, be continued on an insured employee who is not actively at work due to sickness, injury, leave of absence or temporary layoff. Insurance will be deemed to continue until terminated by discontinuance of premium payments or written request.

Insurance continued for non-medical leave of absence or temporary layoff may not be continued beyond six months, unless the employee is on a sabbatical leave, then coverage may not be continued beyond twelve months from the last day the insured employee was actively at work.

Insurance continued for sickness, injury or medical leave of absence may be continued as follows:

- (1) if retirees are not an eligible class of insureds according to the policyholder's plan of insurance, as shown on the specifications page attached to this policy, continuation for medical leave of absence cannot be continued beyond the employee's retirement date.
- (2) if retirees are an eligible class of insureds according to the policyholder's plan of insurance as provided for by this policy, continuation for medical leave of absence can be continued indefinitely. However, any reductions in the amount of insurance or any other change in policy provisions which apply at retirement will apply on the employee's retirement date.

For purposes of this provision, an employee's retirement date shall be the earlier of:


- (1) the date he or she actually retires; or
- (2) his or her presumed normal retirement date as established by the employer's applicable retirement plan. If no such date has been established, the employee's presumed retirement date shall be the date the employee attains age 65.

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

Practices established by the policyholder for determining eligibility for and continuance of insurance must be uniformly applied to all employees in a given class, regardless of such employee's physical health or disability.

As a result of this change, the AD&D Insurance Policy Specifications Page is replaced with the attached AD&D Insurance Policy Specifications Page effective September 1, 2018.

Agreed to by Securian Life Insurance Company this 8th day of January, 2019.

By 
LL
Vice President and Actuary

GENERAL INFORMATION

POLICYHOLDER:	Montefiore Medical Center	POLICY NO.: 70279				
ASSOCIATED COMPANIES:	All subsidiaries and affiliates reported to Securian Life by the policyholder for inclusion in the policy.					
POLICY SITUS:	The policy was issued and delivered in the state of New York.					
POLICY EFFECTIVE DATE:	January 1, 2017. This specification page represents the plan in effect as of September 1, 2018.					
POLICY ANNIVERSARY DATE:	January 1 of each year beginning January 1, 2018.					
PREMIUM DUE DATE(S):	The first day of each month.					
GROUP:	<p>All new employees or members in the groups or classes eligible for such insurance will be added to such groups or classes for which they are respectively eligible.</p> <p>The group is composed of all active employees and designated retirees of the policyholder and its associated companies working in the United States in the following classes:</p> <table><tr><td>Class 1:</td><td>All Registered Nurses who are part of the NYSNA</td></tr><tr><td>Class 2:</td><td>Physicians or all other active employees</td></tr></table>		Class 1:	All Registered Nurses who are part of the NYSNA	Class 2:	Physicians or all other active employees
Class 1:	All Registered Nurses who are part of the NYSNA					
Class 2:	Physicians or all other active employees					
WAITING PERIOD:	Classes 1 and 2:	The period commencing with the employee's date of employment and ending with the first day of the month next following or coinciding with the date of employment.				
MINIMUM HOURS PER WEEK REQUIRED:	17.5 hours per week or a 50% full-time equivalent.					

PLAN OF INSURANCE**EMPLOYEE BENEFIT SCHEDULE****EMPLOYEE ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D) INSURANCE:****Basic AD&D Insurance**

An amount elected by the employee from the following options. AD&D can also be waived.

<u>Eligible Class</u>	<u>Amount of Basic AD&D Insurance</u>
Class 1:	\$60,000
Class 2:	One times annual earnings, first rounded to the next higher \$1,000 if not already a multiple thereof, then multiplied, subject to a maximum of \$250,000.*

Voluntary AD&D Insurance

Eligible Class

Amount of Voluntary AD&D Insurance

Class 1:

None

Class 2:

One, two, three, four, five, six, seven or eight times annual earnings, first rounded to the next higher \$1,000 if not already a multiple thereof, then multiplied, subject to a maximum of \$750,000.*

*The combined amount of basic and supplemental insurance for an employee shall not exceed the lesser of 9 times annual earnings or \$1,000,000.

GENERAL PROVISIONS FOR EMPLOYEE INSURANCE

AGE REDUCTIONS:

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

Basic AD&D:	<u>Age of Employee</u>	<u>Amount of Insurance</u>
	70	90%
	71	81%
	72	73%
	73	66%
	74	60%
	75	39%
	80 and over	27%

Age reductions will apply the first of January following an insured employee's above stated birthdays. The newly reduced amount will be rounded to the next higher \$1,000.

Voluntary AD&D: None

CONTRIBUTORY/NONCONTRIBUTORY:

Basic insurance is contributory the first year and noncontributory insurance in following years. Voluntary insurance is contributory insurance.

RETIREMENT REDUCTIONS:

All AD&D insurance terminates upon retirement.

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

Requests for increases and decreases may be made only at annual enrollment or within 31 days of a qualified status change (as defined by the employer). Requests made due to a status change shall be effective on the first day of the month following the request. Requests made during an annual enrollment shall be effective on the general effective date of the annual enrollment. All increases are subject to the actively at work requirement.

DEPENDENTS BENEFIT SCHEDULE

DEPENDENTS AD&D INSURANCE:

An employee must be insured for voluntary AD&D insurance to elect dependents AD&D insurance.

Spouse AD&D Insurance

Eligible Class

Class 2 only:

Amount of Spouse AD&D Insurance

An amount elected by the employee, in increments of \$10,000, subject to a minimum of \$10,000 and a maximum of the lesser of eight times the employee's annual earnings or \$350,000.

Child AD&D Insurance

Eligible Class

Class 2 only:

Amount of Child AD&D Insurance

An amount elected by the employee, in increments of \$10,000, subject to a minimum of \$10,000 and a maximum of the lesser of one times the employee's annual earnings or \$50,000.

GENERAL PROVISIONS FOR DEPENDENTS INSURANCE

AGE REDUCTIONS:

None

CONTRIBUTORY/NONCONTRIBUTORY:

Dependents insurance is contributory insurance.

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

Requests for increases and decreases may be made only at annual enrollment or within 31 days of a qualified status change (as defined by the employer). Requests made due to a status change shall be effective on the first day of the month following the request. Requests made during an annual enrollment shall be effective on the general effective date of the annual enrollment. All increases are subject to the actively at work requirement for employees and the hospitalization/confinement clause for dependents.

Accidental Death and Dismemberment Amendment #1

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



To be attached to and made a part of Group Policy No. 70279 issued by Securian Life Insurance Company to Montefiore Medical Center. This amendment is effective as of January 1, 2017. Continued payment of premiums shall constitute acceptance of the conditions stated in this amendment.

As a correction to the policy, the Class 1 definition should not include reference to North Central Bronx Hospital. The "GROUP" definition is amended to read as follows:

GROUP: All new employees or members in the groups or classes eligible for such insurance will be added to such groups or classes for which they are respectively eligible.


The group is composed of all active employees and designated retirees of the policyholder and its associated companies working in the United States in the following classes:

Class 1 All Registered Nurses who are part of the NYSNA

Class 2 Physicians or all other active employees

As a result of this change, the AD&D Insurance Policy Specifications Page is replaced with the attached AD&D Insurance Policy Specifications Page dated effective January 1, 2017 as revised on May 11, 2018.

Agreed to by Securian Life Insurance Company this 11th day of May, 2018.

By  SEM
Vice President and Actuary

GENERAL INFORMATION

POLICYHOLDER:	Montefiore Medical Center	POLICY NO.: 70279
ASSOCIATED COMPANIES:	All subsidiaries and affiliates reported to Securian Life by the policyholder for inclusion in the policy.	
POLICY SITUS:	The policy was issued and delivered in the state of New York.	
POLICY EFFECTIVE DATE:	January 1, 2017. This specification page represents the plan in effect as of January 1, 2017 as revised on May 11, 2018.	
POLICY ANNIVERSARY DATE:	January 1 of each year beginning January 1, 2018.	
PREMIUM DUE DATE(S):	The first day of each month.	
GROUP:	<p>All new employees or members in the groups or classes eligible for such insurance will be added to such groups or classes for which they are respectively eligible.</p> <p>The group is composed of all active employees and designated retirees of the policyholder and its associated companies working in the United States in the following classes:</p> <p>Class 1: All Registered Nurses who are part of the NYSNA</p> <p>Class 2: Physicians or all other active employees</p>	
WAITING PERIOD:	Classes 1 and 2:	The period commencing with the employee's date of employment and ending with the first day of the month next following or coinciding with the date of employment.
MINIMUM HOURS PER WEEK REQUIRED:	17.5 hours per week or a 50% full-time equivalent.	

PLAN OF INSURANCE**EMPLOYEE BENEFIT SCHEDULE****EMPLOYEE ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D) INSURANCE:****Basic AD&D Insurance**

An amount elected by the employee from the following options. AD&D can also be waived.

<u>Eligible Class</u>	<u>Amount of Basic AD&D Insurance</u>
Class 1:	\$60,000
Class 2:	One times annual earnings, first rounded to the next higher \$1,000 if not already a multiple thereof, then multiplied, subject to a maximum of \$250,000.*

Voluntary AD&D Insurance

Eligible Class

Amount of Voluntary AD&D Insurance

Class 1:

None

Class 2:

One, two, three, four, five, six, seven or eight times annual earnings, first rounded to the next higher \$1,000 if not already a multiple thereof, then multiplied, subject to a maximum of \$750,000.*

*The combined amount of basic and supplemental insurance for an employee shall not exceed the lesser of 9 times annual earnings or \$1,000,000.

GENERAL PROVISIONS FOR EMPLOYEE INSURANCE

AGE REDUCTIONS:

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

Basic AD&D:	<u>Age of Employee</u>	<u>Amount of Insurance</u>
	70	90%
	71	81%
	72	73%
	73	66%
	74	60%
	75	39%
	80 and over	27%

Age reductions will apply the first of January following an insured employee's above stated birthdays. The newly reduced amount will be rounded to the next higher \$1,000.

Voluntary AD&D: None

CONTRIBUTORY/NONCONTRIBUTORY:

Basic insurance is contributory the first year and noncontributory insurance in following years. Voluntary insurance is contributory insurance.

RETIREMENT REDUCTIONS:

All AD&D insurance terminates upon retirement.

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

Requests for increases and decreases may be made only at annual enrollment or within 31 days of a qualified status change (as defined by the employer). Requests made due to a status change shall be effective on the first day of the month following the request. Requests made during an annual enrollment shall be effective on the general effective date of the annual enrollment. All increases are subject to the actively at work requirement.

DEPENDENTS BENEFIT SCHEDULE

DEPENDENTS AD&D INSURANCE:

An employee must be insured for voluntary AD&D insurance to elect dependents AD&D insurance.

Spouse AD&D Insurance

Eligible Class

Class 2 only:

Amount of Spouse AD&D Insurance

An amount elected by the employee, in increments of \$10,000, subject to a minimum of \$10,000 and a maximum of the lesser of eight times the employee's annual earnings or \$350,000.

Child AD&D Insurance

Eligible Class

Class 2 only:

Amount of Child AD&D Insurance

An amount elected by the employee, in increments of \$10,000, subject to a minimum of \$10,000 and a maximum of the lesser of one times the employee's annual earnings or \$50,000.

GENERAL PROVISIONS FOR DEPENDENTS INSURANCE

AGE REDUCTIONS:

None

CONTRIBUTORY/NONCONTRIBUTORY:

Dependents insurance is contributory insurance.

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

Requests for increases and decreases may be made only at annual enrollment or within 31 days of a qualified status change (as defined by the employer). Requests made due to a status change shall be effective on the first day of the month following the request. Requests made during an annual enrollment shall be effective on the general effective date of the annual enrollment. All increases are subject to the actively at work requirement for employees and the hospitalization/confinement clause for dependents.

Group Insurance Policy

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

POLICYHOLDER: Montefiore Medical Center

Effective: January 1, 2017

POLICY NUMBER: 70279

Read Your Policy Carefully

This group policy was issued to the policyholder on the issue date shown on the specifications page attached to this group policy. We promise to pay the benefits provided by this group policy, subject to the conditions, limitations and exceptions of this group policy. We make this promise and issue this group policy in consideration of the application for this group policy and the payment of the premiums.

days after you receive it. You may also cancel this group policy by delivering or mailing a written notice to Securian Life Insurance Company (Securian Life), 400 Robert Street North, St. Paul, Minnesota 55101-2098 and returning the group policy before midnight of the 10th day after you receive this group policy. Notice given by mail and return of the group policy by mail are effective on being postmarked, properly addressed and postage prepaid. If you return the group policy, you will receive, within 7 days of the date we receive a notice of cancellation, a full refund of any premiums you have paid.

Free Look

It is important to us that you are satisfied with this group policy after it is issued. If you are not satisfied with this group policy you may return it to us or our agent within 10



Secretary



President

SECURIAN LIFE INSURANCE COMPANY REQUIRED DISCLOSURE STATEMENT

This policy provides insurance only for ACCIDENTS. It does NOT provide basic hospital, basic medical or major medical insurance, as defined by the New York State Insurance Department.

IMPORTANT NOTICE—THIS POLICY DOES NOT PROVIDE COVERAGE FOR SICKNESS

This policy provides benefits for loss due to covered accidents. The conditions under which an accident is not covered are described in the Exclusions provision. This disclosure statement is a very brief summary of your policy. The policy itself sets for the rights and obligations of both you and us. It is therefore important that you READ YOUR POLICY CAREFULLY.

The expected benefit ratio for this policy is 78%. This ratio is the portion of future premiums which we expect to return as benefits, when averaged over all people covered under this policy.

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ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE POLICY • NONPARTICIPATING

AD&D INSURANCE POLICY SPECIFICATIONS PAGE

GENERAL INFORMATION

POLICYHOLDER:	Montefiore Medical Center	POLICY NO.:	70279				
ASSOCIATED COMPANIES:	All subsidiaries and affiliates reported to Securian Life by the policyholder for Inclusion in the policy.						
POLICY SITUS:	The policy was issued and delivered in New York.						
POLICY EFFECTIVE DATE:	January 1, 2017. This specification page represents the plan in effect as of January 1, 2017.						
POLICY ANNIVERSARY DATE:	January 1 of each year beginning January 1, 2018.						
PREMIUM DUE DATE(S):	The first day of each month.						
GROUP:	<p>All new employees or members in the groups or classes eligible for such insurance will be added to such groups or classes for which they are respectively eligible.</p> <p>The group is composed of all active employees of the policyholder and its associated companies working in the United States in the following classes:</p> <table><tr><td>Class 1</td><td>All Registered Nurses part of the NYSNA, excluding North Central Bronx Hospital</td></tr><tr><td>Class 2</td><td>Physicians or all other active employees</td></tr></table>			Class 1	All Registered Nurses part of the NYSNA, excluding North Central Bronx Hospital	Class 2	Physicians or all other active employees
Class 1	All Registered Nurses part of the NYSNA, excluding North Central Bronx Hospital						
Class 2	Physicians or all other active employees						
WAITING PERIOD:	<table><tr><td>Classes:</td><td>The period commencing with the employee's date of</td></tr><tr><td>1 and 2:</td><td>employment and ending with the first day of the month next following or coinciding with the date of employment.</td></tr></table>	Classes:	The period commencing with the employee's date of	1 and 2:	employment and ending with the first day of the month next following or coinciding with the date of employment.		
Classes:	The period commencing with the employee's date of						
1 and 2:	employment and ending with the first day of the month next following or coinciding with the date of employment.						
MINIMUM HOURS PER WEEK REQUIREMENT:	17.5 hours per week or a 50% full-time equivalent.						

PLAN OF INSURANCE

EMPLOYEE BENEFIT SCHEDULE

EMPLOYEE ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D) INSURANCE:

Basic AD&D Insurance

An amount elected by the employee from the following options. AD&D can also be waived.

<u>Eligible Class</u>	<u>Amount of Basic AD&D Insurance</u>
Class 1:	\$60,000
Class 2:	One times annual earnings, first rounded to the next higher \$1,000 if not already a multiple thereof, then multiplied, subject to a maximum of \$250,000.*

Voluntary AD&D Insurance

<u>Eligible Class</u>	<u>Amount of Insurance</u>
Class 1:	None
Class 2:	One, two, three, four, five, six, seven or eight times annual earnings, first rounded to the next higher \$1,000 if not already a multiple thereof, then multiplied, subject to a maximum of \$750,000.*

*The combined amount of basic and supplemental insurance for an employee shall not exceed the lesser of 9 times annual earnings or \$1,000,000.

GENERAL PROVISIONS FOR EMPLOYEE INSURANCE

AGE REDUCTIONS:

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

Basic AD&D:	<u>Age of Employee</u>	<u>Amount of Insurance</u>
	70	90%
	71	81%
	72	73%
	73	66%
	74	60%
	75	39%
	80 and over	27%

Age reductions will apply the first of January following an insured employee's above stated birthdays. The newly reduced amount will be rounded to the next higher \$1,000.

Voluntary AD&D:

None.

CONTRIBUTORY/ NONCONTRIBUTORY:

Basic insurance is contributory the first year and noncontributory insurance in following years.

Voluntary insurance is contributory insurance.

RETIREMENT REDUCTIONS:

All AD&D insurance terminates upon retirement.

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

Requests for increases and decreases may be made only at annual enrollment or within 31 days of a qualified status change (as defined by the employer). Requests made due to a status change shall be effective on the first day of the month following the request. Requests made during an annual enrollment shall be effective on the general effective date of the annual enrollment. All increases are subject to the actively at work requirement.

DEPENDENTS BENEFIT SCHEDULE

DEPENDENTS AD&D INSURANCE:

An employee must be insured for voluntary AD&D insurance to elect dependents AD&D insurance.

Spouse AD&D Insurance

Eligible Class

Amount of Insurance

Class 2 only:

An amount elected by the employee, in increments of \$10,000, subject to a minimum of \$10,000 and a maximum of the lesser of eight times the employee's annual earnings or \$350,000.

Child AD&D Insurance

Eligible Class

Amount of Insurance

Class 2 only:

An amount elected by the employee, in increments of \$10,000, subject to a minimum of \$10,000 and a maximum of the lesser of one times the employee's annual earnings or \$50,000.

GENERAL PROVISIONS FOR DEPENDENTS INSURANCE

AGE REDUCTIONS:

None

**CONTRIBUTORY/
NONCONTRIBUTORY:**

Dependent insurance is contributory insurance.

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

Requests for increases and decreases may be made only at annual enrollment or within 31 days of a qualified status change (as defined by the employer). Requests made due to a status change shall be effective on the first day of the month following the request. Requests made during an annual enrollment shall be effective on the general effective date of the annual enrollment. All increases are subject to the actively at work requirement for employees and the hospitalization/confinement clause for dependents.

Definitions

age

Attained age as of policy anniversary date.

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.

certificate effective date

The date the certificate holder's coverage under this policy becomes effective.

certificate holder

An insured employee.

contributory insurance

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

earnings

An employee's basic rate of compensation not including commissions, overtime or premium pay, bonuses, or any other additional compensation.

employee

An individual who is employed by the policyholder or by an associated company. A sole proprietor will be considered the employee of the proprietorship. A partner in a partnership will be considered an employee so long as the partner's principal work is the conduct of the partnership's business. The term employee does not include temporary employees, seasonal employees nor corporate directors who are not otherwise employees.

employer

The policyholder or any designated associated company.

insured

A person who is eligible for and becomes insured under the terms of this policy.

licensed physician

An individual who is licensed to practice medicine or treat illness in the state in which treatment is received. The physician cannot be the certificate holder or the certificate holder's spouse, children, parents, grandparents, grandchildren, brothers or sisters, or the spouse of any such individuals.

non-work day

A day on which the employee is not regularly scheduled to work, including scheduled time off for vacations, personal

holidays, weekends and holidays, and approved leaves of absence for non-medical reasons.

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

noncontributory insurance

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

policy anniversary

The policy anniversary date shown on the specifications page attached to this policy.

policy effective date

The date this policy was issued as shown on the specifications page attached to this policy.

policyholder

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

specifications page

The outline which summarizes the policyholder's plan of insurance.

waiting period

The period, if any, of continuous employment with the employer that the employee must satisfy prior to becoming eligible for coverage under this policy. The waiting period is shown on the specifications page attached to this policy.

we, our, us

Securian Life Insurance Company.

you, your

The policyholder named on the specifications page attached to this policy.

General Information

What is your agreement with us?

This policy and your attached signed application contain the entire 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 signed application a copy of which has been furnished to you.

No change or waiver of any provisions of the group 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 the group 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.

Can this policy be amended?

Yes. The certificate holder'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.

Who is eligible for insurance?

An employee is eligible if he or she:

- (1) is a member of the eligible group and of an eligible class as shown on the specifications page attached to this policy; and
- (2) works for the employer for at least the number of hours per week shown as the minimum hours per week requirement on the specifications page attached to this policy; and
- (3) has satisfied the waiting period as shown on the specifications page attached to this policy; and
- (4) meets the actively at work requirement described in the "What is the actively at work requirement?" provision of this section.

Unless otherwise specified in this policy, an insured must continue to meet the actively at work requirement as specified in this policy for his or her coverage to remain in force. Please refer to the provision entitled, "Can an insured employee's coverage be continued during sickness, injury, leave of absence or temporary layoff?"

Are retired employees eligible for insurance?

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

What is the actively at work requirement?

To be eligible to become insured or to receive an increase in the amount of insurance, an employee must be actively at work performing his or her customary duties at the

employer's normal place of business, or at other places the employer's business requires him or her to travel.

Employees not working due to illness or injury do not meet the actively at work requirement nor do employees receiving sick pay, short-term disability benefits or long-term disability benefits.

If the employee is not actively at work on the date coverage would otherwise begin, or on the date an increase in his or her amount of insurance would otherwise be effective, he or she will not be eligible for the coverage or increase until he or she returns to active work. However, if the absence is on a non-work day, coverage will not be delayed provided the employee was actively at work on the work day immediately preceding the non-work day.

Except as otherwise provided for in this policy, an employee is eligible to continue to be insured only while he or she remains actively at work.

When does a certificate holder's insurance become effective?

A certificate holder's insurance becomes effective on the date that all of the following conditions have been met:

- (1) the certificate holder meets all eligibility requirements; and
- (2) if required, the certificate holder applies for the insurance on forms which are approved by us; and
- (3) we receive the required premium.

Can an insured's coverage be continued during the employee's sickness, injury, leave of absence or temporary layoff?

Yes. Insurance may, according to uniform practices established by the employer under its plan of insurance, be continued on an insured employee who is not actively at work due to sickness, injury, leave of absence or temporary layoff. Insurance will be deemed to continue until terminated by discontinuance of premium payments or written request.

Insurance continued for non-medical leave of absence or temporary layoff may not be continued beyond six months from the last day the employee was actively at work.

Insurance continued for sickness, injury or medical leave of absence may be continued as follows:

- (1) if retirees are not an eligible class of insureds according to the policyholder's plan of insurance, as shown on the specifications page attached to this policy, continuation for medical leave of absence cannot be continued beyond the employee's retirement date.
- (2) if retirees are an eligible class of insureds according to the policyholder's plan of insurance as provided for by this policy, continuation for medical leave of absence can be continued

indefinitely. However, any reductions in the amount of insurance or any other change in policy provisions which apply at retirement will apply on the employee's retirement date.

For purposes of this provision, an employee's retirement date shall be the earlier of:

- (1) the date he or she actually retires; or
- (2) his or her presumed normal retirement date as established by the employer's applicable retirement plan. If no such date has been established, the employee's presumed retirement date shall be the date the employee attains age 65.

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

Practices established by the policyholder for determining eligibility for and continuance of insurance must be uniformly applied to all employees in a given class, regardless of such employee's physical health or disability.

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 specifications page attached to this policy. We apply premiums consecutively to keep the insurance in force.

You may pay premiums before they are due for any period up to the next policy anniversary. Premiums paid in advance should be calculated at the rate of the monthly premium currently due.

Premium contributions for contributory insurance are to be paid to you unless we have agreed to some other premium payment procedure. The premium contributions by employees 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; or
- (2) irrespective of any rate guarantee, anytime, if the policy terms are amended or the total amount of insurance in force changes by 25% or more.

We will notify you 120 days in advance of a change in premium rates.

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 received by us on or before the date it is due, that premium may be paid during the 60-day grace period following the due date. The insurance under this policy will remain in effect during the 60-day grace period. This grace period does not apply to the first premium payment.

Can the premium be adjusted?

Yes. We will adjust 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. We will charge you for any additional premium, and will refund any overpayment.

Accidental Death and Dismemberment Benefit

What does accidental death or dismemberment by accidental injury mean?

Accidental death or dismemberment by accidental injury means that an insured's death or dismemberment results, directly and independently of all other causes, from an accidental injury which is unintended, unexpected, and unforeseen.

The injury must occur while the insured's coverage is in force. The insured's death or dismemberment must occur within 365 days after the date of the injury.

If an insured lapses into a coma as a result of and within 365 days of a covered accidental injury, and such coma has lasted for a minimum of 31 days, we will pay a benefit equal to the lesser of:

- (1) 1% of the insured's amount of insurance; or
- (2) 1% of the difference between the insured's amount of insurance and the amount of any benefits paid under the loss schedule for the same accident.

This benefit will be paid monthly until the earliest of the following:

- (1) the date the insured recovers such that he or she is no longer in a coma as defined herein; or
- (2) the date of the insured's death. If an accidental death payment is due under this policy, the amount of such payment will be reduced by the amount of insurance paid under this coma provision; or
- (3) 100 months following the date monthly benefits commenced.

Coma means a state of profound unconsciousness with no evidence of appropriate responses to stimulation. The

insured must be confined in a medical facility and diagnosed as comatose by a licensed physician.

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

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

TYPE OF LOSS	PERCENT OF AMOUNT OF INSURANCE
Life.....	100%
Both Hands or Both Feet.....	100%
Sight of Both Eyes.....	100%
Speech and Hearing	100%
One Hand and One Foot.....	100%
One Foot and Sight of One Eye	100%
One Hand and Sight of One Eye.....	100%
Quadriplegia	100%
Paraplegia	75%
Sight of One Eye	50%
Speech or Hearing	50%
One Hand or One Foot.....	50%
Hemiplegia	50%
Thumb and Index Finger of One Hand	25%
Uniplegia	25%

Loss of hands or feet means complete severance at or above the wrist or ankle joints. Loss of sight, speech, or hearing means the entire and irrecoverable loss of sight, speech, or hearing which cannot be corrected by medical or surgical treatment or by artificial means. Loss of thumb and index finger means complete severance of both the thumb and the index finger at or above the metacarpophalangeal joints. Quadriplegia means total paralysis of both upper and lower limbs. Paraplegia means total paralysis of both lower limbs. Hemiplegia means total paralysis of upper and lower limbs on one side of the body. Uniplegia means total paralysis of one limb.

A benefit is not payable for both loss of thumb and index finger of one hand and the loss of one hand for injury to the same hand as a result of any one accident.

Benefits may be paid for more than one accidental injury, but the total amount of insurance payable for all of an insured's losses due to any one accident, not including any amount paid according to the terms of the Additional Benefits section of this policy, will never exceed such insured's full amount of insurance shown on the specifications page attached to this policy.

Can a certificate holder request a change in the amount of his or her contributory insurance?

Yes. A certificate holder can request an increase or a decrease in the amount of his or her contributory insurance as shown on the specifications page attached to this policy. Requests may be made in writing, by telephone or any other method made available by us.

When will changes in coverage amounts be effective?

Increases and decreases in amounts of contributory insurance will be effective as shown on the specifications page attached to this policy. All increases in the amount of insurance are subject to the actively at work requirement.

What are the notice of claim and proof of loss requirements?

Written notice of injury on which a claim may be based must be given to us within 20 days after the accident. Notice given by or on behalf of the insured or the beneficiary to Securian Life Insurance Company at 400 Robert Street North, Saint Paul, MN 55010, or to any authorized agent of Securian Life, with information sufficient to identify the insured, shall be deemed notice to us. Proof of loss must be furnished to us within 90 days after the date of loss. However, failure to give such notice and proof within the time provided will not invalidate the claim if it is shown that notice and proof were given as soon as reasonably possible.

When we receive written notice of claim, we will send the claimant our claim forms if he or she needs them. If the claimant does not receive the forms within 15 days, we will accept his or her written description as proof of loss.

When will the accidental death or dismemberment benefit be payable?

We will pay the accidental death or dismemberment benefit within 60 days of receipt at our home office of written proof satisfactory to us that a certificate holder died or suffered a covered dismemberment as a result of a covered accidental injury. All payments by us are payable from our home office.

The benefit will be paid in a single sum. We will pay interest on the benefit from the date of the certificate holder's death or dismemberment until the date of payment. Interest will be at an annual rate determined by us, but never less than 0.1% per year or the minimum required by state law, whichever is greater.

To whom will we pay the accidental death or dismemberment benefit?

In the case of a certificate holder's accidental death, we will pay the accidental death benefit to the beneficiary or beneficiaries. All other benefits will be payable to the certificate holder, if living, otherwise to the certificate holder's estate.

A beneficiary is named by a certificate holder to receive the accidental death benefit to be paid at the certificate holder's accidental death. The certificate holder may name one or more beneficiaries. The certificate holder cannot name you or an associated company as a beneficiary.

The certificate holder may also choose to name a beneficiary that the certificate holder cannot change

without the beneficiary's consent. This is called an irrevocable beneficiary.

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

If there is no eligible beneficiary, or if the certificate holder does not name one, we will pay the accidental death benefit to:

- (1) the certificate holder's lawful spouse, if living, otherwise;
- (2) the certificate holder's natural or legally adopted child (children) in equal shares, if living, otherwise;
- (3) the certificate holder's parents in equal shares, if living, otherwise;
- (4) the certificate holder's brothers and sisters in equal shares, if living, otherwise;
- (5) the personal representative of the certificate holder's estate.

Can a certificate holder add or change beneficiaries?

Yes. A certificate holder can add or change beneficiaries if all of the following are true:

- (1) the certificate holder's coverage is in force; and
- (2) we have written consent of all irrevocable beneficiaries; and
- (3) the certificate holder has not assigned the ownership of his or her insurance.

A request to add or change a beneficiary must be made in writing or in any other method made available by the employer or us. A change will take effect as of the date it is signed, but will not affect any payment we make or action we take before receiving a certificate holder's request.

Exclusions

What are the exclusions under this policy?

In no event will we pay the accidental death or dismemberment benefit where the insured's death or dismemberment results from or is caused directly or indirectly by any of the following:

- (1) suicide or attempted suicide, or
- (2) intentionally self-inflicted injury or any attempt at self-inflicted injury, whether sane or insane; or
- (3) the insured's participation in or attempt to commit a felony; or

- (4) bodily or mental infirmity, illness or disease, including bacterial infection, other than infection occurring simultaneously with, and as a result of, the accidental injury; or
- (5) medical or surgical treatment including diagnostic procedures; or
- (6) intoxication or influence of any narcotic unless administered on the advice of a physician; or
- (7) travel or flight in or on any vehicle used for aerial navigation including getting in, out, on, or off such vehicle, if the insured is:
 - (a) riding as a passenger in any aircraft not intended or licensed for the transportation of passengers; or
 - (b) acting as a pilot or a crew member of any aircraft, unless riding as a passenger; or
 - (c) riding as a passenger in a non-chartered aircraft which is owned, leased, operated, or controlled by the insured employee's employer; or
 - (d) a student taking a flying lesson, unless riding as a passenger; or
 - (e) hang gliding; or
 - (f) parachuting, except when the insured has to make a parachute jump for self-preservation; or
- (9) war or any act of war, whether declared or undeclared; or
- (10) riot or civil insurrection; or
- (11) service in armed forces or units auxiliary thereto.

Additional Benefits

Unless stated otherwise, additional benefits are payable to the same person or persons who receive the accidental death and dismemberment benefits. Additional benefits are paid in addition to any accidental death and dismemberment benefits described in the Accidental Death and Dismemberment section, unless otherwise stated. All provisions of this policy, including but not limited to the Exclusions section, shall apply to these additional benefits

Adaptive Home and Vehicle Benefit

What is the adaptive home and vehicle benefit?

If an insured suffers a loss other than loss of life and a benefit is payable under the AD&D benefit, we will pay for an insured's principal residence to be made accessible and/or an insured's 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. An insured's benefit will be the lesser of:

- (1) 10% of his or her 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) a physician certifies the benefit is needed to accommodate a physical disability; and
- (2) the alteration or modification is made by someone experienced in such adaptations; and
- (3) the alteration or modification is in compliance with applicable laws or requirements for the approval by the appropriate government authorities; and
- (4) the alteration or modification expenses do not exceed the usual level of charges for similar alterations or modifications in the locality where the expense is incurred.

Disappearance Benefit

What is the disappearance benefit?

If an insured's body has not been found after one year from the date the conveyance in which he or she was traveling disappeared, exploded, sank, became stranded, made a forced landing or was wrecked, it shall be presumed, subject to all other terms of the policy, that the insured has died as a result of an accidental injury which was unintended, unexpected and unforeseen. Such death shall be considered a covered loss under this policy.

Exposure Benefit

What is the exposure benefit?

If an insured is unavoidably exposed to the elements by reason of a covered accident and suffers a loss that is included in the list of covered losses as a result of such exposure, such loss will be covered under the terms of this policy.

Hospital Benefit

What is the hospital benefit?

If an insured requires hospitalization as a result of a covered accident, an additional benefit will be paid to the certificate holder during such hospitalization. After a seven-day waiting period, a monthly benefit equal to 1% of the insured's amount of insurance will be paid, subject to a maximum of \$1,000 per month for up to 12 months.

Payments for periods of less than a full month will be made on a pro-rata basis. If the period of hospitalization exceeds seven days, the benefit will be paid retroactively to the first day of hospitalization. No benefit is payable for hospitalizations of seven days or fewer.

Rehabilitative Physical Therapy Benefit

What is the rehabilitative physical therapy benefit?

If an insured suffers an injury which results in a covered dismemberment, we will pay an additional benefit for rehabilitative physical therapy which is prescribed by the attending physician or surgeon. The benefit will be equal to the lesser of:

- (1) 10% of the insured's amount of insurance; or
- (2) \$10,000.

Seatbelt Benefit

What is the seatbelt benefit?

If an insured dies as a result of a covered accident which occurs while he or she is driving or riding in a private passenger car, we will pay an additional accidental death and dismemberment benefit equal to the lesser of 10% of the insured's amount of insurance or \$10,000. In order to be eligible for this benefit, the following must apply:

- (1) the private passenger car was equipped with seatbelts; and
- (2) a seatbelt was in proper use by the insured at the time of the accident as certified in the official accident report or by the investigating officer; and
- (3) at the time of the accident, the driver of the private passenger car was not intoxicated, impaired, or under the influence of alcohol or drugs.

Seatbelt means a properly installed seatbelt (or child restraint if the insured is a child), lap and shoulder restraint, or other restraint approved by the National Highway Traffic Safety Administration or any successor governmental agency. A private passenger car means a validly registered four-wheeled private passenger car or policyholder-owned car, jeep, pickup truck or van, including a sport utility vehicle (SUV), that is not licensed commercially or being used for racing, or acrobatic or stunt driving.

Termination

When does a certificate holder's insurance end?

A certificate holder's insurance ends on the earliest of the following:

- (1) the date this policy ends; or
- (2) the date the certificate holder no longer meets the eligibility requirements; or
- (3) the date this policy is amended so the certificate holder is no longer eligible; or
- (4) 60 days (the grace period) after the due date of any unpaid premium if the premium remains unpaid at that time; or
- (5) the last day for which premium contributions have been paid following a certificate holder's written request to cease participation under this policy.

If a certificate holder's insurance under this policy terminates due to non-payment of premiums, his or her coverage may be reinstated if all premiums due are paid and received by us within 31 days of the date of termination and during the certificate holder's lifetime.

Unless otherwise specified in this policy, the insured must continue to meet the actively at work requirement as specified in this policy for his or her coverage to remain in

force. Please refer to the provision entitled, "Can an insured employee's coverage be continued during sickness, injury, leave of absence or temporary layoff?"

Can a certificate holder's coverage be reinstated after termination?

Yes. When a certificate holder's coverage terminates because he or she is no longer eligible, and the certificate holder becomes eligible again within three months after the date his or her coverage terminated, such coverage under this policy, including all benefits previously terminated, may be reinstated.

The certificate holder's coverage under this policy shall be reinstated automatically, without satisfaction of any waiting period. The amount of insurance will be that which applies to the classification to which he or she then belongs, on the date he or she again becomes eligible. If the policyholder's plan of insurance provides for contributory insurance under this policy, a certificate holder's amount of contributory insurance will be limited to that for which he or she was insured immediately prior to the loss of coverage.

When does this policy terminate?

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

- (1) 60 days (the grace period) after the due date of any premiums which are not paid; or
- (2) on any subsequent policy anniversary after the date the number of employees insured is less than any minimum established by us or as required by applicable state law; or
- (3) 120 days after we provide you with notice of our intent to terminate this policy.

Can this policy be reinstated?

No. We will not reinstate this policy after it terminates. You must submit a new application for a new policy after this policy has terminated.

Family Coverage

If a certificate holder has dependents, he or she may elect accidental death and dismemberment coverage for his or her eligible dependents as described below. All provisions of the policy applicable to an "insured," including but not limited to references in the Exclusions and Additional Benefits sections, shall apply to a dependent insured hereunder.

What members of the insured employee's family are eligible for this benefit?

The following members of the insured employee's family are eligible for this benefit:

- (1) the insured employee's lawful spouse and who is not legally separated from the employee and who

is not eligible for insurance as an employee under this policy; and

- (2) the insured employee's children, stepchildren, and legally adopted children for whom eligibility begins at live birth (stillborn or unborn children are not eligible) and ends at the end of the calendar year in which the child attains age 26. Children age 26 or older are also 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 the employee for more than one-half of their support and maintenance.

If both parents of a child qualify as insured employees under this policy, the child shall be considered a dependent of only one parent for purposes of this benefit. If any child qualifies as an insured employee under this policy, he or she is not eligible to be insured as a dependent child.

When does insurance on a dependent become effective?

Insurance on a dependent becomes effective on the date when all of the following conditions have been met:

- (1) the dependent meets all eligibility requirements; and
- (2) if required, the insured employee applies for dependents coverage on forms which are approved by us; and
- (3) we receive the required premium.

Any dependent who, subsequent to the effective date of the insured employee's certificate supplement for dependents accidental death and dismemberment insurance, meets the requirements of this provision will become insured on the date he or she so qualifies unless additional premium is required. If additional premium is required, the insurance of such later-acquired dependent shall be effective under the same conditions which apply if the employee was then first becoming eligible for dependents insurance under this policy.

If a 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. However, in no event will insurance on a dependent be effective before the insured employee's insurance under this policy is effective.

What is the amount of the accidental death and dismemberment benefit for each insured dependent?

The amount of insurance for a dependent is shown on the specifications page. The Accidental Death and Dismemberment section found earlier in this policy describes the amount of benefits, which are based on the insured's amount of insurance.

When will the accidental death or dismemberment benefit be payable?

We will pay the accidental death or dismemberment benefit upon receipt at our home office of written proof satisfactory to us that an insured dependent died or suffered dismemberment as a result of an accidental injury. All payments by us are payable from our home office.

The benefit will be paid in a single sum. We will pay interest on the benefit from the date of the insured dependent's death or dismemberment until the date of payment. Interest will be at an annual rate determined by us, but never less than 0.1% per year or the minimum required by state law, whichever is greater.

To whom will we pay a dependents accidental death or dismemberment benefit?

A dependents accidental death or dismemberment benefit will be paid to the certificate holder, if living, otherwise to his or her estate.

Dependents Benefit Termination

When does an insured dependent's coverage terminate?

An insured dependent's coverage terminates on the earliest of the following:

- (1) the date the dependent no longer meets the eligibility requirements; or
- (2) 60 days (the grace period) after the due date of any unpaid premium if the premium remains unpaid at that time; or
- (3) the last day for which premium contributions have been made following an insured employee's written request that insurance on his or her dependents be terminated; or
- (4) the date the employee is no longer covered under the group policy.

The insured employee must notify us or the employer when a dependent is no longer eligible for coverage under this benefit so that premiums may be discontinued. All premiums paid for dependents who are no longer eligible for coverage under this benefit will be refunded without any payment of claim.

Additional Information

Do we have the right to obtain independent medical verification?

Yes. We retain the right to have an insured medically examined at our expense whenever a claim is pending and, where not forbidden by law, we reserve the right to have an autopsy performed in the case of death.

What if an insured's age has been misstated?

If an insured's age has been misstated, the accidental death or dismemberment benefit payable will be that amount to which the insured is entitled based on his or her correct age.

A premium adjustment will be made to the premium you pay for the insured's noncontributory insurance and to the premium an insured pays for contributory insurance, if any, so that the actual premium required at the insured's correct age is paid.

When does an insured's insurance become incontestable?

Except for the non-payment of premiums, after the insured's insurance has been in force during his or her lifetime for two years from the effective date of his or her coverage, we cannot contest the insured's coverage. However, if there has been an increase in the amount of insurance for which the insured voluntarily applies then, to the extent of the increase, any loss which occurs within two years of the effective date of the increase will be contestable.

Any statements the insured makes in his or her application will be considered representations and not warranties. Also, any statement an insured makes will not be used to void his or her insurance, nor defend against a claim, unless the written statement is contained in the application or any evidence of insurability application which is signed by the insured and a copy has been furnished to the insured or to his or her beneficiary.

Our liability with respect to any contested amount of insurance will be limited to the premiums paid and attributable to the contested amount.

Can a certificate holder's insurance be assigned?

Yes. However, we will not be bound by an assignment of the certificate or of any interest in it unless it is made as a written instrument and the insured files the original instrument or a certified copy with us at our home office.

We are not responsible for the validity of any assignment. An insured is responsible for ensuring that the assignment is legal in his or her state and that it accomplishes his or her intended goals. A valid assignment will take precedence over any claim of a beneficiary.

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 can obtain them from you at any reasonable time.

If a clerical error is made in keeping records on the insurance under this policy, it will not affect otherwise valid insurance. A clerical error does not continue insurance which is otherwise stopped, nor put into effect insurance to which an insured is not otherwise entitled. If an error causes a change in premium payment, we will make a fair adjustment.

Will a certificate of insurance be provided for each certificate holder?

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

Will this policy receive experience credits?

Each year we will determine if this policy will receive an experience credit.

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 the Minnesota Mutual Companies, Inc.?

No. The ultimate parent company of Securian Life Insurance Company is Minnesota Mutual Companies, Inc., a mutual insurance holding company. This contract does not entitle you to any holding company membership rights.

Legal Actions

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



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