

Employee Group Term Life Certificate of Insurance

MINNESOTA LIFE

Minnesota Life Insurance Company - A Securian Company
Tallahassee Branch Office • P.O. Box 14289 • Tallahassee, Florida 32317-4289

POLICYHOLDER: State of Florida


Active Employees
Effective: 1-1-2016


POLICY NUMBER: 33503

Read Your Certificate Carefully

You are insured under the group policy shown on the specifications page attached to this certificate. This certificate summarizes the principal provisions of the

group policy that affect you. The provisions summarized in this certificate are subject in every respect to the group policy. You may examine the group policy at the principal office of the policyholder during regular working hours.


Secretary


President

Notice to Certificateholders

If you have any questions regarding your certificate, or if you need assistance in resolving a complaint, you can contact us at: Minnesota Life Insurance Company, Tallahassee Branch Office, P.O. Box 14289, Tallahassee, FL, 32317-4289. Toll-Free Telephone Number: 1-888-826-2756.

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GROUP TERM LIFE CERTIFICATE OF INSURANCE • PREMIUMS ARE SUBJECT TO CHANGE

GENERAL INFORMATION

POLICYHOLDER: The State of Florida, Division of State Group Insurance, as Administrator **POLICY NO.:** 33503-G

PROGRAM DATE: January 1, 2011. This certificate describes the benefits under the group policy as January 1, 2016.

GROUP: The group is composed of all active regular full-time and part-time employees classified by the policyholder as follows:

Class 1: All active Career Service and University Support Systems Staff Employees

Class 2: All active Senior Management and Selected Exempt Service Employees

Class 4: All employees classified as Other Personal Service/Variable Hour (OPS/Variable Hour) employees

NOTE: A retiree who returns to active work can be covered as a retiree or as an active employee, but not both.

MINIMUM HOURS PER WEEK REQUIRED: You must be working at least the number of hours in your employer's normal work week for your class. For a Class 4 employee, you must be working at least 30 hours per week.

WAITING PERIOD: For Class 4 employees: The period commencing with the date of eligible employment and ending on the first day of the third month of employment.

For all other employees: None

PLAN OF INSURANCE

EMPLOYEE BENEFIT SCHEDULE

EMPLOYEE TERM LIFE INSURANCE:
(see page "C" for Dependent coverage)

Basic Life Insurance

<u>Eligible Class</u>	<u>Amount of Insurance</u>
All Classes	\$25,000

Optional Life Insurance

An employee must be enrolled in basic life insurance in order to enroll in optional life insurance. An eligible employee may choose among seven options, as follows:

<u>Eligible Class</u>	<u>Amount of Insurance</u>
Classes 1 and 2	One, two, three, four, five, six or seven times annual earnings, the result rounded to the next higher \$1,000 if not already a multiple thereof, subject to a maximum of \$1,000,000.
Class 4	None

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

Basic AD&D Insurance

<u>Eligible Class</u>	<u>Amount of Insurance</u>
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All classes	An amount equal to the amount of basic life insurance for which you are insured under the group policy.
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Additional Benefits:

Seat Belt Benefit: The lesser of 10% of your amount of AD&D insurance or \$10,000.

Air Bag Benefit: The lesser of 10% of your amount of AD&D insurance or \$10,000.

Optional AD&D Insurance

<u>Eligible Class</u>	<u>Amount of Insurance</u>
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Classes 1 and 2	An amount equal to the amount of optional life insurance for which you are insured under the group policy.
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Class 4	None
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Additional Benefits:

Seat Belt Benefit: The lesser of 10% of your amount of AD&D insurance or \$10,000.

Air Bag Benefit: The lesser of 10% of your amount of AD&D insurance or \$10,000.

GENERAL PROVISIONS FOR EMPLOYEE INSURANCE

CONTRIBUTORY/ NONCONTRIBUTORY:

Basic insurance is noncontributory insurance for full-time employees and contributory insurance for part-time employees and OPS/Variable Hour employees (Class 4); optional insurance is contributory insurance.

GUARANTEED ISSUE AMOUNT:

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

For basic insurance: All basic insurance is guaranteed issue.

For optional insurance: Employee optional life elections that do not exceed the lesser of five times annual earnings or \$500,000 for employees who first become eligible after the effective date of the policy.

For annual open enrollment and qualifying status change: see certificate under "When will we require evidence of insurability?"

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the certificate under the Enrollment section.

CHANGES IN EARNINGS: (applies to Optional Life)

Changes in insurance amounts due to a change in annual earnings shall be effective on the date of the change in earnings. Increases in insurance due to changes in annual earnings are not subject to the actively at work requirement and will not require evidence of insurability. As an exception, an increase in earnings will not affect the insurance amount for a person whose insurance is not a full multiple of salary and is limited to \$500,000 due to a prior plan maximum or failure to provide satisfactory evidence of insurability. Satisfactory evidence of insurability will be required in order for such a person to increase his or her insurance amount

Note: Optional life insurance premiums are determined based upon the age and earnings of the Employee. An increase in the age band and/or in earnings will result in increased premium rates during the Plan Year.

DEPENDENTS BENEFIT SCHEDULE

DEPENDENTS TERM LIFE INSURANCE:

An employee must be insured for basic life insurance in order to be insured for dependents life insurance.

Spouse Life Insurance

<u>Eligible Class</u>	<u>Amount of Spouse Life Insurance</u>
All Classes	\$15,000 or \$20,000, as elected by the employee

Child Life Insurance

<u>Eligible Class</u>	<u>Amount of Child Life Insurance</u>
All Classes	\$10,000

GENERAL PROVISIONS FOR DEPENDENTS INSURANCE

**CONTRIBUTORY/
NONCONTRIBUTORY:**

Dependents insurance is contributory insurance.

**GUARANTEED ISSUE
AMOUNT:**

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

For employees who first become eligible for dependents insurance on or after January 1, 2016:

For spouse insurance: The guaranteed issue amount is up to \$20,000.

For child insurance: All insurance is guaranteed issue.

Evidence of insurability is never required of a child, but enrollment opportunities are limited to a period of initial eligibility, annual enrollment, or within 60 days of a qualified status change.

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the Dependent Certificate Supplement.

**EFFECT OF EMPLOYEE'S
RETIREMENT:**

All dependents insurance terminates upon the employee's retirement.

**EFFECT OF EMPLOYEE'S
TERMINATION OTHER THAN
RETIREMENT:**

See Termination section of Dependents Term Life Insurance Certificate Supplement.

ADDITIONAL INFORMATION

**SUICIDE EXCLUSION FOR LIFE
INSURANCE:**

The Suicide exclusion applies only to employee optional life and spouse life insurance under this policy. Exclusions for AD&D insurance, including a suicide exclusion, are listed on the applicable certificate supplement.

When applicable, this suicide exclusion limits our liability to an amount equal to the premiums paid for an insured, if that insured, whether sane or insane, dies by suicide within two years of the effective date of his or her insurance.

If there has been an increase in the insured's amount of insurance for which he or she was required to apply or for which we required evidence of insurability, and if the insured dies by suicide within two years of the effective date of the increase, our liability with respect to that increase will be limited to the premiums paid and attributable to such increase.

WAIVER OF PREMIUM APPLICATION:

Applies to contributory and noncontributory employee insurance.

ONE TIME OPEN ENROLLMENT Fall 2015 :

The policyholder will hold a one-time open enrollment in the Fall of 2015. During this one-time open enrollment, the following elections will not require evidence of insurability:

- Employees who currently do not participate in employee optional life may elect optional life coverage of one times annual earnings, provided the resulting amount of insurance does not exceed the lesser of five times annual earnings or \$500,000
- Spouse life elections up to \$20,000
- Child life election

Coverage will be effective 1-1-2016, subject to the actively at work requirement for employees and the hospitalization/confinement clause for dependents.

SUPPLEMENTS TO THE CERTIFICATE

Accelerated Benefits
Accidental Death and Dismemberment
Dependents Term Life
Portability
Repatriation
Waiver of Premium

Applies to all classes, employee and dependent coverage.
Applies to all classes, employee only.

Applies to all classes
Applies to all classes, employee only.
Applies to all classes, employee and dependent coverage.
Applies to all classes, employee only.

Definitions

application

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

associated company

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

contributory insurance

Insurance for which you are required to make premium contributions.

earnings

Earnings shall be as defined by your employer for purposes of the life insurance program.

employee

An individual who is employed by the policyholder or by an associated company. The term employee does not include temporary employees nor corporate directors who are not otherwise employees.

employer

The policyholder or any designated associated company.

evidence of insurability

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

insured

An employee who is eligible for and becomes insured according to the terms of this certificate.

non-work day

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

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

noncontributory insurance

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

policyholder

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

specifications page

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

waiting period

The period, if any, of continuous employment with the employer required prior to becoming eligible for coverage under this certificate. The waiting period is shown on the specifications page attached to this certificate.

we, our, us

Minnesota Life Insurance Company.

you, your, certificate holder

An insured employee.

General Information

What is your agreement with us?

You are insured under the group policy shown on the specifications page attached to this certificate. Your application, as defined under this certificate, is a part of this certificate. This certificate summarizes the principal provisions of the group policy that affect your life insurance coverage. The provisions summarized in this certificate are subject in every respect to the group policy.

Any statements made in your application as defined in this certificate will, in the absence of fraud, be considered representations and not warranties. Also, any statement made will not be used to void your insurance nor defend against a claim unless the statement is contained in your application.

This certificate is issued in consideration of your application and the payment of the required premium.

Who is eligible for insurance?

You are eligible if you:

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

Are retired employees eligible for insurance?

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

What is the actively at work requirement?

To be eligible to become insured or to receive an increase in the amount of insurance, you must be actively at work, for the required minimum hours per week shown on the specifications page, performing your customary duties at the employer's normal place of business, or at other places the employer's business requires you 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 you are not actively at work on the date coverage would otherwise begin, or on the date an increase in your amount of insurance would otherwise be effective, you will not be eligible for the coverage or increase until you return to active work. However, if the absence is on a non-work day, coverage will not be delayed provided you were actively at work on the work day immediately preceding the non-work day.

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

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

Yes. The employer may continue or allow you to continue your insurance when you are absent from work due to sickness, injury, leave of absence, or layoff. Continuation of your insurance is subject to your employer's practices and procedures, including your employer's limits on length of continuation allowed for the type of absence. If you stop active work for any reason, you should discuss with your employer what arrangements may be made to continue your insurance.

Enrollment

When can you elect or make changes to your insurance?

You must enroll in order to be insured under the group policy. You can enroll for coverage within 60 days of when you first become eligible. After that period, you can only enroll for coverage or make changes during your employer's annual open enrollment or within 60 days of a qualifying status change event. Qualified status change is defined by the policyholder based on state and federal rules and regulations.

When will we require evidence of insurability?

Evidence of insurability will be required if:

- (1) the insurance is optional insurance and you do not enroll within 60 days of first becoming eligible for it; or
- (2) you request to increase your optional insurance by more than one times your annual earnings during either (a) an annual open enrollment or (b) within 60 days of a qualifying status change (evidence of insurability will be required for the entire increase, not just the amount in excess of one times annual earnings); or
- (3) you request an optional insurance amount greater than five times annual earnings or greater than \$500,000. Unless evidence of insurability is required for all of a requested increase due to (1) or (2) above, you will be insured for the lesser of five times annual earnings or \$500,000 unless and until your evidence of insurability is approved by us.

When does insurance become effective?

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

- (1) you meet all eligibility requirements, including the actively at work requirement; and
- (2) for contributory insurance, you apply for the insurance on forms which are approved by us (no application is required for noncontributory insurance); and
- (3) we are satisfied with your evidence of insurability, if we require evidence.

In addition, elections made during an annual open enrollment period will not become effective prior to the effective date of that enrollment (generally the following January 1).

Premiums

When and how often are your premium contributions due?

Unless the policyholder and we have agreed to some other premium payment procedure, any premium contributions you are required to make for contributory insurance are to be paid by you to the policyholder on a periodic basis, not less frequently than monthly. We apply premiums consecutively to keep the insurance in force. Premium rates are subject to change in accordance with the group policy.

Death Benefit

What is the amount of the death benefit?

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

When will the death benefit be payable?

We will pay the death benefit upon receipt at our home office of written proof satisfactory to us that you died while insured under this certificate. All payments by us are payable from our home office.

The death benefit will be paid in a single sum or by any other method agreeable to us and the beneficiary.

To whom will we pay the death benefit?

We will pay the death benefit to the beneficiary or beneficiaries. You should designate a beneficiary or beneficiaries when you first enroll under the plan. You can change your beneficiary designation at any time, provided all of the following are true:

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

You cannot name the policyholder or an associated company of the policyholder as a beneficiary.

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

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

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

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

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

Termination

When does your coverage terminate?

Your coverage ends on the earliest of the following:

- (1) the end of the month following the month in which you no longer meet the eligibility requirements; or

- (2) the due date of any premium contribution required of you which is not paid; or
- (3) the last day for which premium contributions have been paid following your written request to cease participation under this plan; or
- (4) the date the group policy is amended so you are no longer eligible; or
- (5) the date the group policy ends.

Conversion Right

What is the conversion right?

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

What is the full conversion right?

You may convert up to the full amount of terminated insurance if termination occurs because your employment ends or because you are no longer in an eligible class.

What is the limited conversion right?

Limited conversion is available if, after you have been insured for at least five years, insurance is terminated because:

- (1) the group policy is terminated; or
- (2) the group policy is changed, by amendment or otherwise, to reduce or terminate your insurance.

For a limited conversion, you may convert an amount up to the lesser of:

- (a) \$10,000; and
- (b) the amount of life insurance which terminated minus any amount of group life insurance for which you become eligible under any group policy issued or reinstated by us or any other carrier within 31 days of the date your insurance terminated under the group policy.

When is conversion not available?

Neither the full conversion right nor the limited conversion right is available if your coverage under the group policy terminates due to failure to make, when due, required premium contributions.

To what type of policy may you convert?

Under both the full conversion right and the limited conversion right, you may convert your insurance to any type of individual policy of life insurance then customarily issued by us for purposes of conversion, except term insurance. The individual policy will not include any supplemental benefits, including, but not limited to, any disability benefits or accidental death and dismemberment benefits.

How do you convert your insurance?

You convert your insurance by applying for an individual policy and paying the first premium within 31 days after your group insurance terminates. No evidence of insurability will be required.

How is the premium for the individual policy determined?

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

When is the individual policy effective?

The individual policy takes effect 31 days after the group insurance provided under the group policy terminates.

What happens if you die during the 31-day period allowed for conversion?

If you die during the 31-day period allowed for conversion, we will pay a death benefit regardless of whether or not an application for coverage under an individual policy has been submitted. The death benefit will be the amount of insurance you would have been eligible to convert under the terms of the conversion right section.

We will return any premium you paid for an individual policy to your beneficiary named under the group policy. In no event will we be liable under both the group policy and the individual policy.

Additional Information

What if your age has been misstated?

If your age has been misstated, the death benefit payable will be that amount to which you are entitled based on your correct age. A premium adjustment will be made so that the actual premium required at your correct age is paid.

Is there a suicide exclusion?

The specifications page attached to this certificate indicates what insurance, if any, is subject to the suicide exclusion outlined below.

When applicable, this suicide exclusion limits our liability to an amount equal to the premiums paid if you, whether sane or insane, die by suicide within two years of the effective date of your insurance.

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

When does your insurance become incontestable?

Except for the non-payment of premiums, after your insurance has been in force during your lifetime for two years from the effective date of your coverage, we cannot contest your coverage. However, if there has been an increase in the amount of insurance for which you were required to apply or for which we required evidence of insurability, 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 you make in your application as defined under this certificate will, in the absence of fraud, be considered representations and not warranties. Also, any statement you make will not be used to void your insurance, nor defend against a claim, unless the statement is contained in your application.

Who is the owner of this coverage?

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

Can your insurance be assigned?

Yes. However, we will not be bound by an assignment of a certificate or of any interest in such certificate unless the assignment is made in writing or through any other method made available under the plan and we send the owner an acknowledgement of the assignment.

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

Can a change of ownership for a certificate be requested?

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

Is the policyholder required to maintain records?

Yes. The policyholder is required to maintain adequate records of any information necessary for us to administer this certificate. We can have access to the records at any reasonable time agreed upon by the policyholder and us.

If a clerical error is made in keeping records on the insurance under the group policy, it will not affect otherwise valid insurance. A clerical error does not continue insurance which is otherwise stopped. If an error causes a change in premium payment, we will make a fair adjustment.

Will the provisions of this certificate conform with state law?

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

Accelerated Benefits Certificate Supplement

MINNESOTA LIFE

Minnesota Life Insurance Company – A Securian Company
Tallahassee Branch Office • P.O. Box 14289 • Tallahassee, Florida 32317-4289

Benefits received under this supplement may be taxable. You should seek assistance from a personal tax advisor prior to requesting an accelerated payment of the death benefit.

General Information

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

What does this supplement provide?

This supplement provides for the accelerated payment of either the full or a partial amount of your or your insured dependent's life insurance death benefit if you or an insured dependent has a terminal condition as defined in this supplement. Accelerated benefits do not apply to accidental death and dismemberment insurance provided by a certificate supplement.

What is a terminal condition?

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

Accelerated Benefit

Who may request an accelerated benefit?

You may request an accelerated payment of the insurance on your life or on the life of a dependent insured under your certificate.

When can an accelerated benefit be requested?

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

- (1) the insurance is in force and all premiums due are fully paid; and
- (2) you are the sole owner of the certificate; and
- (3) the certificate does not have an irrevocable beneficiary; and
- (4) application is made in writing or through any other method made available by us under the group policy and in a form which is satisfactory to us.

Is there a minimum death benefit that can be accelerated?

Yes. The minimum death benefit that can be accelerated is \$10,000, or if less, the full amount of life insurance in force.

Is there a maximum death benefit that can be accelerated?

Yes. The maximum death benefit that can be accelerated is \$1,000,000.

Is a partial accelerated benefit available?

Yes. You may choose to accelerate only a portion of your or your insured dependent's life insurance death benefit, provided the remaining amount of insurance is at least \$25,000. This is called a partial accelerated benefit.

You may apply for a subsequent accelerated benefit at any time. However, the total amount of the accelerated benefits paid cannot exceed the maximum stated above. We may ask for further satisfactory evidence that you or your insured dependent meets all requirements for the accelerated benefit.

When will we pay an accelerated benefit?

We will pay an accelerated benefit upon receipt at our home office of written proof satisfactory to us that you or your insured dependent meets the requirements herein.

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

To whom will we pay the accelerated benefit?

We will pay the accelerated benefit to you unless you validly assign it otherwise.

What is the effect of an accelerated benefit?

If the full amount of your life insurance death benefit is accelerated, your or your insured dependent's insurance under the certificate and any certificate supplements will end.

If a partial amount of your life insurance death benefit is accelerated, insurance will remain in force, and the amount of insurance will be reduced by the amount of insurance that was accelerated. Premiums will be adjusted accordingly.

Termination

When does coverage provided under this supplement terminate?

Accelerated Benefits coverage terminates on the earliest of:

- (1) the date you or your insured dependent is no longer insured under the certificate; or
- (2) the date the Accelerated Benefits Certificate Supplement is terminated from the group policy; or
- (3) the date the group policy is terminated.

Additional Information

Is the request for an accelerated benefit voluntary?

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

- (1) are required by law to use this option to meet the claims of creditors, whether in bankruptcy or otherwise; or
- (2) are required by a government agency to use this option in order to apply for, obtain, or keep a government benefit or entitlement.

Do we have the right to obtain independent medical verification?

Yes. We retain the right to have you or your insured dependent medically examined at our expense to verify your or your insured dependent's medical condition. We may do this as often as reasonably required while an accelerated benefit is being considered or paid. In the case of a difference of opinion, the opinion of our physician will prevail.



Secretary



President

Accidental Death and Dismemberment Certificate Supplement

MINNESOTA LIFE

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General Information

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

What does this supplement provide?

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

Who is eligible for insurance under this supplement?

You are eligible for insurance under this supplement if you are eligible for life insurance coverage under the certificate. Dependents are not eligible for insurance under this supplement.

When does insurance under this supplement become effective?

Insurance becomes effective on the date you become insured for life insurance coverage under the certificate.

Accidental Death and Dismemberment (AD&D) Benefit

What does accidental death or dismemberment by accidental injury mean?

Accidental death or dismemberment by accidental injury as used in this supplement means that your death or dismemberment results, directly and independently of all other causes, from an accidental bodily injury which is unintended, unexpected, and unforeseen. The bodily injury must be evidenced by a visible contusion or wound, except in the case of accidental drowning. The bodily injury must be the sole cause of death or dismemberment.

The injury must occur while your coverage under this supplement is in force. Your death or dismemberment must occur within 180 days (365 days for Quadriplegia, Paraplegia or Hemiplegia) after the date of the injury and while your coverage under this supplement is in force.

In no event will we pay the accidental death or dismemberment benefit where your death or dismemberment is caused directly or indirectly by, results from, or where there is a contribution from, any of the following:

- (1) intentional self-inflicted injury or self destruction, whether sane or insane; or

- (2) suicide or attempted suicide, whether sane or insane; or
- (3) your participation in or attempt to commit a crime, assault, felony, or any illegal activity, regardless of any legal proceedings, or the absence of any legal proceedings, thereto; or
- (4) bodily or mental infirmity, illness or disease; or
- (5) the use of alcohol, drugs, medications, poisons, gases, fumes or other substances taken, absorbed, inhaled, ingested or injected, unless taken upon the advice of a licensed physician in the verifiable prescribed manner and dosage; or
- (6) motor vehicle collision or accident where you are the operator of the motor vehicle and your blood alcohol level meets or exceeds the level at which intoxication is defined in the state where the collision or accident occurred, regardless of any legal proceedings, or the absence of any legal proceedings, thereto; or
- (7) infection, other than infection occurring simultaneously with, and as a direct result of, the accidental injury; or
- (8) medical or surgical treatment or diagnostic procedures or any resulting complications; or
- (9) travel in or descent from any aircraft, except as a fare-paying passenger on a regularly scheduled commercial flight on a licensed passenger aircraft carrier; or
- (10) war or any act of war, whether declared or undeclared; or
- (11) service in the military of any nation.

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

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

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

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 or finger means complete severance at or above the metacarpophalangeal joints (the joints closest to the palm of the hand).

Quadriplegia means total and permanent paralysis of both upper limbs (from the shoulder down including total paralysis of both hands) and both lower limbs (from the waist down including total paralysis of both feet).

Paraplegia means total and permanent paralysis of both lower limbs (from the waist down including total paralysis of both feet). Hemiplegia means total and permanent paralysis of both the upper limb (from the shoulder down including total paralysis of the hand) and lower limb (from the waist down including total paralysis of the foot) on one side of the body.

A benefit is not payable for both loss of one hand and the loss of thumb and index finger of one hand for injury to the same hand as a result of any one accident. Under no circumstance will more than one payment be made for the loss or paralysis of the same limb, eye, finger, thumb, hand, foot, sight, speech, or hearing if one payment has already been made for that loss.

Benefits may be paid for more than one accidental loss but the total amount of AD&D insurance payable under this supplement for any one accident, not including any amount paid according to the terms of the Additional Benefits section of this supplement, will never exceed your full amount of AD&D insurance.

When will the accidental death and dismemberment benefit be payable?

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

The benefit will be paid in a single sum or by any other method agreeable to the payee and us. We will pay interest on the benefit from the date of your death or dismemberment until the date of payment. Interest will be at an annual rate determined by us, but never less than 3% per year compounded annually or the minimum required by state law, whichever is greater.

To whom do we pay the benefit?

We will pay the accidental death benefit to the person or persons entitled to receive your life insurance death benefit under the terms of the certificate. The benefit for other losses sustained by you will be paid to you, if living, otherwise to your estate.

Additional Benefits

Additional benefits are payable to the same person or persons who receive the AD&D benefits. Additional benefits are paid in addition to any AD&D benefits described in the Accidental Death and Dismemberment section. All provisions of this supplement, including but not limited to the "What does accidental death or dismemberment by accidental injury mean?" section shall apply to these additional benefits.

Seatbelt Benefit

What is the seatbelt benefit?

If you die as a result of a covered accident which occurs while you are driving or riding in a private passenger car, we will pay an additional AD&D benefit as shown on the specifications page.

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 you 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 a licensed driver and was not intoxicated, impaired, or under the influence of alcohol or drugs.

Seatbelt means a properly installed seatbelt, 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.

Air Bag Benefit

What is the air bag benefit?

If you die as a result of a covered accident which occurs while you are driving or riding in a private passenger car, we will pay an additional AD&D benefit as shown on the specifications page.

In order to be eligible for this benefit, the following must apply:

- (1) the seat in which you were seated was equipped with a properly installed airbag at the time of the accident; and
- (2) the private passenger car is equipped with seatbelts; and
- (3) a seatbelt was in proper use by you at the time of the accident as certified in the official accident report or by the investigating officer; and

- (4) at the time of the accident, the driver of the private passenger car was a licensed driver and was not intoxicated, impaired, or under the influence of alcohol or drugs.

Airbag means a passive restraint device in a vehicle which inflates upon collision to protect an individual from injury or death.

Termination

When does your coverage under this supplement terminate?

Your coverage ends on the earlier of:

- (1) the date you are no longer covered for life insurance under the group policy; or
- (2) the date the Accidental Death and Dismemberment Certificate Supplement is terminated from the group policy.

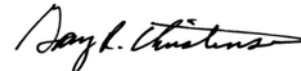
Additional Information

Do we have the right to obtain independent medical verification?

Yes. We retain the right to have you medically examined at our expense when and so often as we may reasonably require whenever a claim is pending and, where not forbidden by law, we reserve the right to have an autopsy performed in case of death.

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

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


Secretary


President

Dependents Term Life Insurance Certificate Supplement

Effective 1/1/2016

MINNESOTA LIFE

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

General Information

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

What does this supplement provide?

This supplement provides insurance on the lives of your eligible dependents.

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 eligible for insurance as an employee or retiree under the group policy; and
- (2) your children, stepchildren, legally adopted children, foster children, and children for whom you have been appointed a legal guardian. Children are eligible from live birth (stillborn or unborn children are not eligible) to the end of the year the child attains age 26.

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

Any dependent child who, subsequent to the effective date of your child life insurance, meets the requirements of this provision will become insured on the date he or she so qualifies.

When will we require evidence of insurability?

Evidence of insurability will be required if:

- (1) the specifications page attached to your certificate states that evidence of insurability is required; or
- (2) the insurance is contributory and you do not enroll for coverage under this supplement within the enrollment period shown on the specifications page attached to your certificate; or
- (3) dependents insurance for which you previously enrolled did not go into effect or was terminated because you failed to make a required premium contribution; or
- (4) during a previous period of eligibility, you failed to submit evidence of insurability that was required

for a dependent or that which was submitted was not satisfactory to us; or

- (5) the dependent spouse increases coverage; or
- (6) the dependent is insured by an individual policy issued under the terms of the conversion right of this supplement.

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, you apply for dependents coverage on forms which are approved by us; and
- (3) we are satisfied with the dependent's evidence of insurability, if we require evidence; and
- (4) we receive the required premium.

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. This does not apply to a newborn child. However, in no event will insurance on a dependent be effective before your insurance is effective.

Death Benefit

What is the amount of life insurance on each insured dependent?

The amount of life insurance on each insured dependent is shown on the specifications page attached to your certificate.

To whom will we pay the death benefit?

The death benefit payable under this supplement will be paid to you if living, otherwise to your estate.

Termination

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

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

- (1) the end of the month coinciding with or following the date the dependent no longer meets the eligibility requirements; or

- (2) 31 days (the grace period) after the due date of any premium contribution which is not paid; or
- (3) the last day for which premium contributions have been made following your written request that insurance on your eligible dependents be terminated; or
- (4) the date you are no longer covered under the group policy.

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

When does this supplement terminate?

This supplement will terminate on the earlier of:

- (1) the date we receive a written request from the policyholder to cancel the Dependents Term Life Insurance Policy Rider; or
- (2) the date the group policy is terminated.

Additional Information

What is the conversion right under this supplement?

If an insured dependent's coverage under this supplement terminates because he or she is no longer eligible, or because of your death, or because of termination or amendment of this supplement, the insurance may be converted to a policy of individual insurance with Minnesota Life.

Conversion may be requested by you, an insured dependent of legal capacity, or the insured dependent's guardian, if applicable. All other conditions and provisions of the conversion right section of your certificate to which this supplement is attached will apply.


Secretary


President

Term Life Insurance Portability Certificate Supplement

MINNESOTA LIFE

Minnesota Life Insurance Company – A Securian Company
Tallahassee Branch Office • P.O. Box 14289 • Tallahassee, Florida 32317-4289

General Information

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

What does this supplement provide?

This supplement provides for continuation of your group life insurance if you no longer meet the eligibility requirements of your certificate, except as provided for herein.

To continue coverage under the provisions of this supplement, you must make a written request and make the first premium contribution within 31 days after insurance provided by the group policy would otherwise terminate. Evidence of insurability will not be required. Coverage provided by this supplement will then be deemed effective retroactive to the beginning of the 31-day period. This date is considered to be your portability date and you are then considered to have portability status.

Who is eligible to continue insurance under this supplement?

You are eligible to continue your group life insurance under the terms of this supplement if you, except as provided by this supplement, no longer meet the eligibility requirements of your certificate due to any of the following:

- (1) you terminate employment, other than on account of retirement; or
- (2) you are no longer in a class eligible for insurance; or
- (3) a class or group of employees insured under the policy are no longer considered eligible and there is no successor plan for that class or group. Successor plan means an insurance policy or policies provided by us or another insurer that replaces insurance provided under this policy.

You will not be eligible to request coverage under this supplement if you:

- (1) terminate employment on account of retirement; or
- (2) have attained the age of 70; or
- (3) were not actively at work due to sickness or injury on the date immediately preceding your portability date; or
- (4) have converted your insurance to an individual life policy under the terms of your certificate's conversion right section; or
- (5) lose eligibility due to a class or group of employees no longer being eligible under the

- policy and there is a successor plan for that class or group of employees; or
- (6) lose eligibility due to termination of the group policy.

What insurance can be continued under this supplement?

Both basic and optional insurance may be continued under this supplement. If you elect to continue your coverage, all certificate supplements applicable to your coverage will be continued as well, except for the Waiver of Premium Certificate Supplement and the Dependent Certificate Supplement, which will terminate upon porting.

What is the minimum amount of insurance that can be continued under this supplement?

The minimum amount of insurance that can be continued on your life under this supplement is \$10,000 for you.

What is the maximum amount of insurance that can be continued under this supplement?

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 \$500,000 for an employee. However, for an insured age 65 or older on his or her portability date, the amount will not be more than 65% of the amount in force on the insured's portability date to a maximum of \$325,000 for an employee.

Will the amount of insurance continued under this supplement change?

Yes. When an insured attains age 65, the amount of insurance on his or her life continued under this supplement will reduce to 65% of the amount of insurance in force on the day prior to attainment of age 65. Insurance terminates at age 70.

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

Yes. You may elect to reduce the amount of insurance on your life. Your remaining amount of insurance must be at least \$10,000.

The amount of insurance continued under this supplement will never increase.

How will premium contributions be paid?

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

Can the premium rate change?

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

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

Yes. At any time after insurance has been continued under the provisions of this supplement, but not beyond 31 days after ported coverage terminates, it may be converted to a policy of individual insurance with Minnesota Life. All other conditions and provisions of the conversion right section of your certificate to which this supplement is attached will apply.

What happens if you again become eligible under your certificate?

If you are continuing coverage under the terms of this supplement, and again meet the eligibility requirements of your certificate, not including the terms of this supplement, you shall no longer be considered to have portability status. Insurance may be continued only under the terms of your certificate, not including this supplement, unless and until you no longer meet the eligibility requirements of your certificate and again return to portability status as provided for herein. You cannot be insured under the group policy as both an active employee and one with portability status.

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

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


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

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

When will insurance continued under this supplement terminate?

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

- (1) your 70th birthday; or
- (2) the date you again meet the eligibility requirements of your certificate, not including the terms of this supplement; or
- (3) 31 days after the due date of any premium contribution which is not made.


Secretary


President

Repatriation Certificate Supplement

MINNESOTA LIFE

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

General Information

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

This supplement does not apply to an insured with portability status.

What does this supplement provide?

This supplement provides for an additional benefit for the preparation and transportation of mortal remains if an insured dies at least 75 miles from his or her principal residence and death benefit is payable under the terms of the certificate to which this supplement is attached.

What is repatriation of mortal remains?

Repatriation of mortal remains means transporting a insured's mortal remains from a morgue or hospital to a morgue, funeral home, or mortuary.

What is the amount of the repatriation additional benefit?

The additional benefit is an amount equal to the lesser of:

- (1) \$5,000; or
- (2) the actual cost of such preparation and transportation.

When will the repatriation benefit be payable?

We will pay the repatriation benefit upon receipt at our home office of written proof satisfactory to us that an insured died at least 75 miles from his or her principal residence and a death benefit is payable under the provisions of the certificate to which this supplement is attached.

To whom will we pay the repatriation benefit?

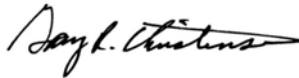
The benefit will be paid to the person who has or who will incur such cost, as evidenced to the satisfaction of Minnesota Life. This may or may not be the beneficiary for the death benefit payable under certificate to which this supplement is attached. Minnesota Life may at its sole discretion pay benefits directly to the facility handling the preparation and/or transportation. All determinations and payments by Minnesota Life will be final and fully release and discharge Minnesota Life from any further liability under this repatriation benefit.

Termination

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

An insured's coverage under this rider terminates upon the earlier of:

- (1) the date the insured is no longer insured for life insurance under the certificate to which this supplement is attached; or
- (2) the date requested by the policyholder to cancel this supplement for its plan.


Secretary


President

Term Life Waiver of Premium Certificate Supplement

MINNESOTA LIFE

Minnesota Life Insurance Company – A Securian Company
Tallahassee Branch Office • P.O. Box 14289 • Tallahassee, Florida 32317-4289

General Information

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

This supplement does not apply to an insured with portability status.

What does this supplement provide?

This supplement provides for continuance of insurance without payment of premium if you become totally disabled.

Waiver of Premium Benefit

What is the waiver of premium benefit?

If you become totally disabled, as defined herein, and the total disability has existed continuously for at least nine months, your life insurance will be continued in force without payment of premium during the uninterrupted continuance of the total disability, subject to the terminating events stated below. Accidental death and dismemberment insurance is not continued under this waiver provision and such coverage shall terminate upon approval of a waiver claim.

What is total disability?

Total disability is a disability which occurs while your insurance is in force and which results from an accidental injury or an illness that continuously prevents you from engaging in any occupation for which you are reasonably suited by education, training, or experience.

You must be under the reasonable and customary care of a physician. For purposes of this supplement, a physician is an individual who is licensed to practice medicine or treat illness in the state in which treatment is received. The physician cannot be you or your spouse, children, parents, grandparents, grandchildren, brothers or sisters, or the spouse of any such individuals.

What proof of total disability do we require?

We require proof satisfactory to us that your total disability:

- (1) meets the definition of total disability; and
- (2) commenced while your insurance was in force; and
- (3) was continuous for at least nine months.

We will, from time to time, also require additional proof satisfactory to us that you continue to be totally disabled.

We may also require that you submit to one or more medical examinations at our expense.

When must we be notified of your disability or death?

We must receive written notice at our home office of your total disability within one year of the date of onset of such disability.

We must receive written notice at our home office within one year of death that you died during the period of continuance provided by this supplement. Proof must be furnished that you continued to be totally disabled during the entire period of continuance until death.

Failure to give notice within the time provided will not invalidate the claim if it is shown that notice was given as soon as reasonably possible and while the group policy is in force.

What is the amount of insurance to be continued under this supplement?

The amount of insurance continued under this supplement without payment of premium is the amount of insurance for which you were insured on the date of the onset of total disability. If the group policy provides for reductions in your amount of insurance based on age, such reductions will apply to your amount of insurance while on waiver claim.

How long will insurance be continued without payment of premium?

Your insurance will be continued, without payment of premium, until the earliest of:

- (1) the date you recover so that you are no longer totally disabled; or
- (2) the date you fail to furnish satisfactory proof of continued total disability when requested or refuse to submit to a required medical examination; or
- (3) for basic and optional life insurance, if you become totally disabled at age 60 or older: one year from the date of onset of your total disability; or
- (4) for optional life insurance only, if you become totally disabled prior to age 60: the end of the calendar month in which you attain age 65.

What happens to your insurance when the waiver of premium benefit ends?

When the waiver of premium benefit ends according to the provision entitled "How long will insurance be continued without payment of premium?," the following will apply:

- (1) If the group policy is in force and you meet the eligibility requirements of your certificate, your

insurance can be continued provided premiums are paid. The first such premium payment must be made within 31 days of the date the waiver of premium benefit ends.

- (2) If the group policy is no longer in force, or you do not meet the eligibility requirements of your certificate, you may convert coverage to an individual policy, as provided for under the conversion right section of the certificate.

Your insurance will end unless continued or converted as provided for herein.

What if you are totally disabled and die before a waiver claim is submitted and approved?

If you die within one year of the date of onset of your total disability, the beneficiary may claim benefits under this supplement even if your insurance terminated and you had not submitted due proof satisfactory to us of your total disability or were continuously disabled for less than nine months. The beneficiary must submit proof satisfactory to us that your total disability, which began while your insurance was in force, continued without interruption until your death.

Termination

When does your coverage under this supplement terminate?

Your coverage terminates on the earliest of:

- (1) the date you are no longer insured under the certificate; or

- (2) the date you attain portability status; or
- (3) the date the Waiver of Premium Certificate Supplement is terminated from the group policy.

Insurance being continued without further payment of premium under the provisions of this supplement will not end due solely to the termination of the Waiver of Premium Certificate Supplement or of the group policy.

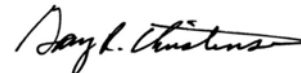
Additional Information

Do premiums have to be paid after you become disabled?

Yes. Premiums have to be paid after you become disabled, but only until we approve your total disability claim. Continued payment prevents the possible loss of your coverage and eligibility if your claim is not approved.

What if you convert the group life insurance to a policy of individual insurance prior to the approval of your total disability claim?

If your insurance has been converted in accordance with the conversion provisions of the certificate, benefits under this supplement will apply only if the converted policy is surrendered without claim, except for refund of premiums.


Secretary


President

Notice

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

MINNESOTA LIFE

If you have any questions regarding your coverage, or if you need assistance in resolving a complaint, you can contact us at:

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

Telephone Number: 651-665-3500

Business hours 7am - 5pm Central Time Monday - Friday

MINNESOTA LIFE

Tallahassee Branch Office • P.O. Box 14289 • Tallahassee, Florida 32317-4289

GROUP TERM LIFE CERTIFICATE OF INSURANCE • PREMIUMS ARE SUBJECT TO CHANGE