

Life Plans

Basic Life Your employer provides Basic Life Coverage for all full time employees in the amount of 200% of your annual salary, to a maximum of \$600,000. Your Basic Life coverage includes Enhanced Accidental Death and Dismemberment coverage equal to one times the employee’s life benefits.

You may elect Voluntary Term coverage.

Premiums will be deducted from your semi-monthly payroll check.

COVERAGE OPTIONS	VOLUNTARY TERM LIFE
Employee Benefit	\$10,000 increments to a maximum of \$500,000. See Cost Illustration page for details.
Accidental Death and Dismemberment	Employee coverage. Maximum 1 times life amount.
Spouse/domestic partner benefit	\$5,000 increments to a maximum of \$250,000. See Cost Illustration page for details.†
Child benefit—children age 14 days to 26 years	You may elect one of the following benefit options: \$1,000, \$5,000, \$10,000. Subject to state limits. See Cost Illustration page for details.

Subject to coverage limits

† Spouse/DP coverage terminates at age 70.

Premiums for Voluntary Life increase in five-year increments. See enrollment form for details.

The Guarantee Issue amount may be subject to reductions by percentage at the ages shown in this summary.

YOUR GUARDIAN PLAN OFFERS:

Enhanced Accidental Death and Dismemberment coverage which includes: catastrophic loss, Child education, Day care expense, Repatriation and Spousal education and retraining.

Low group rates

Family coverage for spouse/domestic partner and children

Reliable claims payments

Did you know?

According to the National Safety Council, someone dies in an accident every six minutes.

PLAN DETAILS	BASIC LIFE	VOLUNTARY TERM LIFE
Guarantee Issue	Guarantee Issue coverage up to \$600,000 per employee	We Guarantee Issue coverage up to: Employee Less than age 65 \$100,000, 65-69 \$10,000. Spouse Less than age 65 \$50,000, 65-69 \$5,000. Dependent children \$10,000.
Premiums	Covered by your company if you meet eligibility requirements	Increase on plan anniversary after you enter next 5 year age group
Portability	No	Yes, with age and other restrictions
Conversion	Yes, with restrictions; see certificate of benefits	Yes, with restrictions; see certificate of benefits
Accelerated Life Benefit	Yes	Yes
Waiver of Premiums	For employees disabled prior to age 60, with premiums waived until age 65, if conditions are met	For employees disabled prior to age 60, with premiums waived until age 65, if conditions met
Benefit Reductions	35% at age 65, 50% at age 70	35% at age 65, 50% at age 70

EXCLUSIONS AND LIMITATIONS

A SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS For Basic Life:

You must be working full-time on the effective date of your coverage; otherwise, your coverage becomes effective after you have completed a specific waiting period.

Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment: (a) exceeding one year; or (b) in an area under travel warning by the US Department of State. Subject to state specific variations.

Dependent life insurance will not take effect if a dependent, other than a newborn, is confined to the hospital or other health care facility or is unable to perform the normal activities of someone of like age and sex.

Evidence of Insurability is required on all late enrollees.

This coverage will not be effective until approved by a Guardian underwriter.

This proposal is hedged subject to satisfactory financial evaluation.

Please refer to certificate of coverage for full plan description.

A SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS for Voluntary Term Life:

You must be working full-time on the effective date of your coverage; otherwise, your coverage becomes effective after you have completed a specific waiting period.

Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment: (a) exceeding one year; or (b) in an area under travel warning by the US Department of State. Subject to state specific variations.

We pay no benefits if the insured's death is due to suicide within two years from the insured's original effective date.

This two year limitation also applies to any increase in benefit. This exclusion may vary according to state law. Dependent coverage will not take effect if a dependent, other than a newborn is confined to a hospital or other health care facility, or is unable to perform the normal activities of someone of like age and sex (may vary by state).

Accelerated Life Benefit is not paid to an employee under the following circumstances: one who is required by law to use the benefit to pay creditors; is required by court order to pay the benefit to another person; is required by a government agency to use the payment to receive a government benefit; or loses his or her group coverage before an accelerated benefit is paid.

GP-1-R-EOPT-96.

Guarantee Issue/Conditional Issue amounts may vary based on age and case size. See your Plan Administrator for details. Late entrants and benefit increases require underwriting approval.

A SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS for AD&D:

We pay no Accidental Death and Dismemberment (AD&D) benefits for an insured where death or dismemberment occurs:

As the result of a disease or a bodily infirmity; By declared or undeclared war or act of war or armed aggression, or while a member of any armed force. May vary by state; Through intentional self-injury; While driving without a valid driver's license; While legally intoxicated; While participating in civil disorder or committing a felony; Traveling on any type of aircraft while having any duties on that aircraft; While voluntarily using a non-prescription controlled substance; GP-1-R-ADCL1-00 et al.

This document is a summary of the major features of the referenced insurance coverage. It is intended for illustrative purposes only and does not constitute a contract. The insurance plan documents, including the policy and certificate, comprise the contract for coverage. The full plan description, including the benefits and all terms, limitations and exclusions that apply will be contained in your insurance certificate. The plan documents are the final arbiter of coverage. Coverage terms may vary by state and actual sold plan. The premium amounts reflected in this summary are an approximation; if there is a discrepancy between this amount and the premium actually billed, the latter prevails.

Life Cost Illustration

Voluntary Life Cost Illustration

Policy Election Amount		Semi-monthly premiums displayed. Policy Election Cost Per Age Bracket								
		< 30	30–34	35–39	40–44	45–49	50–54	55–59	60–64	65–69†
Employee	\$20,000	\$.60	\$.70	\$ 1.00	\$ 1.80	\$ 2.80	\$ 4.30	\$ 7.50	\$ 12.40	\$ 19.80
	\$30,000	\$.90	\$ 1.05	\$ 1.50	\$ 2.70	\$ 4.20	\$ 6.45	\$ 11.25	\$ 18.60	\$ 29.70
	\$40,000	\$ 1.20	\$ 1.40	\$ 2.00	\$ 3.60	\$ 5.60	\$ 8.60	\$ 15.00	\$ 24.80	\$ 39.60
	\$50,000	\$ 1.50	\$ 1.75	\$ 2.50	\$ 4.50	\$ 7.00	\$ 10.75	\$ 18.75	\$ 31.00	\$ 49.50
	\$60,000	\$ 1.80	\$ 2.10	\$ 3.00	\$ 5.40	\$ 8.40	\$ 12.90	\$ 22.50	\$ 37.20	\$ 59.40
	\$70,000	\$ 2.10	\$ 2.45	\$ 3.50	\$ 6.30	\$ 9.80	\$ 15.05	\$ 26.25	\$ 43.40	\$ 69.30
	\$80,000	\$ 2.40	\$ 2.80	\$ 4.00	\$ 7.20	\$ 11.20	\$ 17.20	\$ 30.00	\$ 49.60	\$ 79.20
	\$90,000	\$ 2.70	\$ 3.15	\$ 4.50	\$ 8.10	\$ 12.60	\$ 19.35	\$ 33.75	\$ 55.80	\$ 89.10
	\$100,000	\$ 3.00	\$ 3.50	\$ 5.00	\$ 9.00	\$ 14.00	\$ 21.50	\$ 37.50	\$ 62.00	\$ 99.00
	\$110,000	\$ 3.30	\$ 3.85	\$ 5.50	\$ 9.90	\$ 15.40	\$ 23.65	\$ 41.25	\$ 68.20	\$ 108.90
	\$120,000	\$ 3.60	\$ 4.20	\$ 6.00	\$ 10.80	\$ 16.80	\$ 25.80	\$ 45.00	\$ 74.40	\$ 118.80
	\$130,000	\$ 3.90	\$ 4.55	\$ 6.50	\$ 11.70	\$ 18.20	\$ 27.95	\$ 48.75	\$ 80.60	\$ 128.70
	\$140,000	\$ 4.20	\$ 4.90	\$ 7.00	\$ 12.60	\$ 19.60	\$ 30.10	\$ 52.50	\$ 86.80	\$ 138.60
	\$150,000	\$ 4.50	\$ 5.25	\$ 7.50	\$ 13.50	\$ 21.00	\$ 32.25	\$ 56.25	\$ 93.00	\$ 148.50
	\$160,000	\$ 4.80	\$ 5.60	\$ 8.00	\$ 14.40	\$ 22.40	\$ 34.40	\$ 60.00	\$ 99.20	\$ 158.40
	\$170,000	\$ 5.10	\$ 5.95	\$ 8.50	\$ 15.30	\$ 23.80	\$ 36.55	\$ 63.75	\$ 105.40	\$ 168.30
	\$180,000	\$ 5.40	\$ 6.30	\$ 9.00	\$ 16.20	\$ 25.20	\$ 38.70	\$ 67.50	\$ 111.60	\$ 178.20
	\$190,000	\$ 5.70	\$ 6.65	\$ 9.50	\$ 17.10	\$ 26.60	\$ 40.85	\$ 71.25	\$ 117.80	\$ 188.10
	\$200,000	\$ 6.00	\$ 7.00	\$ 10.00	\$ 18.00	\$ 28.00	\$ 43.00	\$ 75.00	\$ 124.00	\$ 198.00
	\$210,000	\$ 6.30	\$ 7.35	\$ 10.50	\$ 18.90	\$ 29.40	\$ 45.15	\$ 78.75	\$ 130.20	\$ 207.90
	\$220,000	\$ 6.60	\$ 7.70	\$ 11.00	\$ 19.80	\$ 30.80	\$ 47.30	\$ 82.50	\$ 136.40	\$ 217.80
	\$230,000	\$ 6.90	\$ 8.05	\$ 11.50	\$ 20.70	\$ 32.20	\$ 49.45	\$ 86.25	\$ 142.60	\$ 227.70
	\$240,000	\$ 7.20	\$ 8.40	\$ 12.00	\$ 21.60	\$ 33.60	\$ 51.60	\$ 90.00	\$ 148.80	\$ 237.60
	\$250,000	\$ 7.50	\$ 8.75	\$ 12.50	\$ 22.50	\$ 35.00	\$ 53.75	\$ 93.75	\$ 155.00	\$ 247.50

Voluntary Life Cost Illustration *continued*

	< 30	30–34	35–39	40–44	45–49	50–54	55–59	60–64	65–69†
\$260,000	\$7.80	\$9.10	\$13.00	\$23.40	\$36.40	\$55.90	\$97.50	\$161.20	\$257.40
\$270,000	\$8.10	\$9.45	\$13.50	\$24.30	\$37.80	\$58.05	\$101.25	\$167.40	\$267.30
\$280,000	\$8.40	\$9.80	\$14.00	\$25.20	\$39.20	\$60.20	\$105.00	\$173.60	\$277.20
\$290,000	\$8.70	\$10.15	\$14.50	\$26.10	\$40.60	\$62.35	\$108.75	\$179.80	\$287.10
\$300,000	\$9.00	\$10.50	\$15.00	\$27.00	\$42.00	\$64.50	\$112.50	\$186.00	\$297.00
\$310,000	\$9.30	\$10.85	\$15.50	\$27.90	\$43.40	\$66.65	\$116.25	\$192.20	\$306.90
\$320,000	\$9.60	\$11.20	\$16.00	\$28.80	\$44.80	\$68.80	\$120.00	\$198.40	\$316.80
\$330,000	\$9.90	\$11.55	\$16.50	\$29.70	\$46.20	\$70.95	\$123.75	\$204.60	\$326.70
\$340,000	\$10.20	\$11.90	\$17.00	\$30.60	\$47.60	\$73.10	\$127.50	\$210.80	\$336.60
\$350,000	\$10.50	\$12.25	\$17.50	\$31.50	\$49.00	\$75.25	\$131.25	\$217.00	\$346.50
\$360,000	\$10.80	\$12.60	\$18.00	\$32.40	\$50.40	\$77.40	\$135.00	\$223.20	\$356.40
\$370,000	\$11.10	\$12.95	\$18.50	\$33.30	\$51.80	\$79.55	\$138.75	\$229.40	\$366.30
\$380,000	\$11.40	\$13.30	\$19.00	\$34.20	\$53.20	\$81.70	\$142.50	\$235.60	\$376.20
\$390,000	\$11.70	\$13.65	\$19.50	\$35.10	\$54.60	\$83.85	\$146.25	\$241.80	\$386.10
\$400,000	\$12.00	\$14.00	\$20.00	\$36.00	\$56.00	\$86.00	\$150.00	\$248.00	\$396.00
\$410,000	\$12.30	\$14.35	\$20.50	\$36.90	\$57.40	\$88.15	\$153.75	\$254.20	\$405.90
\$420,000	\$12.60	\$14.70	\$21.00	\$37.80	\$58.80	\$90.30	\$157.50	\$260.40	\$415.80
\$430,000	\$12.90	\$15.05	\$21.50	\$38.70	\$60.20	\$92.45	\$161.25	\$266.60	\$425.70
\$440,000	\$13.20	\$15.40	\$22.00	\$39.60	\$61.60	\$94.60	\$165.00	\$272.80	\$435.60
\$450,000	\$13.50	\$15.75	\$22.50	\$40.50	\$63.00	\$96.75	\$168.75	\$279.00	\$445.50
\$460,000	\$13.80	\$16.10	\$23.00	\$41.40	\$64.40	\$98.90	\$172.50	\$285.20	\$455.40
\$470,000	\$14.10	\$16.45	\$23.50	\$42.30	\$65.80	\$101.05	\$176.25	\$291.40	\$465.30
\$480,000	\$14.40	\$16.80	\$24.00	\$43.20	\$67.20	\$103.20	\$180.00	\$297.60	\$475.20
\$490,000	\$14.70	\$17.15	\$24.50	\$44.10	\$68.60	\$105.35	\$183.75	\$303.80	\$485.10
\$500,000	\$15.00	\$17.50	\$25.00	\$45.00	\$70.00	\$107.50	\$187.50	\$310.00	\$495.00

Voluntary Life Cost Illustration *continued*

	< 30	30–34	35–39	40–44	45–49	50–54	55–59	60–64	65–69†
Policy Election Amount									
Spouse/DP									
\$5,000	\$.15	\$.18	\$.25	\$.45	\$.70	\$ 1.08	\$ 1.88	\$ 3.10	\$ 4.95
\$10,000	\$.30	\$.35	\$.50	\$.90	\$ 1.40	\$ 2.15	\$ 3.75	\$ 6.20	\$ 9.90
\$15,000	\$.45	\$.53	\$.75	\$ 1.35	\$ 2.10	\$ 3.23	\$ 5.63	\$ 9.30	\$ 14.85
\$20,000	\$.60	\$.70	\$ 1.00	\$ 1.80	\$ 2.80	\$ 4.30	\$ 7.50	\$ 12.40	\$ 19.80
\$25,000	\$.75	\$.88	\$ 1.25	\$ 2.25	\$ 3.50	\$ 5.38	\$ 9.38	\$ 15.50	\$ 24.75
\$30,000	\$.90	\$ 1.05	\$ 1.50	\$ 2.70	\$ 4.20	\$ 6.45	\$ 11.25	\$ 18.60	\$ 29.70
\$35,000	\$ 1.05	\$ 1.23	\$ 1.75	\$ 3.15	\$ 4.90	\$ 7.53	\$ 13.13	\$ 21.70	\$ 34.65
\$40,000	\$ 1.20	\$ 1.40	\$ 2.00	\$ 3.60	\$ 5.60	\$ 8.60	\$ 15.00	\$ 24.80	\$ 39.60
\$45,000	\$ 1.35	\$ 1.58	\$ 2.25	\$ 4.05	\$ 6.30	\$ 9.68	\$ 16.88	\$ 27.90	\$ 44.55
\$50,000	\$ 1.50	\$ 1.75	\$ 2.50	\$ 4.50	\$ 7.00	\$ 10.75	\$ 18.75	\$ 31.00	\$ 49.50
\$55,000	\$ 1.65	\$ 1.93	\$ 2.75	\$ 4.95	\$ 7.70	\$ 11.83	\$ 20.63	\$ 34.10	\$ 54.45
\$60,000	\$ 1.80	\$ 2.10	\$ 3.00	\$ 5.40	\$ 8.40	\$ 12.90	\$ 22.50	\$ 37.20	\$ 59.40
\$65,000	\$ 1.95	\$ 2.28	\$ 3.25	\$ 5.85	\$ 9.10	\$ 13.98	\$ 24.38	\$ 40.30	\$ 64.35
\$70,000	\$ 2.10	\$ 2.45	\$ 3.50	\$ 6.30	\$ 9.80	\$ 15.05	\$ 26.25	\$ 43.40	\$ 69.30
\$75,000	\$ 2.25	\$ 2.63	\$ 3.75	\$ 6.75	\$ 10.50	\$ 16.13	\$ 28.13	\$ 46.50	\$ 74.25
\$80,000	\$ 2.40	\$ 2.80	\$ 4.00	\$ 7.20	\$ 11.20	\$ 17.20	\$ 30.00	\$ 49.60	\$ 79.20
\$85,000	\$ 2.55	\$ 2.98	\$ 4.25	\$ 7.65	\$ 11.90	\$ 18.28	\$ 31.88	\$ 52.70	\$ 84.15
\$90,000	\$ 2.70	\$ 3.15	\$ 4.50	\$ 8.10	\$ 12.60	\$ 19.35	\$ 33.75	\$ 55.80	\$ 89.10
\$95,000	\$ 2.85	\$ 3.33	\$ 4.75	\$ 8.55	\$ 13.30	\$ 20.43	\$ 35.63	\$ 58.90	\$ 94.05
\$100,000	\$ 3.00	\$ 3.50	\$ 5.00	\$ 9.00	\$ 14.00	\$ 21.50	\$ 37.50	\$ 62.00	\$ 99.00
\$105,000	\$ 3.15	\$ 3.68	\$ 5.25	\$ 9.45	\$ 14.70	\$ 22.58	\$ 39.38	\$ 65.10	\$ 103.95
\$110,000	\$ 3.30	\$ 3.85	\$ 5.50	\$ 9.90	\$ 15.40	\$ 23.65	\$ 41.25	\$ 68.20	\$ 108.90
\$115,000	\$ 3.45	\$ 4.03	\$ 5.75	\$ 10.35	\$ 16.10	\$ 24.73	\$ 43.13	\$ 71.30	\$ 113.85
\$120,000	\$ 3.60	\$ 4.20	\$ 6.00	\$ 10.80	\$ 16.80	\$ 25.80	\$ 45.00	\$ 74.40	\$ 118.80

Voluntary Life Cost Illustration *continued*

	< 30	30–34	35–39	40–44	45–49	50–54	55–59	60–64	65–69†
\$125,000	\$3.75	\$4.38	\$6.25	\$11.25	\$17.50	\$26.88	\$46.88	\$77.50	\$123.75
\$130,000	\$3.90	\$4.55	\$6.50	\$11.70	\$18.20	\$27.95	\$48.75	\$80.60	\$128.70
\$135,000	\$4.05	\$4.73	\$6.75	\$12.15	\$18.90	\$29.03	\$50.63	\$83.70	\$133.65
\$140,000	\$4.20	\$4.90	\$7.00	\$12.60	\$19.60	\$30.10	\$52.50	\$86.80	\$138.60
\$145,000	\$4.35	\$5.08	\$7.25	\$13.05	\$20.30	\$31.18	\$54.38	\$89.90	\$143.55
\$150,000	\$4.50	\$5.25	\$7.50	\$13.50	\$21.00	\$32.25	\$56.25	\$93.00	\$148.50
\$155,000	\$4.65	\$5.43	\$7.75	\$13.95	\$21.70	\$33.33	\$58.13	\$96.10	\$153.45
\$160,000	\$4.80	\$5.60	\$8.00	\$14.40	\$22.40	\$34.40	\$60.00	\$99.20	\$158.40
\$165,000	\$4.95	\$5.78	\$8.25	\$14.85	\$23.10	\$35.48	\$61.88	\$102.30	\$163.35
\$170,000	\$5.10	\$5.95	\$8.50	\$15.30	\$23.80	\$36.55	\$63.75	\$105.40	\$168.30
\$175,000	\$5.25	\$6.13	\$8.75	\$15.75	\$24.50	\$37.63	\$65.63	\$108.50	\$173.25
\$180,000	\$5.40	\$6.30	\$9.00	\$16.20	\$25.20	\$38.70	\$67.50	\$111.60	\$178.20
\$185,000	\$5.55	\$6.48	\$9.25	\$16.65	\$25.90	\$39.78	\$69.38	\$114.70	\$183.15
\$190,000	\$5.70	\$6.65	\$9.50	\$17.10	\$26.60	\$40.85	\$71.25	\$117.80	\$188.10
\$195,000	\$5.85	\$6.83	\$9.75	\$17.55	\$27.30	\$41.93	\$73.13	\$120.90	\$193.05
\$200,000	\$6.00	\$7.00	\$10.00	\$18.00	\$28.00	\$43.00	\$75.00	\$124.00	\$198.00
\$205,000	\$6.15	\$7.18	\$10.25	\$18.45	\$28.70	\$44.08	\$76.88	\$127.10	\$202.95
\$210,000	\$6.30	\$7.35	\$10.50	\$18.90	\$29.40	\$45.15	\$78.75	\$130.20	\$207.90
\$215,000	\$6.45	\$7.53	\$10.75	\$19.35	\$30.10	\$46.23	\$80.63	\$133.30	\$212.85
\$220,000	\$6.60	\$7.70	\$11.00	\$19.80	\$30.80	\$47.30	\$82.50	\$136.40	\$217.80
\$225,000	\$6.75	\$7.88	\$11.25	\$20.25	\$31.50	\$48.38	\$84.38	\$139.50	\$222.75
\$230,000	\$6.90	\$8.05	\$11.50	\$20.70	\$32.20	\$49.45	\$86.25	\$142.60	\$227.70
\$235,000	\$7.05	\$8.23	\$11.75	\$21.15	\$32.90	\$50.53	\$88.13	\$145.70	\$232.65
\$240,000	\$7.20	\$8.40	\$12.00	\$21.60	\$33.60	\$51.60	\$90.00	\$148.80	\$237.60
\$245,000	\$7.35	\$8.58	\$12.25	\$22.05	\$34.30	\$52.68	\$91.88	\$151.90	\$242.55
\$250,000	\$7.50	\$8.75	\$12.50	\$22.50	\$35.00	\$53.75	\$93.75	\$155.00	\$247.50

Voluntary Life Cost Illustration *continued*

	< 30	30–34	35–39	40–44	45–49	50–54	55–59	60–64	65–69†
Policy Election Amount									
Child(ren)									
\$1,000	\$0.09	\$0.09	\$0.09	\$0.09	\$0.09	\$0.09	\$0.09	\$0.09	\$0.09
\$5,000	\$0.43	\$0.43	\$0.43	\$0.43	\$0.43	\$0.43	\$0.43	\$0.43	\$0.43
\$10,000	\$0.85	\$0.85	\$0.85	\$0.85	\$0.85	\$0.85	\$0.85	\$0.85	\$0.85

Refer to Guarantee Issue row on page above for Voluntary Life GI amounts.
As an eligible employee, you can purchase this coverage at the group premium levels illustrated above. For more details see enrollment form.
Subject to coverage limits
Premiums for Voluntary Life Increase in 5 year increments
Spouse/DP coverage premium is based on Employee age.
†Benefit reductions apply. See plan details

AD&D Cost Illustration

Accidental Death and Dismemberment Cost Illustration

Election amount will equal 1 times the election amount for Voluntary Life election.

Employee Policy Election Amount	Semi-monthly Premiums displayed
\$20,000	\$0.30
\$30,000	\$0.45
\$40,000	\$0.60
\$50,000	\$0.75
\$60,000	\$0.90
\$70,000	\$1.05
\$80,000	\$1.20
\$90,000	\$1.35
\$100,000	\$1.50
\$110,000	\$1.65
\$120,000	\$1.80
\$130,000	\$1.95
\$140,000	\$2.10
\$150,000	\$2.25
\$160,000	\$2.40
\$170,000	\$2.55
\$180,000	\$2.70
\$190,000	\$2.85
\$200,000	\$3.00
\$210,000	\$3.15
\$220,000	\$3.30
\$230,000	\$3.45
\$240,000	\$3.60
\$250,000	\$3.75
\$260,000	\$3.90
\$270,000	\$4.05
\$280,000	\$4.20
\$290,000	\$4.35
\$300,000	\$4.50
\$310,000	\$4.65
\$320,000	\$4.80
\$330,000	\$4.95
\$340,000	\$5.10
\$350,000	\$5.25
\$360,000	\$5.40
\$370,000	\$5.55
\$380,000	\$5.70

Employee Policy Election Amount	Semi-monthly Premiums displayed
\$390,000	\$5.85
\$400,000	\$6.00
\$410,000	\$6.15
\$420,000	\$6.30
\$430,000	\$6.45
\$440,000	\$6.60
\$450,000	\$6.75
\$460,000	\$6.90
\$470,000	\$7.05
\$480,000	\$7.20
\$490,000	\$7.35
\$500,000	\$7.50

Estimated premiums; refer to your first paycheck deduction for final rates. Your company has selected Guardian to provide life coverage to eligible employees according to plan terms which have been mutually agreed upon. As an eligible employee, you can purchase this coverage at the group premium levels illustrated above. For more details see enrollment form.

Subject to coverage limits

Benefit reductions apply. See plan details