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New York Life Insurance Company

A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP ANNUAL RENEWABLE TERM LIFE & DEPENDENT LIFE INSURANCE TO AGE 100 CERTIFICATE (CERTIFICATE)

POLICYHOLDER THE TRUSTEE OF THE MILITIA INSURANCE TRUST

POLICY NUMBER G-14109-7 (the "Policy")

CONTRACT STATE MISSOURI

NEW YORK LIFE certifies that, as stated on the When Insurance Takes Effect page(s), a person becomes a COVERED PERSON on the INSURANCE DATE stated on the Individual Schedule of Benefits.

Insurance is subject to: (a) any exclusions and limitations of the Policy and the Certificate and all other terms and conditions of the Policy and the Certificate; and (b) New York Life's underwriting requirements.

No Interim Liability New York Life is not liable for requested initial or restored insurance on any person while a request for such insurance is being processed, even if New York Life has accepted a remittance for such requested insurance. New York Life will not be liable for such insurance if the request is not formally approved and will return any such premium remittance.

Renewal Insurance under the Policy will be renewed automatically on each Anniversary Date if its terms and conditions are met. Insurance for an INSURED MEMBER will be renewed automatically on each CONTRIBUTION DATE for an INSURANCE PERIOD if the terms and conditions of the Policy are met.

On all stated days and dates, insurance begins at 12:01 A.M. and insurance ends at midnight at the place the INSURED MEMBER resides.

Highlights and other details of insurance appear in the Individual Schedule of Benefits page(s). This page is attached to and made a part of the Certificate.

This Certificate replaces all Certificates and Certificate Riders, if any, previously issued to an INSURED MEMBER under the Policy.

Accelerated Death Benefit The Death Benefit will be reduced by 50% if the Accelerated Death Benefit is paid. CONTRIBUTIONS will remain unchanged. New York Life will send the INSURED MEMBER a statement which will specify the effect the payment of the Accelerated Death Benefit will have on the Death Benefit and CONTRIBUTIONS. RECEIPT OF THE ACCELERATED DEATH BENEFIT MAY BE TAXABLE. THE INSURED MAY WANT TO SEEK ASSISTANCE FROM A PERSONAL TAX ADVISOR.

<u>Right To Examine The Certificate For 30 Days</u> Except for TRANSFER INSURANCE, the OWNER will have 30 days from the date of receipt to examine the certificate. If the OWNER does not wish to keep the certificate, it must be surrendered to New York Life within this period. Upon such surrender, New York Life will return any premium paid and insurance will be void from the start.

THIS CERTIFICATE IS DELIVERED IN THE STATE OF NEW YORK AND IS SUBJECT TO ITS LAW

Secretary

Chair, President and CEO

CONTRIBUTORY ANNUAL DIVIDENDS

GMR-G-14109-7-NY-C 2/1/24

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IMPORTANT NOTICE

<u>Certificate</u> New York Life will issue to the Policyholder an individual certificate to be given to each INSURED MEMBER. Such certificate will state: (a) the insurance to which the INSURED MEMBER is entitled; (b) the essential features of the insurance; and (c) to whom benefits are payable. Any conflict between the terms of the individual certificate and the Policy will be decided in favor of the Certificate. The rights and benefits granted to the certificate holder will not be less than those required by New York law. A copy of the Policy is available at the Policyholder's office for inspection at any time during business hours. The INSURED MEMBER should contact New York Life with questions regarding insurance.

Entire Contract The contract consists of the: (a) Policy; (b) attached Application of the Policyholder; (c) signed, written requests for group insurance; and (d) Certificate. Statements made by the Policyholder in the Application and by an ELIGIBLE MEMBER and/or ELIGIBLE DEPENDENT in a request for group insurance are representations, not warranties.

Errors Errors, or delays in keeping records, will: (a) not revoke insurance otherwise in force; (b) not continue insurance which otherwise would have ended; and (c) upon discovery, require fair adjustment of remittances and/or insurance to correct the error.

Examination New York Life, at its own expense, has the right and opportunity to:

- 1. have a person, for whom claim is made, examined: (a) physically; (b) psychologically; and/or (c) psychiatrically; to determine the existence and/or cause of any loss, other than loss of life. This right can be used as often as it is reasonably required while a claim is pending;
- 2. have an INSURED MEMBER'S financial records audited, as often as New York Life may reasonably require, but not more than once every 12 months, for the sole purpose of confirming that an INSURED MEMBER is not actively employed while receiving the Waiver of Contribution Benefit; and/or
- 3. in the event of loss of life: (a) reasonably request an autopsy where it is not forbidden by law or religious belief; and/or (b) examine the medical records of the deceased; to determine the cause of the loss.

<u>Incontestability</u> Except for provisions which relate to eligibility for insurance and for nonpayment of CONTRIBUTIONS, New York Life cannot contest the validity of any initial or restored insurance on a COVERED PERSON after it has been in force for two years prior to the contest under the Policy during such COVERED PERSON'S lifetime. To contest, New York Life will only rely upon: (a) written statements signed by the INSURED MEMBER and/or his or her INSURED DEPENDENT in applying for such insurance: (1) under the Policy; and/or (2) under another policy, if such statements are used to allow insurance to take effect under or be transferred to the Policy; and/or (b) the provisions on the When Insurance Takes Effect page(s). A copy of all statements must be furnished to such person or to his or her beneficiary. Such statements are representations, not warranties. The time insured under: (a) the PREVIOUS POLICY for TRANSFER INSURANCE; or (b) a policy being surrendered and replaced; will also be used to determine if the two year contestable period has elapsed.

<u>Misstatements</u> Subject to the Errors and Incontestability sections, if relevant statements of age were not accurate for any person, a fair adjustment of remittances and/or insurance will be made as follows:

- 1. if the age has been overstated: (a) the amount of remittance will be adjusted to reflect the difference between the remittance applicable at the correct age and the incorrect remittance previously paid; and (b) the Policyholder will refund the amount of any corresponding adjustment, except that: If insurance has been erroneously reduced because such person was thought to have reached a higher age bracket, as stated on the Schedule page(s), the amount of insurance and remittance will be adjusted based on such person's correct age; or
- 2. if the age has been understated: (a) the amount of insurance will be adjusted downward for any INSURANCE PERIOD, in proportion to the ratio of the charges previously paid for such INSURANCE PERIOD to the prescribed charges at the correct age for such INSURANCE PERIOD; and (b) there will be no adjustment to any remittance previously paid, except that: If insurance was not reduced because such person was thought to have been in a lower age bracket, as stated on the Schedule page(s), the amount of insurance and remittance will be adjusted based on such person's correct age.

Policy Changes The Policy can be changed: (a) at any time, by written agreement between New York Life and the Policyholder; (b) without the consent of any other person; and (c) with approval of the New York State Insurance Department, as applicable. Changes will be valid only if evidenced by an amendment to the Policy. Such amendment must be signed by the Policyholder and New York Life. The Policy may also be changed by New York Life by amendment to the Policy and without the consent of the Policyholder or any other person, if such amendment is signed by New York Life and: (a) results from the exercise of a right reserved to New York Life in the Policy; or (b) is issued to conform to any law and/or regulation which, in New York Life's judgment, applies to the insurance under the Policy.

IMPORTANT NOTICE

<u>Termination By The Policyholder</u> The Policyholder may terminate the Policy, on any premium date after the first Anniversary Date, by giving written notice to New York Life at least 90 days in advance.

<u>Termination By New York Life</u> New York Life may terminate the Policy, on any premium date after the first Anniversary Date, by giving written notice to the Policyholder at least 90 days in advance.

WHEN INSURANCE TAKES EFFECT

Requests An APPLICANT can request to:

- 1. become initially insured for MEMBER INSURANCE or MEMBER INSURANCE and DEPENDENT INSURANCE for each of his or her ELIGIBLE DEPENDENTS, subject to the Options Available section stated on the Schedule page(s); TRANSFER INSURANCE on each APPLICANT or each APPLICANT and each of his or her ELIGIBLE DEPENDENTS will automatically be transferred to the Policy on the TRANSFER DATE, except that: New York Life will not duplicate liability which remains with the carrier of the PREVIOUS POLICY; and/or
- 2. restore insurance on each former COVERED PERSON for whom insurance ended, if: (a) insurance ended for such person because the CONTRIBUTION was not paid; and (b) the proposed COVERED PERSON is an ELIGIBLE MEMBER or an ELIGIBLE DEPENDENT. If the request is approved, all terms and conditions of the Policy applicable to the person at the time insurance ended will be reinstated, subject to any changes in the Policy.

For Insurance To Take Effect For initial insurance or restoration of insurance to take effect:

- 1. the APPLICANT must give the Policyholder a completed, written request for the insurance on a form satisfactory to New York Life. For TRANSFER INSURANCE, New York Life will treat a request for insurance submitted to the carrier of the PREVIOUS POLICY as a request for insurance submitted to New York Life. A written request for restoration must be given within 24 months after the date such CONTRIBUTION was due;
- 2. the APPLICANT must give New York Life satisfactory medical evidence of insurability, if such evidence is required, for the proposed COVERED PERSON. Such evidence is not required for: (a) TRANSFER INSURANCE; (b) Dependent Life Insurance on an ELIGIBLE CHILD; or (c) the amount of insurance provided to a NEW MEMBER during the INITIAL PERIOD and the election to continue such amount of insurance when the INITIAL PERIOD ends;
- 3. the APPLICANT must pay the CONTRIBUTION no later than the initial CONTRIBUTION DATE, except that: CONTRIBUTIONS are not required during the INITIAL PERIOD for a NEW MEMBER who becomes insured under the Policy. Any contribution paid under the PREVIOUS POLICY for such insurance, covering the period on or after the INSURANCE DATE, will be applied to insurance under the Policy. For restoration of insurance, all references to the payment of CONTRIBUTION include all unpaid CONTRIBUTIONS from the date insurance ended;
- 4. the proposed COVERED PERSON must be performing the normal activities of a person in good health of like age on the INSURANCE DATE (the normal activities requirement does not apply to Dependent Life Insurance on an ELIGIBLE CHILD);
- 5. New York Life must approve the insurance; and
- 6. for DEPENDENT INSURANCE, the APPLICANT must be an INSURED MEMBER on the INSURED DEPENDENT'S INSURANCE DATE.

For Non-Contributory Basic Benefit Insurance to take effect, the SPONSOR must pay the CONTRIBUTION.

Subject to the exception stated below, the effective date of the insurance is the first day of the policy month on or after the day all these requirements are met.

Subsequent Child - If the APPLICANT has DEPENDENT INSURANCE in force for children, any child he or she later acquires will become insured on the day such child first becomes an ELIGIBLE CHILD.

Exception: The INSURANCE DATE for a proposed COVERED PERSON who was not performing the normal activities of a person in good health of like age on the date such insurance would otherwise have taken effect, will take effect on the day the proposed COVERED PERSON is performing such normal activities, if: (a) such day is within three months of the date insurance would otherwise have taken effect; (b) for DEPENDENT INSURANCE, the APPLICANT is an INSURED MEMBER or a SURVIVOR SPOUSE on that day; and (c) the proposed COVERED PERSON is still eligible to obtain the insurance on that day. If these requirements are not satisfied, insurance will not take effect.

No benefits will be paid for any loss or disability occurring before the INSURANCE DATE. Exception: Any claims incurred following the Administrator's receipt of the payroll allotment form and prior to the first initial premium allotment deduction may be considered by New York Life.

When Non-Contributory Basic Benefit Insurance Takes Effect - The \$1,000 Non-Contributory Basic Benefit Insurance Insurance automatically takes effect on the ELIGIBLE MEMBER'S enlistment date.

LIFE AND DEPENDENT LIFE INSURANCE

New York Life will pay a benefit for a COVERED PERSON'S: (a) Terminal Illness; or (b) death; in accordance with all of the following:

<u>Accelerated Death Benefit</u> The Accelerated Death Benefit is available to a COVERED PERSON who has a Terminal Illness ("Terminal Illness" is a medical condition where the patient has a life expectancy of 12 months or less).

<u>Death Benefit</u> The Death Benefit is the benefit payable for a COVERED PERSON'S death.

For The Benefit To Be Paid

Accelerated Death Benefit For the Accelerated Death Benefit to be paid: (1) the Policyholder must receive a completed, written request for the benefit on a form satisfactory to New York Life; and (2) New York Life must receive satisfactory medical proof, in writing, that the COVERED PERSON has been diagnosed as having a Terminal Illness.

<u>Death Benefit</u> For the Death Benefit to be paid, New York Life must receive satisfactory proof of the COVERED PERSON'S death.

What Benefit Is Payable The benefit payable is as follows:

Accelerated Death Benefit The Accelerated Death Benefit payable is 50% of the amount of insurance in force on the COVERED PERSON'S life on the date New York Life approves the request for the Accelerated Death Benefit, except that: If a reduction of insurance due to age is scheduled within one year of the date New York Life approves such request, the benefit payable will be 50% of such reduced amount of insurance. The benefit will be paid in a lump sum. The benefit is payable once while the COVERED PERSON is insured under the Policy, whether insurance is continuous or interrupted.

<u>Death Benefit</u> The Death Benefit payable is the amount of insurance in force for the COVERED PERSON on the date of his or her death, less the amount paid on his or her behalf under the Accelerated Death Benefit. A single payment is made. New York Life will pay interest on the Death Benefit from the date of the COVERED PERSON'S death until the date of payment. Interest will be paid at the greater of the annual interest rate declared by New York Life for policy proceeds left with New York Life under Option 1 (Proceeds at Interest) or the minimum required by state law. New York Life will refund any CONTRIBUTION paid beyond the date of the COVERED PERSON'S death.

Beneficiary

Accelerated Death Benefit The Accelerated Death Benefit will be paid to the OWNER, except that: If New York Life has received satisfactory proof of the OWNER'S death before such payment is made, payment will be made in accordance with the Death Benefit subsection of the Beneficiary section.

<u>Death Benefit</u> Except as stated below, the Death Benefit will be paid to the designated beneficiary(ies). However, if at the time of the COVERED PERSON'S death there is no surviving beneficiary for any designated share of the Death Benefit, such share will be paid to the OWNER, if living, otherwise to the executor or administrator of the OWNER'S estate, or at the option of New York Life, to the OWNER'S surviving relative(s) in the following order of survival: lawful married spouse; children equally; parents equally; or brothers and sisters equally.

In addition, if a beneficiary dies within 15 days after the COVERED PERSON, New York Life will consider such beneficiary to have predeceased such COVERED PERSON, if payment has not already been made.

For MEMBER INSURANCE, the OWNER can designate a beneficiary or change his or her beneficiary designation.

For an INSURED SPOUSE or INSURED CHILD, the automatic beneficiary is the OWNER. However, the OWNER can designate a beneficiary or change his or her beneficiary designation.

One or more beneficiaries can be designated. If more than one beneficiary is designated, they can be classified as Primary Beneficiary ("Primary Beneficiary" is the person(s) named to first receive the proceeds of the insurance), or Contingent Beneficiary ("Contingent Beneficiary" is the person(s) named to receive the proceeds of the insurance if no Primary Beneficiary survives). Each beneficiary's share can be stated. If more than one beneficiary is designated and if their respective interests have not been stated, they will share alike.

LIFE AND DEPENDENT LIFE INSURANCE

Facility Of Payment - New York Life has the right to pay up to \$1,000 of the benefit to anyone equitably entitled who has incurred expenses for the COVERED PERSON'S burial ("payee").

Forfeiture Of Payment - No payment will be made to any person(s) if such person(s) is the principal or an accomplice in willfully bringing about the death of the COVERED PERSON. Payment will be made in accordance with this section as though that person(s) had died before the COVERED PERSON.

Individual Policy - Subject to the Facility Of Payment exception and unless otherwise stated by the OWNER, the benefit will be paid to the OWNER'S beneficiary last recorded under an individual policy, if: (a) application for the individual policy was made under a conversion right; (b) the benefit is not payable under the individual policy; (c) the individual policy, if issued, is surrendered to New York Life; and (d) the benefit is paid under the Policy.

<u>Transfer Of Ownership</u> The OWNER can transfer all or any part of incidents of ownership of the insurance. The Policyholder agrees to accept CONTRIBUTIONS directly from the new OWNER.

Request Procedure To: (a) designate a beneficiary or change a beneficiary designation; and/or (b) transfer ownership; New York Life must be given a completed, written request on a form satisfactory to it. Such request must be approved and received by or on behalf of New York Life. The request will take effect as of the date it was received, subject to any payment made or any other action taken by or on behalf of New York Life before receipt of such request. Requests in effect under the PREVIOUS POLICY for TRANSFER INSURANCE will remain in effect under the Policy until changed.

WHEN INSURANCE ENDS

Except as stated on the Continuance page(s), a COVERED PERSON'S insurance will end on the earliest of:

- 1. for an INSURED MEMBER, the last day of the INSURANCE PERIOD during which the INSURED MEMBER is no longer an active member of the SPONSOR providing the insurance, including a SPONSOR terminating SPONSOR status;
- 2. the COVERED PERSON'S TERMINATION AGE DATE:
- 3. with regard to the \$1,000 Non-Contributory Basic Benefit, the last day of the month on or after the day the INSURED MEMBER is no longer an active member of the SPONSOR;
- 4. the last day of the INITIAL PERIOD if a NEW MEMBER'S first CONTRIBUTION is not paid;
- 5. the last day of the Grace Period, stated below, that follows the end of the INSURANCE PERIOD for which the last CONTRIBUTION has been paid for the COVERED PERSON.
 - Grace Period The COVERED PERSON is entitled to a Grace Period of 180 days for the payment of each CONTRIBUTION. During the Grace Period, the COVERED PERSON'S insurance continues in force. If the CONTRIBUTION due is not paid before the end of the Grace Period, the COVERED PERSON'S insurance automatically ends on the last day of such Grace Period;
- 6. the day before the day the amount of insurance in force on a COVERED PERSON, less the amount of any Accelerated Death Benefit paid on such COVERED PERSON'S behalf, equals zero or less;
- 7. for an INSURED DEPENDENT, the date the INSURED MEMBER'S MEMBER INSURANCE ends, except that, the INSURED MEMBER may choose to continue his or her DEPENDENT INSURANCE if such MEMBER INSURANCE ended because payment of the Accelerated Death Benefit reduced the amount of his or her MEMBER INSURANCE to zero or less;
- 8. for an INSURED SPOUSE, the last day of the INSURANCE PERIOD during which such INSURED SPOUSE ceases to be the lawful married spouse of the INSURED MEMBER;
- 9. for an INSURED CHILD, the last day of the INSURANCE PERIOD during which such INSURED CHILD: (a) marries; or (b) with respect to a stepchild, is no longer substantially dependent upon the INSURED MEMBER for support, or with respect to a natural child, stepchild, or adopted child, if the INSURED MEMBER is deceased, is no longer substantially dependent upon the family for support;
- 10. the later of: (a) the date stated in the COVERED PERSON'S written request to end the insurance; or (b) the date New York Life receives the COVERED PERSON'S written request to end the insurance; or
- 11. the day before the day the Policy ends or is changed to end insurance for the group of insureds to which the COVERED PERSON belongs.

Exception:

An INSURED MEMBER may continue Contributory Coverage for himself or herself and any INSURED DEPENDENT(S), after leaving the National Guard provided CONTRIBUTION is paid when due. Such insurance is subject to a 50% reduction at age 60, age 70 and age 75 with CONTRIBUTIONS remaining the same. The Contributory Coverage will end on the last day of the month in which the INSURED MEMBER attains AGE 100.

CONTINUANCE

Insurance in force on each COVERED PERSON will continue, after the date it would otherwise have ended as stated on the When Insurance Ends page(s), in accordance with all of the following:

<u>Handicapped Child Benefit</u> Insurance in force will continue for an INSURED CHILD who has: (a) reached the TERMINATION AGE DATE; and (b) a Handicap ("Handicap" means a physical or mental disability which: (1) renders the INSURED CHILD incapable of self-sustaining employment; and (2) requires dependency on the INSURED MEMBER for support or, in the event of the INSURED MEMBER'S death, on the family for support); if:

- 1. New York Life receives satisfactory proof of such Handicap within 31 days after the date such child's insurance would otherwise have ended due to reaching the TERMINATION AGE DATE; and
- 2. the CONTRIBUTION is paid.

The benefit will end on the earliest of the following:

- 1. the last day of the INSURANCE PERIOD during which such child is no longer so Handicapped;
- 2. the date New York Life does not receive the required proof that such child remains Handicapped as required by New York Life but no more frequently than annually; or
- 3. the date insurance would otherwise end as stated on the When Insurance Ends page(s).

If an INSURED CHILD'S insurance is terminated, he or she may convert all or part of the amount by which it was terminated to an individual policy, as described in the Conversion Rights page(s). Please refer to the notice requirements set forth in the Conversion Rights section of the Certificate.

Survivor Dependent Benefit DEPENDENT INSURANCE in force on the day the INSURED MEMBER dies will continue, if:

- 1. the conversion right available upon the death of the INSURED MEMBER has not been exercised; and
- 2. the CONTRIBUTION is paid.

The amount of such insurance is subject to the changes at the AGES stated on the Schedule page(s). The SURVIVOR SPOUSE can change the Option in accordance with the applicable provision of the Requests section on the When Insurance Takes Effect page(s).

The benefit will end on the date insurance would otherwise end as stated on the When Insurance Ends page(s).

If a SURVIVOR DEPENDENT'S insurance is reduced or terminated, he or she may convert all or part of the amount by which it was reduced or terminated to an individual policy, as described in the Conversion Rights page(s). Please refer to the notice requirements set forth in the Conversion Rights section of the Certificate.

<u>Termination Of Membership Benefit</u> Insurance in force on the day the INSURED MEMBER'S active membership with the SPONSOR providing the insurance ends, will continue if: (a) the INSURED MEMBER was continuously insured under the Policy for one year when active membership ended; (b) the conversion right available upon termination of membership has not been exercised; and (c) the INSURED MEMBER makes written election to continue his or her insurance as an inactive associate member of the SPONSOR within 31 days after the date insurance would otherwise have ended.

The benefit will end on the date insurance would otherwise end as stated on the When Insurance Ends page(s).

If an INSURED MEMBER'S insurance is reduced or terminated, he or she may convert all or part of the amount by which it was reduced or terminated to an individual policy, as described in the Conversion Rights page(s). Please refer to the notice requirements set forth in the Conversion Rights section of the Certificate.

<u>Waiver Of Contribution Benefit</u> Insurance in force on the date the INSURED MEMBER becomes TOTALLY DISABLED will continue without the payment of CONTRIBUTIONS, if:

- 1. the INSURED MEMBER becomes TOTALLY DISABLED while insured under the Policy and before age 60;
- 2. New York Life receives satisfactory proof that the INSURED MEMBER has been TOTALLY DISABLED for at least 180 days. Such proof must be received within one year after the date such TOTAL DISABILITY began. If it is not possible to give proof within such period, it must be given as soon as reasonably possible;

CONTINUANCE

- 3. all individual policies, converted from this insurance after the date the INSURED MEMBER became TOTALLY DISABLED, except those obtained upon reduction(s) of insurance, are surrendered to New York Life without claim, except for a return of premium paid, less dividends and indebtedness; and
- 4. New York Life approves the benefit.

The amount of insurance continued under this benefit is subject to the changes at the AGES stated on the Schedule page(s). All or any part of insurance which is reduced can be converted as stated on the Conversion Rights page(s). While the benefit is in effect: (a) this is the only conversion right available; and (b) insurance cannot be increased on the COVERED PERSON. Please refer to the notice requirements set forth in the Conversion Rights section of the Policy. A Conversion Right is available upon termination of this benefit under the Policy.

CONTRIBUTIONS paid for any INSURANCE PERIOD after the date such TOTAL DISABILITY began until such CONTRIBUTIONS are waived will be refunded for up to one year before the date proof of the INSURED MEMBER'S TOTAL DISABILITY was received by New York Life. CONTRIBUTIONS should continue until New York Life approves the benefit.

The benefit will end on the earliest of the date:

- 1. the INSURED MEMBER is no longer TOTALLY DISABLED;
- 2. New York Life does not receive the required proof that the INSURED MEMBER remains TOTALLY DISABLED. Such proof must be received when requested by New York Life during the period of Total Disability. Failure to give such proof shall not invalidate or reduce any claim if it shall be shown not to have been reasonably possible to give such notice and that notice was given as soon as was reasonably possible;
- 3. the INSURED MEMBER does not submit to an examination required by New York Life by a doctor it selects; or
- 4. the INSURED MEMBER reaches AGE 70.

Insurance in force on the date the benefit ends will continue, except as stated on the When Insurance Ends page(s).

Insurance on an INSURED DEPENDENT will end before the benefit ends, if such dependent: (1) reaches his or her TERMINATION AGE DATE; (2) for an INSURED SPOUSE, ceases to be the lawful married spouse of the INSURED MEMBER; or (3) for an INSURED CHILD: (a) marries; or (b) with respect to a stepchild, is no longer substantially dependent upon the INSURED MEMBER for support; or with respect to a natural child, stepchild, or adopted child, if the INSURED MEMBER is deceased, is no longer substantially dependent upon the family for support.

Discontinuance of the Policy will not terminate the benefit.

CONVERSION RIGHTS

A COVERED PERSON can convert insurance that ends or reduces to an individual policy, without giving New York Life medical evidence of insurability, in accordance with all of the following:

When A Conversion Right Is Available A conversion right is available at any time to each COVERED PERSON for whom insurance ends or reduces, if insurance ends or reduces for any reason other than: (a) nonpayment of the CONTRIBUTION; or (b) the COVERED PERSON requests to end such insurance; except that a conversion right is available if a COVERED PERSON requests to end insurance because, to continue coverage, they are required to contribute more than 133% of the net premiums computed according to the Commissioners 1960 Standard Group Mortality Table at 3.0% interest.

<u>Conversion Period Benefit</u> The maximum amount of insurance the COVERED PERSON is eligible to convert will continue without payment of the CONTRIBUTION during the Conversion Period unless a successful application for conversion has been made. ("Conversion Period" is the 31 day period, immediately after the date insurance would otherwise end or is reduced, during which a COVERED PERSON can exercise a conversion right. The 31 day period may be extended as stated in the Notice Of Conversion Right section, below.) If the COVERED PERSON dies during the Conversion Period, including any extended notice period, the amount of insurance he or she would have been able to convert will be the Death Benefit payable for such COVERED PERSON'S death.

What Amount Can Be Converted The COVERED PERSON can convert all or any part of the insurance that ends or reduces. However, if insurance is terminated by the Policyholder or New York Life, the amount of insurance that may be converted will be reduced by the amount of life insurance for which the COVERED PERSON may be or may become eligible for under any group life insurance policy issued or reinstated by New York Life or another insurer within 45 days following termination. If insurance ends due to the COVERED PERSON'S total and permanent disability, the amount available to convert will be reduced by the amount of any life insurance which is replaced within 45 days following the end of the insurance under the Policy.

Individual Policy The individual policy requirements are as follows: (a) a completed, written application for the individual policy must be given to New York Life, within the Conversion Period, on a form satisfactory to New York Life; (b) the first premium for the individual policy must be paid within the Conversion Period; (c) the premium for the individual policy will be based upon the form and amount of the policy at the COVERED PERSON'S then attained age and the employee's class of risk under the group policy; (d) the individual policy will take effect on the day coverage ends under the group policy; (e) the individual policy may provide that any statement made by the person insured under the group policy relating to his or her insurability under such group policy may be used in contesting the validity of his or her insurance under the group policy to the same extent that such statement could have been used in contesting the validity of his or her insurance under the group policy if his or her insurance under the group policy had not ceased; (f) the individual policy shall not exclude or restrict liability in the event of suicide of the insured after two years from the date that the insured became covered under the group policy; (g) the individual policy will be on any of the forms customarily offered by New York Life, except term insurance. However, if an INSURED MEMBER'S coverage ceases because of termination of employment due to total and permanent disability, the INSURED MEMBER shall be entitled to elect term insurance; and (h) the individual policy may at the COVERED PERSON'S option be preceded by one-year term insurance with the premium payable in any premium mode customarily offered by New York Life and as may be elected by such COVERED PERSON.

Notice Of Conversion Right If an event occurs that would entitle the COVERED PERSON to convert his or her insurance, as stated in the When A Conversion Right Is Available section above, New York Life will notify the COVERED PERSON of his or her conversion right and its duration within 15 days before or after the happening of such event. If such notice is given to the COVERED PERSON within 15 days after the happening of such event, the COVERED PERSON has 31 days from the date of such event to exercise his or her conversion right. If such notice is given to the COVERED PERSON more than 15 days, but less than 90 days after the happening of such event, the COVERED PERSON'S Conversion Period will be extended for 45 days after the giving of such notice. If such notice is not given to the COVERED PERSON within 90 days after the happening of such event, the COVERED PERSON'S Conversion Period will expire at the end of such 90 days. Written notice presented to the COVERED PERSON or mailed to his or her last known address by New York Life or the EMPLOYER will be deemed notice.

DEFINITIONS

AGE means the attained age on the first day of any INSURANCE PERIOD. References to Age in any heading means "AGE".

APPLICANT means an ELIGIBLE MEMBER or an INSURED MEMBER who meets the requirements of an ELIGIBLE MEMBER.

CONTRIBUTION means the applicable full periodic payment toward the premium, received by the Policyholder, which is necessary for insurance to take effect on the INSURANCE DATE and/or for insurance to continue in force under the Policy. CONTRIBUTION is determined by the Policyholder and is due on each CONTRIBUTION DATE.

CONTRIBUTION DATE means the following dates on or before which the CONTRIBUTION must be paid to the Policyholder:

- 1. initially: (a) the INSURANCE DATE; (b) if by agreement between the Policyholder and New York Life and without individual selection, within 180 days after the INSURANCE DATE; or (c) for a NEW MEMBER who requests to continue insurance provided during the INITIAL PERIOD, on or before the last day of the INITIAL PERIOD; and
- 2. thereafter, the applicable annual, semiannual, quarterly, or monthly date based on the mode of payment elected by the INSURED MEMBER and accepted by the Policyholder.

Modes of payment in effect under the PREVIOUS POLICY for TRANSFER INSURANCE will remain in effect under the Policy until changed.

COVERED PERSON means an INSURED MEMBER or an INSURED DEPENDENT.

DEPENDENT INSURANCE means an INSURED MEMBER'S insurance for his or her INSURED DEPENDENT(S).

ELIGIBLE DEPENDENT means a person who is in one of the following classes:

Class 1: An APPLICANT'S:

- 1. lawful married spouse, who:
 - a. is identified on the request for group insurance;
 - b. has not exceeded the MAXIMUM ELIGIBILITY AGE;
 - c. is not a resident of an EXCLUDED STATE;
 - d. is not an ELIGIBLE MEMBER; and
 - e. is not eligible to become insured under the Policy for TRANSFER INSURANCE as a dependent; or
- 2. natural child, stepchild, or adopted child who:
 - a. is not married:
 - b. with respect to a stepchild, is substantially dependent upon the APPLICANT for support; or if the APPLICANT is deceased, the natural child, stepchild, or adopted child is substantially dependent upon the family for support;
 - c. is at least 15 days old;
 - d. has not exceeded the MAXIMUM ELIGIBILITY AGE;
 - e. is not a resident of an EXCLUDED STATE, except that this requirement does not apply if the APPLICANT has DEPENDENT INSURANCE in force for children; and
 - f. is not eligible to become insured under the Policy for TRANSFER INSURANCE as a dependent; or

Class 2: An ELIGIBLE MEMBER'S:

- 1. spouse, identified on the request for group insurance; or
- 2. unmarried child(ren);

who has not reached the TERMINATION AGE DATE on the TRANSFER DATE, who was insured as a dependent under the PREVIOUS POLICY and for whom such ELIGIBLE MEMBER has TRANSFER INSURANCE.

If both parents of an ELIGIBLE CHILD are INSURED MEMBERS, such child will be considered an ELIGIBLE DEPENDENT of only one parent.

DEFINITIONS

ELIGIBLE DEPENDENT does not include a person for whom dependent insurance is requested under the Policy by reason of the APPLICANT'S membership with a SPONSOR, if the dependent is currently insured under an individual policy obtained by exercise of a conversion right which was available under the Policy or any other policy issued to the Policyholder by New York Life upon termination of such membership.

ELIGIBLE CHILD does not include any child currently insured for group dependent life insurance under any other group policy issued to the Policyholder by New York Life.

References to **ELIGIBLE SPOUSE** and **ELIGIBLE CHILD(REN)** mean the same as ELIGIBLE DEPENDENT spouse and ELIGIBLE DEPENDENT child(ren), respectively.

References to an adopted child include a child who is in the custody of the APPLICANT, pursuant to an interim court order of adoption or placement of adoption, whichever comes first, which vests temporary care of the child with the APPLICANT regardless of whether a final order granting adoption is finally issued.

ELIGIBLE MEMBER means a person who is in one of the following classes:

Class 1: A person who:

- 1. is an active member or associate member of the SPONSOR;
- 2. has not exceeded the MAXIMUM ELIGIBILITY AGE;
- 3. is not a resident of an EXCLUDED STATE; and
- 4. is not eligible to become insured under the Policy for TRANSFER INSURANCE; or

Class 2: A person who:

- 1. is an active member or associate member of the SPONSOR;
- 2. has TRANSFER INSURANCE; and
- 3. has not reached the TERMINATION AGE DATE on the TRANSFER DATE.

ELIGIBLE MEMBER does not include a person who requests insurance under the Policy by reason of membership in a SPONSOR, if such person is currently insured under an individual policy obtained by exercise of the conversion right which was available under the Policy or any other policy issued to the Policyholder by New York Life upon termination of such membership.

EXCLUDED STATE means: (a) the Province Of Quebec; and (b) anywhere else, except the fifty states of the United States Of America, the District Of Columbia, Puerto Rico or any other province of the Dominion Of Canada.

INITIAL PERIOD means the span of time beginning on a NEW MEMBER'S INSURANCE DATE and ending on the date agreed to by the Policyholder and New York Life during which \$10,000 of Life Insurance is provided to the NEW MEMBER on a non-contributory basis.

INSURANCE DATE means the date that initial or restored insurance takes effect as stated in the For Insurance To Take Effect section of the When Insurance Takes Effect page.

INSURANCE PERIOD means the span of time from a CONTRIBUTION DATE through the day before the next CONTRIBUTION DATE, during which insurance continues, if the CONTRIBUTION for such span of time is paid.

INSURED DEPENDENT means a person who: (a) was an ELIGIBLE DEPENDENT on his or her first INSURANCE DATE; (b) became insured under the Policy, as approved by New York Life; and (c) remains insured under the Policy, including as a SURVIVOR DEPENDENT. References to **INSURED SPOUSE** and **INSURED CHILD(REN)** mean the same as INSURED DEPENDENT spouse and INSURED DEPENDENT child(ren), respectively.

INSURED MEMBER means a person who: (a) was an ELIGIBLE MEMBER on his or her first INSURANCE DATE; (b) became insured under the Policy, as approved by New York Life; and (c) remains insured under the Policy.

DEFINITIONS

MAXIMUM ELIGIBILITY AGE means the oldest a person can be and still be initially eligible for insurance, as follows: ELIGIBLE MEMBER, through age 59; ELIGIBLE SPOUSE, through age 59; or ELIGIBLE CHILD, through age 25.

MEMBER INSURANCE means an INSURED MEMBER'S insurance for himself or herself.

NEW MEMBER means a person who is eligible to request non-contributory insurance. To be eligible, such person must: (a) be an ELIGIBLE MEMBER; and (b) have become a member of the SPONSOR within the last 180 days and while the Policy is in force. Such person will be provided non-contributory insurance during the INITIAL PERIOD.

OWNER means the person or entity who has the rights of ownership of the insurance. Initially, the OWNER is the person or entity indicated as such on the application for insurance, subject to the owner's right to transfer all or any part of the incidents of ownership of the insurance, as stated on the Life and Dependent Life Insurance pages.

PREVIOUS POLICY means Group Policy Numbers G-14109-0, G-14109-2, G-14109-3, G-14109-4, G-14109-5 and G-14109-6 issued to the Policyholder by New York Life Insurance Company and Group Policy Number AFBA/MAT 090116 issued to the Iowa National Guard Association by 5 Star Life Insurance Company.

SPONSOR means an eligible entity that participates in the Militia Insurance Trust.

SURVIVOR DEPENDENT means an INSURED DEPENDENT of a deceased INSURED MEMBER. References to **SURVIVOR SPOUSE** and **SURVIVOR CHILD(REN)** mean the same as SURVIVOR DEPENDENT spouse and SURVIVOR DEPENDENT child(ren), respectively.

TERMINATION AGE DATE means the date insurance for a COVERED PERSON ends due to his or her attainment of the stated AGE, as follows:

- 1. the last day of the INSURANCE PERIOD during which the INSURED MEMBER reaches AGE 100;
- 2. the last day of the INSURANCE PERIOD during which the SURVIVOR SPOUSE reaches AGE 100; or
- 3. the last day of the INSURANCE PERIOD during which the INSURED CHILD reaches AGE 26.

TOTAL DISABILITY means an incapacity from an injury or sickness which:

- 1. completely and continuously prevents an INSURED MEMBER from doing the material and substantial duties of any occupation for which he or she is reasonably qualified by education, training or experience;
- 2. results in total and permanent loss of sight of both eyes; or
- 3. results in severance, above the wrist or ankle of: (1) both hands; (2) both feet; or (3) one hand and one foot.

TOTAL DISABILITY and TOTALLY DISABLED have the same meaning.

TRANSFER DATE means, for each ELIGIBLE MEMBER with TRANSFER INSURANCE, the date agreed to by the Policyholder and New York Life.

TRANSFER INSURANCE means the MEMBER INSURANCE or MEMBER and DEPENDENT INSURANCE in force under any other PREVIOUS POLICY the day before the agreed to TRANSFER DATE, which is being transferred to the Policy on such TRANSFER DATE.

SCHEDULE

NON-CONTRIBUTORY BASIC BENEFIT

The following Non-Contributory Insurance is automatically provided to each ELIGIBLE MEMBER of a SPONSOR effective as of the date of his or her enlistment.

Amount of Insurance

\$1,000

NON-CONTRIBUTORY NEW MEMBER LIFE INSURANCE

\$ 10,000

CONTRIBUTORY LIFE INSURANCE

Options Available for Eligible Members

Amounts Of Insurance

	Option 1	Option 2	Option 3	Option 4
Under Age 60	\$ 5,000	\$ 10,000	\$ 15,000	\$ 20,000
Age 60 - 69	2,500	5,000	7,500	10,000
Age 70 - 74	1,250	2,500	3,750	5,000
Age 75 - 100	625	1,250	1,875	2,500

Options Available for Eligible Spouses

Amounts Of Insurance

	Option 1	Option 2	Option 3	Option 4
Under Age 60	\$ 5,000	\$ 10,000	\$ 15,000	\$ 20,000
Age 60 - 69	2,500	5,000	7,500	10,000
Age 70 - 74	1,250	2,500	3,750	5,000
Age 75 - 100	625	1,250	1,875	2,500

Options Available for Eligible Child(ren)

Amounts Of Insurance

Child's Attained Age	Option 1	Option 2	Option 3
15 days but before 6 months	\$ 500	\$ 500	\$ 500
6 months but before the TERMINATION AGE DATE	\$ 5,000	\$ 10,000	\$ 15,000

An ELIGIBLE SPOUSE or ELIGIBLE CHILD cannot be insured for an Option of Insurance that exceeds the Option of Insurance for which the INSURED MEMBER is insured.

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SCHEDULE

TRANSFER FROM PREVIOUS POLICY

Transfer on January 1, 2011:

An INSURED MEMBER under age 50 on January 1, 2011 will have MEMBER INSURANCE or MEMBER and DEPENDENT INSURANCE automatically transferred from a PREVIOUS POLICY to this Policy, unless he or she opts out of the transfer offer. Any changes to the insurance are subject to the applicable Options Available.

Such insurance is subject to a 50% reduction at age 60, age 70 and age 75, with premium remaining the same.

The Maximum Aggregate amount of insurance for an INSURED MEMBER under this Policy and any other Policy issued to the Policyholder by New York Life is \$76,000.

Transfer on May 1, 2013:

All INSURED MEMBERS, regardless of age, on May 1, 2013 will have MEMBER INSURANCE or MEMBER and DEPENDENT INSURANCE automatically transferred from a PREVIOUS POLICY to this Policy, unless he or she opts out of the transfer offer. Any changes to the insurance are subject to the applicable Options Available.

Such insurance is subject to a 50% reduction at age 60, age 70 and age 75, with premium remaining the same.

The Maximum Aggregate amount of insurance for an INSURED MEMBER under this Policy and any other Policy issued to the Policyholder by New York Life is \$76,000.

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SCHEDULE

FROZEN PLAN for Insureds under PREVIOUS POLICY AFBA/MAT 090116

NON-CONTRIBUTORY BASIC BENEFIT

Amount of Insurance

\$1,000

CONTRIBUTORY LIFE INSURANCE

Amounts of Insurance Available for Insured Members

\$5,000 to \$50,000 in multiples of \$5,000

Amount of Insurance Available for Insured Spouses

\$5,000 to \$25,000 in \$5,000 multiples

Except that: the INSURED SPOUSE of an INSURED MEMBER cannot be insured for an Amount of Insurance which exceeds 50% of the amount for which such INSURED MEMBER is insured.

Options Available for Insured Child(ren)

	Option 1	Option 2
Birth to 6 months	\$ 1,000	\$ 2,000
6 months to 2 years	\$ 2,000	\$ 4,000
2 years to 3 years	\$ 4,000	\$ 8,000
3 years to 21 years	\$ 5,000	\$ 10,000

Except that: the INSURED CHILD of an INSURED MEMBER cannot be insured for an Option of Insurance that exceeds the Amount of Insurance for which the INSURED MEMBER insured.

Reduction Due to Age

When the COVERED PERSON reaches AGE 60, his/her Amount Of Insurance will be reduced by 50%.

When the COVERED PERSON reaches AGE 70, his/her Amount Of Insurance will be reduced by 50%.

When the COVERED PERSON reaches AGE 75, his/her Amount Of Insurance will be reduced by 50%.

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