Voluntary Life Cost Illustration:

To determine the most appropriate level of coverage, as a rule of thumb, you should consider about 6 - 10 times your annual income, factoring in projected costs to help maintain your family's current life style.

Bi-weekly premiums displayed. Policy Election Cost Per Age Bracket

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		< 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65–69 [†]
\$50,000 Policy	Election Amount									
Employee	\$50,000	\$2.08	\$2.54	\$2.77	\$3.92	\$7.85	\$10.39	\$15.92	\$22.62	\$39.69
Spouse	\$25,000	\$1.04	\$1.27	\$1.39	\$1.96	\$3.92	\$5.19	\$7.96	\$11.31	\$19.85
Child	\$5,000	\$.42	\$.42	\$.42	\$.42	\$.42	\$.42	\$.42	\$.42	\$.42
\$100,000 Polic	y Election Amount									
Employee	\$100,000	\$4.15	\$5.08	\$5.54	\$7.85	\$15.69	\$20.77	\$31.85	\$45.23	\$79.39
Spouse	\$50,000	\$2.08	\$2.54	\$2.77	\$3.92	\$7.85	\$10.39	\$15.92	\$22.62	\$39.69
Child	\$10,000	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83
\$150,000 Polic	y Election Amount									
Employee	\$150,000	\$6.23	\$7.62	\$8.31	\$11.77	\$23.54	\$31.15	\$47.77	\$67.85	\$119.08
Spouse	\$75,000	\$3.12	\$3.81	\$4.15	\$5.89	\$11.77	\$15.58	\$23.89	\$33.92	\$59.54
Child	\$10,000	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83
\$200,000 Polic	y Election Amount									
Employee	\$200,000	\$8.31	\$10.15	\$11.08	\$15.69	\$31.39	\$41.54	\$63.69	\$90.46	\$158.77
Spouse	\$100,000	\$4.15	\$5.08	\$5.54	\$7.85	\$15.69	\$20.77	\$31.85	\$45.23	\$79.39
Child	\$10,000	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83
\$250,000 Polic	y Election Amount									
Employee	\$250,000	\$10.39	\$12.69	\$13.85	\$19.62	\$39.23	\$51.92	\$79.62	\$113.08	\$198.46
Spouse	\$125,000	\$5.19	\$6.35	\$6.92	\$9.81	\$19.62	\$25.96	\$39.81	\$56.54	\$99.23
Child	\$10,000	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83
\$300,000 Polic	y Election Amount									
Employee	\$300,000	\$12.46	\$15.23	\$16.62	\$23.54	\$47.08	\$62.31	\$95.54	\$135.69	\$238.15
Spouse	\$150,000	\$6.23	\$7.62	\$8.31	\$11.77	\$23.54	\$31.15	\$47.77	\$67.85	\$119.08
Child	\$10,000	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83	\$.83

Refer to Guarantee Issue row on page above for Voluntary Life GI amounts.

Premiums for Voluntary Life Increase in five-year increments

Infant coverage is limited for the first two weeks of infant's life.

Spouse/DP coverage premium is based on Employee age.

†Benefit reductions apply.

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

LIMITATIONS AND EXCLUSIONS:

A SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS FOR LIFE AND AD&D COVERAGE:

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. 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.

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.

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.

Voluntary Life Only:

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. Late entrants and benefit increases require underwriting approval.

GP-1-R-LB-90, 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.

For AD&D: We pay no benefits for any loss caused: by willful self-injury; sickness, disease or medical treatment; by participating in a civil disorder or committing a felony; Traveling on any type of aircraft while having duties on that aircraft; by declared or undeclared act of war or armed aggression; while a member of any armed force (May vary by state); while driving a motor vehicle without a current, valid driver's license; by legal intoxication; or by voluntarily using a non-prescription controlled substance. Contract #GP-I-R-ADCLI-00 et al. We won't pay more than 100% of the Insurance amount for all losses due to the same accident, except as stated. The loss must occur within a specified period of time of the accident. Please see contract for specific definition; definition of loss may vary depending on the benefit payable.

Enhanced AD&D: A loss may be defined as death, quadriplegia, loss of speech and hearing, loss of cognitive function, comatose state in excess of one month, hemiplegia or paraplegia. The loss must occur within a specified period of time of the accident. Please see contract for specific definition; definition of loss may vary depending on the benefit payable.

Guardian Group Life Insurance underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage.

Policy Form # GP-1-LIFE-15