Group Term Life Policy Amendment #10

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

To be attached to and made a part of Group Policy No. 33780 issued by Minnesota Life Insurance Company to State of Colorado. This amendment is effective as of July 1, 2024. Continued payment of premiums shall constitute acceptance of the conditions stated in this amendment.

The following change is made to the group policy:

The supplemental life maximum is changed to \$600,000. As a result of this change, the Supplemental Employee Life Insurance line item on the Group Policy Specifications Page is amended to read as follows:

Supplemental Employee Life Insurance

Eligible Class

Amount of Supplemental Employee Life Insurance

All employees

An amount elected by the employee, in an increment of \$10,000, subject to a minimum of \$10,000 and a maximum of \$600,000.

As a result of this change, the attached Group Policy Specifications Page effective February 1, 2025 as revised on April 11, 2025 replaces the prior Group Policy Specifications Page.

Agreed to by Minnesota Life Insurance Company on April 11, 2025.

By Susan Muuson Algala KB
Vice President and Actuary

GENERAL INFORMATION

POLICYHOLDER: State of Colorado POLICY NO.: 33780

ASSOCIATED COMPANIES: All subsidiaries and affiliates reported to Minnesota Life by the policyholder for

inclusion in the policy.

POLICY EFFECTIVE DATE: July 1, 2014. This Specification Page represents the plan in effect as of

February 1, 2025 as revised April 11, 2025.

Minnesota Life Insurance Company has issued Group Policy Number 33780 to the State of Colorado effective as of July 1, 2014 as a replacement for an earlier policy

containing the same number.

In no case shall Minnesota Life Insurance Company be liable under both policies.

POLICY ANNIVERSARY DATE: July 1 of each year beginning July 1, 2015.

PREMIUM DUE DATE(S): The first day of each month. Minnesota Life and the policyholder agree that

premiums can be paid no later than the 45th day following the premium due date.

GROUP: This group is composed of all eligible employees as defined by Colorado State Statute.

Permanent part-time employees are included in this definition. Eligible employee is defined as: Employee means any officer or employee under the state personnel system of the state of Colorado whose salary is paid by state funds or any employee of the department of education, the Colorado commission on higher education, or the Colorado school for the deaf and the blind whose salary is paid by state funds, or any member of the military employed pursuant to section 28-3-904 C.R.S. Employee includes any officer or employee of the legislative or judicial branch, any elected or appointed state official or employee who receives compensation other than expense reimbursement from the state funds, any elected state official who does not receive compensation other than expense reimbursement from state funds, and includes any member of the board of assessment appeals. Employee does not include persons employed on a temporary basis; except that it shall include a member of the military employed pursuant to section 28-3-904 C.R.S. for more than 30 consecutive days.

Employee does not include an employee insured under the University of Colorado group life insurance plan or a full-time member of the armed forces of any country.

ENROLLMENT PERIOD: Not applicable for noncontributory insurance.

For contributory insurance:

For employees who are newly eligible, the enrollment period is equal to 31 days from

the date the person meets the definition of group.

For employees who first become eligible for dependent insurance after the newly

eligible enrollment period, the enrollment period for dependent life is 31 days from the

first day of eligibility.

WAITING PERIOD: The period commencing with the date a person meets the definition of "GROUP"

above and ending with the first day of the month next following that date.

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EMPLOYEE BENEFIT SCHEDULE

EMPLOYEE TERM LIFE INSURANCE:

Basic Life Insurance

Eligible Class Amount of Basic Life Insurance

All employees One times annual regular pay, rounded to the next higher \$1,000, if not already

a multiple thereof, subject to a minimum benefit of \$50,000 and maximum

benefit of \$250,000.

Supplemental Employee Life Insurance

Eligible Class Amount of Supplemental Employee Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and a maximum of \$600,000.

BASIC LIFE INSURANCE ADDITIONAL BENEFIT:

Basic Life Insurance Repatriation Benefit

Eligible Class Amount of Insurance

All employees If a death benefit becomes payable for an insured under this policy we will pay

an additional benefit to reimburse the person who incurs the transportation expenses to transport the insured's body to a mortuary near his or her primary residence, but not to exceed the lesser of \$5,000 or 10% of the basic life insurance, if the insured dies more than 200 miles from his or her primary place

of residence.

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

Basic and Supplemental Insurance

Eligible Class Amount of Basic and Supplemental Employee AD&D Insurance

All employees An amount equal to the amount of Basic and Supplemental Employee Life

Insurance for which the employee is insured under the group policy.

GENERAL PROVISIONS FOR EMPLOYEE INSURANCE

RETIREMENT REDUCTIONS: All insurance terminates at retirement, except as provided for under the

portability provision.

CONTRIBUTORY/NONCONTRIBUTORY: Basic insurance is noncontributory insurance; supplemental employee 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.

F.70944 B

For supplemental employee insurance:

For employees in an eligible class immediately prior to the effective date of the group policy:

An amount equal to the amount of contributory insurance for which the employee was insured under the prior carrier's group policy on the day immediately preceding the effective date of this policy. For employees who first become eligible after the effective date of this

policy:

\$150,000

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECTIVE DATE OF INCREASES AND DECREASES DUE TO CHANGE IN REGULAR PAY

Increases and decreases due to a change in regular pay will become effective the date of the change in regular pay. For purposes of insurance under this policy, the date of the change in regular pay means the date the payroll system is updated. Evidence of insurability will not be required for an increase in insurance due solely to an increase in regular pay. All increases are subject to the actively at work requirement.

DEPENDENTS BENEFIT SCHEDULE

DEPENDENTS TERM LIFE INSURANCE:

An employee must be approved for Supplemental Employee Life and matching accidental death and dismemberment coverage under this plan to be eligible to elect Supplemental Spouse/Civil Union Partner and Supplemental Child Life and matching accidental death and dismemberment coverage.

Supplemental Spouse/Civil Union Partner Life Insurance

Eligible Class

Amount of Supplemental Spouse/Civil Union Partner Life Insurance

All employees

An amount elected by the employee, in an increment of \$10,000, subject to a minimum of \$10,000 and subject to a maximum of the lesser of 50% of the employee's supplemental amount of insurance or \$250,000.

Supplemental Child Life Insurance

Eligible Class

Amount of Supplemental Child Life Insurance

All employees

\$5,000 or \$10,000, as elected by the employee. Supplemental child coverage cannot exceed 50% of the Employee's Supplemental amount of insurance.

An employee's first eligible newborn child is automatically covered for \$5,000 for 31 days from the child's live birth. To continue coverage on the first child, the employee must elect child coverage within those 31 days; otherwise the coverage shall terminate at the end of the 31-day period.

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

Spouse/Civil Union Partner and Child AD&D Insurance

Eligible Class

Amount of Spouse/Civil Union Partner and Child AD&D Insurance

All employees

An amount equal to the amount of Supplemental Spouse/Civil Union Partner and Child Life insurance for which the spouse/civil union partner and/or child are insured under the group policy.

F.70944 C

GENERAL PROVISIONS FOR DEPENDENTS INSURANCE

GRANDFATHERED COVERAGE:

There is a group of grandfathered employees who were able to elect coverage on his or her spouse and/or children without electing Supplemental Employee Life/AD&D coverage. The coverage for this group that is currently in place was elected prior to January 1, 2003. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

There is a group of grandfathered employees in which the spouse coverage maximum of "the lessor of 50% of the employee's supplemental amount of insurance or \$150,000" does not apply. The coverage for this group that is currently in place was elected prior to January 1, 2003 and their coverage amounts are outside of the current plan parameters. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/AD&D coverage, and the spouse/civil union partner becomes a State employee, then the spouse/civil union partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guarantee issue basis, equal to the amount he/she had as a spouse/civil union partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the spouse/civil union partner coverage ends.

CONTINUED DEPENDENTS INSURANCE UPON THE DEATH OF THE EMPLOYEE:

Notwithstanding anything in the policy to the contrary, any dependents term life and accidental death and dismemberment insurance that is in force at the time of an employee's death shall remain in force for five months from the date of the employee's death, with no further premium payment required.

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 with eligible dependents immediately prior to the effective date of this policy, the guaranteed issue amount is equal to the amount of dependents insurance for which they were insured under the prior group policy.

For employees who first become eligible for dependents insurance after the effective date of this policy, the guaranteed issue amount is as follows:

For Supplemental Spouse/Civil Union Partner

Insurance: \$30,000

For Supplemental Child Insurance: \$10,000*

* As an exception, evidence of insurability is never required of a child regardless of when application is made (new hire, family status change, or annual enrollment.)

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECT OF EMPLOYEE'S RETIREMENT:

All dependents insurance terminates upon the employee's retirement except as provided under the portability provision.

F.70944 D

ADDITIONAL INFORMATION

WAIVER OF PREMIUM APPLICATION:

Applies to contributory and noncontributory employee insurance.

ONE-TIME OPEN ENROLLMENT:

ELECTION CHANGES:

The policyholder will hold a one-time open enrollment in the spring of 2024. During this enrollment, the following elections will not require evidence of insurability:

• An employee my elect for the first time or increase his or her supplemental life insurance by five \$10,0000 increments up to \$50,000, not to exceed the guaranteed issue limit of \$150,000.

Coverage will be effective on July 1, 2024 subject to the actively at work requirement for employees.

Election changes can be made at any time, except child life changes are limited to annual enrollment or within 31 days of a Family Status Change.

An employee may make the following changes to his or her elections at annual open enrollment or within 31 days of a Family Status Change without providing any evidence of insurability:

- 1. Any reduction or termination of coverage.
- 2. Any election for child life insurance.
- 3. For changes due to a Family Status Change: Any increase in Supplemental Employee Life/AD&D insurance that does not exceed the guaranteed issue of \$150,000, including enrolling in Supplemental Employee Life/AD&D for the first time for up to \$150,000.
- 4. For changes due to a Family Status Change: Any increase in Supplemental Spouse/Civil Union Partner insurance that does not exceed the guaranteed issue of \$30,000, including enrolling in Supplemental Spouse/Civil Union Partner/AD&D for the first time for up to \$30,000.
- 5. For changes at Annual Enrollment: Employees currently participating in Employee Supplemental Life may increase their coverage by up to five increments of \$10,000, subject to the guaranteed issue limit of \$150,000. Election changes will be effective July 1 following the Annual Enrollment.
- 6. During the 2022 Annual Enrollment employees not currently participating in Employee Supplemental Life may elect coverage by up to five increments of \$10,000 without providing evidence of insurability.

Any amount requested above these amounts or any change requested outside of these events shall require evidence of insurability and will not be effective unless and until the evidence is approved by Minnesota Life.

Family Status Change means:

- Birth or adoption or otherwise acquiring a newly eligible child
- Death of a spouse/civil union partner
- Marriage
- Establishment of a civil union partnership
- Changes in employment status and result in a loss of employer sponsored life insurance coverage

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SPECIAL MARRIED EMPLOYEES RULES:

- If an employee is insured for Supplemental Spouse/Civil Union Partner/AD&D coverage and that spouse/civil union partner coverage terminates, the employee can apply for Supplemental Employee Life/AD&D on a guaranteed issue basis equal to the amount he or she had as a spouse/civil union partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner coverage ends.
- If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/AD&D coverage, and the spouse/civil union partner becomes a State employee, then the spouse/civil union partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guaranteed issue basis, equal to the amount he or she had as a spouse/civil union partner, but not less than \$100,000 and not to exceed \$250,000. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner coverage ends.
- If two State employees are married, or have established a civil union partnership and both have Supplemental Employee Life/AD&D coverage, and one employee terminates employment with the State and loses their Supplemental Employee Life/AD&D coverage, then the other remaining employee may add Supplemental Spouse/Civil Union Partner coverage, on a guarantee issue basis, up to an amount not to exceed the lesser of:
 - the amount that was in place as Supplemental Employee Life/AD&D coverage for the terminated employee;
 - 50% of the remaining employee's amount of coverage; and
 - **\$250,000.**

The request for new Supplemental Spouse/Civil Union Partner/AD&D coverage must be made within 31 days of the date that the employee coverage ends.

RIDER(S) TO THE GROUP POLICY

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

F.70944 F

Group Term Life Policy Amendment #9

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

To be attached to and made a part of Group Policy No. 33780 issued by Minnesota Life Insurance Company to State of Colorado. This amendment is effective as of February 1, 2025. Continued payment of premiums shall constitute acceptance of the conditions stated in this amendment.

1) The section "What is your agreement with us?" is amended as follows:

What is your agreement with us?

This policy and your application which is attached contain the entire contract between you and us. Any statements you make will be considered representations and not warranties. Also, any statement that you make will not be used to void this policy, nor will it be used in our defense if we refuse to pay a claim, unless a copy of the instrument containing the statement is or has been furnished to you or your beneficiary.

No change or waiver of any provisions of this policy, or any certificate issued under it, will be valid unless made in writing by us and signed by our president, a vice-president, our secretary, or an assistant secretary. No agent or other person has the authority to change or waive any provisions of this policy, or of any certificate issued under it.

2) As a change to the policy, language is added to specify requirements for premium remittance during a leave of absence and reinstatement of coverage after a leave of absence. As a result, the section "Can an insured employee's coverage be continued during sickness, injury, leave of absence or temporary layoff?" is amended to read as follows:

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

Yes. Insurance may be continued on an insured employee who is not actively at work due to sickness, injury, leave of absence or temporary layoff, subject to the employer's practices and procedures, including the employer's limits on the length of continuation allowed for the type of absence.

If the employee remits premiums during the leave of absence, coverage continues uninterrupted. If the employee does not remit premiums, coverage terminates during the leave. Upon an employee's return to active service, they may reinstate all coverages that were in force prior to the commencement of their paid or unpaid leave. Upon return to active status, the employee's coverage is reinstated on the first day of the month following the date of return to active status. Premium remittance is not required to reinstate insurance. Coverage is not retroactive to the date the employee's coverage terminated; a claim is not payable during the time the coverage is not in force.

Continuation is subject to the following maximum time frames:

- (1) for an employee on non-medical leave of absence or temporary layoff, insurance cannot be continued beyond 12 months from the last day the insured employee was actively at work.
- (2) for an employee on a military leave of absence, insurance may be continued during the length of the leave. Coverage that is voluntarily terminated during a military leave will be reinstated when the employee returns to active employment status without the need to provide evidence of insurability.
- (3) for an employee on a medical leave of absence, insurance cannot be continued beyond the later of 12 months from the last day the insured employee was actively at work or the date the employee attains age 65.

Continuation of insurance must be in accordance with the practices and procedures that precludes individual selection.

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

3) The section "When does an insured's insurance become incontestable?" is amended as follows:

When does an insured's insurance become incontestable?

Except for non-payment of premiums, after the insured's insurance has been in force during his or her lifetime for two years from the effective date of his or her coverage, we cannot contest the insured's coverage. However, if there has been an increase in the amount of insurance for which the insured was 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 the insured makes in his or her application will be considered representations and not warranties. Also, any statement an insured makes will not be used to void his or her insurance, nor defend against a claim, unless a copy of the instrument containing the statement is or has been furnished to the insured or the insured's beneficiary.

As a result of the change, the attached Group Policy Specifications Page effective February 1, 2025, replaces the prior Group Policy Specifications Page.

Agreed to by Minnesota Life Insurance Company on January 27, 2025.

By Susan Menson Regala SS

Vice President and Actuary

GROUP POLICY SPECIFICATIONS PAGE

GENERAL INFORMATION

POLICYHOLDER: State of Colorado POLICY NO.: 33780

ASSOCIATED COMPANIES: All subsidiaries and affiliates reported to Minnesota Life by the policyholder for

inclusion in the policy.

POLICY EFFECTIVE DATE: July 1, 2014. This Specification Page represents the plan in effect as of

February 1, 2025.

Minnesota Life Insurance Company has issued Group Policy Number 33780 to the State of Colorado effective as of July 1, 2014 as a replacement for an earlier policy

containing the same number.

In no case shall Minnesota Life Insurance Company be liable under both policies.

POLICY ANNIVERSARY DATE: July 1 of each year beginning July 1, 2015.

PREMIUM DUE DATE(S): The first day of each month. Minnesota Life and the policyholder agree that

premiums can be paid no later than the 45^{th} day following the premium due date.

GROUP: This group is composed of all eligible employees as defined by Colorado State Statute.

Permanent part-time employees are included in this definition. Eligible employee is defined as: Employee means any officer or employee under the state personnel system of the state of Colorado whose salary is paid by state funds or any employee of the department of education, the Colorado commission on higher education, or the Colorado school for the deaf and the blind whose salary is paid by state funds, or any member of the military employed pursuant to section 28-3-904 C.R.S. Employee includes any officer or employee of the legislative or judicial branch, any elected or appointed state official or employee who receives compensation other than expense reimbursement from the state funds, any elected state official who does not receive compensation other than expense reimbursement from state funds, and includes any member of the board of assessment appeals. Employee does not include persons employed on a temporary basis; except that it shall include a member of the military employed pursuant to section 28-3-904 C.R.S. for more than 30 consecutive days.

Employee does not include an employee insured under the University of Colorado group life insurance plan or a full-time member of the armed forces of any country.

ENROLLMENT PERIOD: Not applicable for noncontributory insurance.

For contributory insurance:

For employees who are newly eligible, the enrollment period is equal to 31 days from

the date the person meets the definition of group.

For employees who first become eligible for dependent insurance after the newly eligible enrollment period, the enrollment period for dependent life is 31 days from the

first day of eligibility.

WAITING PERIOD: The period commencing with the date a person meets the definition of "GROUP"

above and ending with the first day of the month next following that date.

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EMPLOYEE BENEFIT SCHEDULE

EMPLOYEE TERM LIFE INSURANCE:

Basic Life Insurance

Eligible Class Amount of Basic Life Insurance

All employees One times annual regular pay, rounded to the next higher \$1,000, if not already

a multiple thereof, subject to a minimum benefit of \$50,000 and maximum

benefit of \$250,000.

Supplemental Employee Life Insurance

Eligible Class Amount of Supplemental Employee Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and a maximum of the lesser of \$600,000 or eight times

annual earnings.

BASIC LIFE INSURANCE ADDITIONAL BENEFIT:

Basic Life Insurance Repatriation Benefit

Eligible Class Amount of Insurance

All employees If a death benefit becomes payable for an insured under this policy we will pay

an additional benefit to reimburse the person who incurs the transportation expenses to transport the insured's body to a mortuary near his or her primary residence, but not to exceed the lesser of \$5,000 or 10% of the basic life insurance, if the insured dies more than 200 miles from his or her primary place

of residence.

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

Basic and Supplemental Insurance

Eligible Class Amount of Basic and Supplemental Employee AD&D Insurance

All employees An amount equal to the amount of Basic and Supplemental Employee Life

Insurance for which the employee is insured under the group policy.

GENERAL PROVISIONS FOR EMPLOYEE INSURANCE

RETIREMENT REDUCTIONS: All insurance terminates at retirement, except as provided for under the

portability provision.

CONTRIBUTORY/NONCONTRIBUTORY: Basic insurance is noncontributory insurance; supplemental employee 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.

F.70944 B

For supplemental employee insurance:

For employees in an eligible class immediately prior to the effective date

of the group policy:

An amount equal to the amount of contributory insurance for which the employee was insured under the prior carrier's group policy on the day immediately preceding the effective date of this policy.

For employees who first become eligible after the effective date of this policy:

\$150,000

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECTIVE DATE OF INCREASES AND DECREASES DUE TO CHANGE IN REGULAR PAY

Increases and decreases due to a change in regular pay will become effective the date of the change in regular pay. For purposes of insurance under this policy, the date of the change in regular pay means the date the payroll system is updated. Evidence of insurability will not be required for an increase in insurance due solely to an increase in regular pay. All increases are subject to the actively at work requirement.

DEPENDENTS BENEFIT SCHEDULE

DEPENDENTS TERM LIFE INSURANCE:

An employee must be approved for Supplemental Employee Life and matching accidental death and dismemberment coverage under this plan to be eligible to elect Supplemental Spouse/Civil Union Partner and Supplemental Child Life and matching accidental death and dismemberment coverage.

Supplemental Spouse/Civil Union Partner Life Insurance

Eligible Class

Amount of Supplemental Spouse/Civil Union Partner Life Insurance

All employees

An amount elected by the employee, in an increment of \$10,000, subject to a minimum of \$10,000 and subject to a maximum of the lesser of 50% of the employee's supplemental amount of insurance or \$250,000.

Supplemental Child Life Insurance

Eligible Class

Amount of Supplemental Child Life Insurance

All employees

\$5,000 or \$10,000, as elected by the employee. Supplemental child coverage cannot exceed 50% of the Employee's Supplemental amount of insurance.

An employee's first eligible newborn child is automatically covered for \$5,000 for 31 days from the child's live birth. To continue coverage on the first child, the employee must elect child coverage within those 31 days; otherwise the coverage shall terminate at the end of the 31-day period.

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

Spouse/Civil Union Partner and Child AD&D Insurance

Eligible Class

Amount of Spouse/Civil Union Partner and Child AD&D Insurance

All employees

An amount equal to the amount of Supplemental Spouse/Civil Union Partner and Child Life insurance for which the spouse/civil union partner and/or child are insured under the group policy.

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GENERAL PROVISIONS FOR DEPENDENTS INSURANCE

GRANDFATHERED COVERAGE:

There is a group of grandfathered employees who were able to elect coverage on his or her spouse and/or children without electing Supplemental Employee Life/AD&D coverage. The coverage for this group that is currently in place was elected prior to January 1, 2003. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

There is a group of grandfathered employees in which the spouse coverage maximum of "the lessor of 50% of the employee's supplemental amount of insurance or \$150,000" does not apply. The coverage for this group that is currently in place was elected prior to January 1, 2003 and their coverage amounts are outside of the current plan parameters. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/AD&D coverage, and the spouse/civil union partner becomes a State employee, then the spouse/civil union partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guarantee issue basis, equal to the amount he/she had as a spouse/civil union partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the spouse/civil union partner coverage ends.

CONTINUED DEPENDENTS INSURANCE UPON THE DEATH OF THE EMPLOYEE:

Notwithstanding anything in the policy to the contrary, any dependents term life and accidental death and dismemberment insurance that is in force at the time of an employee's death shall remain in force for five months from the date of the employee's death, with no further premium payment required.

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 with eligible dependents immediately prior to the effective date of this policy, the guaranteed issue amount is equal to the amount of dependents insurance for which they were insured under the prior group policy.

For employees who first become eligible for dependents insurance after the effective date of this policy, the guaranteed issue amount is as follows:

For Supplemental Spouse/Civil Union Partner

Insurance: \$30,000

For Supplemental Child Insurance: \$10,000*

* As an exception, evidence of insurability is never required of a child regardless of when application is made (new hire, family status change, or annual enrollment.)

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECT OF EMPLOYEE'S RETIREMENT:

All dependents insurance terminates upon the employee's retirement except as provided under the portability provision.

F.70944 D

ADDITIONAL INFORMATION

WAIVER OF PREMIUM APPLICATION:

Applies to contributory and noncontributory employee insurance.

ONE-TIME OPEN ENROLLMENT:

The policyholder will hold a one-time open enrollment in the spring of 2024. During this enrollment, the following elections will not require evidence of insurability:

• An employee my elect for the first time or increase his or her supplemental life insurance by five \$10,0000 increments up to \$50,000, not to exceed the guaranteed issue limit of \$150,000.

Coverage will be effective on July 1, 2024 subject to the actively at work requirement for employees.

Election changes can be made at any time, except child life changes are limited to annual enrollment or within 31 days of a Family Status Change.

An employee may make the following changes to his or her elections at annual open enrollment or within 31 days of a Family Status Change without providing any evidence of insurability:

- 1. Any reduction or termination of coverage.
- 2. Any election for child life insurance.
- 3. For changes due to a Family Status Change: Any increase in Supplemental Employee Life/AD&D insurance that does not exceed the guaranteed issue of \$150,000, including enrolling in Supplemental Employee Life/AD&D for the first time for up to \$150,000.
- 4. For changes due to a Family Status Change: Any increase in Supplemental Spouse/Civil Union Partner insurance that does not exceed the guaranteed issue of \$30,000, including enrolling in Supplemental Spouse/Civil Union Partner/AD&D for the first time for up to \$30,000.
- 5. For changes at Annual Enrollment: Employees currently participating in Employee Supplemental Life may increase their coverage by up to five increments of \$10,000, subject to the guaranteed issue limit of \$150,000. Election changes will be effective July 1 following the Annual Enrollment.
- 6. During the 2022 Annual Enrollment employees not currently participating in Employee Supplemental Life may elect coverage by up to five increments of \$10,000 without providing evidence of insurability.

Any amount requested above these amounts or any change requested outside of these events shall require evidence of insurability and will not be effective unless and until the evidence is approved by Minnesota Life.

Family Status Change means:

- Birth or adoption or otherwise acquiring a newly eligible child
- Death of a spouse/civil union partner
- Marriage
- Establishment of a civil union partnership
- Changes in employment status and result in a loss of employer sponsored life insurance coverage

ELECTION CHANGES:

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SPECIAL MARRIED EMPLOYEES RULES:

- If an employee is insured for Supplemental Spouse/Civil Union Partner/AD&D coverage and that spouse/civil union partner coverage terminates, the employee can apply for Supplemental Employee Life/AD&D on a guaranteed issue basis equal to the amount he or she had as a spouse/civil union partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner coverage ends.
- If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/AD&D coverage, and the spouse/civil union partner becomes a State employee, then the spouse/civil union partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guaranteed issue basis, equal to the amount he or she had as a spouse/civil union partner, but not less than \$100,000 and not to exceed \$250,000. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner coverage ends.
- If two State employees are married, or have established a civil union partnership and both have Supplemental Employee Life/AD&D coverage, and one employee terminates employment with the State and loses their Supplemental Employee Life/AD&D coverage, then the other remaining employee may add Supplemental Spouse/Civil Union Partner coverage, on a guarantee issue basis, up to an amount not to exceed the lesser of:
 - the amount that was in place as Supplemental Employee Life/AD&D coverage for the terminated employee;
 - 50% of the remaining employee's amount of coverage;
 and
 - **\$250.000**.

The request for new Supplemental Spouse/Civil Union Partner/AD&D coverage must be made within 31 days of the date that the employee coverage ends.

RIDER(S) TO THE GROUP POLICY

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

F.70944 F

Group Term Life Policy Amendment #8

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

To be attached to and made a part of Group Policy No. 33780 issued by Minnesota Life Insurance Company to State of Colorado. This amendment is effective as of July 1, 2024. Continued payment of premiums shall constitute acceptance of the conditions stated in this amendment.

1) A first-eligible newborn benefit is added resulting in the following change to the Supplemental Child Life Insurance section on the Group Policy Specifications Page:

Supplemental Child Life Insurance

<u>Eligible Class</u> <u>Amount of Supplemental Child Life Insurance</u>

All employees \$5,000 or \$10,000, as elected by the employee. Supplemental child coverage cannot exceed 50% of the Employee's Supplemental

amount of insurance.

An employee's first eligible newborn child is automatically covered for \$5,000 for 31 days from the child's live birth. To continue coverage on the first child, the employee must elect child coverage within those 31 days; otherwise the coverage shall terminate at the end of the 31-day period.

- 2) The maximum amount of employee supplemental life insurance is increased from \$500,000 to the lesser of \$600,000 or eight times annual earnings.
- 3) A one-time open enrollment opportunity is added as follows:

ONE-TIME OPEN ENROLLMENT: The policyholder will hold a one-time open enrollment in the spring of 2024. During this enrollment, the following elections will not require evidence of insurability:

• An employee my elect for the first time or increase his or her supplemental life insurance by five \$10,0000 increments up to a total of \$50,000, not to exceed the guaranteed issue limit of \$150,000.

Coverage will be effective on July 1, 2024 subject to the actively at work requirement for employees.

As a result of the change, the attached Group Policy Specifications Page effective July 1, 2024, replaces the prior Group Policy Specifications Page.

Agreed to by Minnesota Life Insurance Company on March 21, 2024.

Vice President and Actuary

By Susan Micuson Regald

GENERAL INFORMATION

POLICYHOLDER: State of Colorado POLICY NO.: 33780

ASSOCIATED COMPANIES: All subsidiaries and affiliates reported to Minnesota Life by the policyholder for

inclusion in the policy.

POLICY EFFECTIVE DATE: July 1, 2014. This Specification Page represents the plan in effect as of

July 1, 2024.

Minnesota Life Insurance Company has issued Group Policy Number 33780 to the State of Colorado effective as of July 1, 2014 as a replacement for an earlier policy

containing the same number.

In no case shall Minnesota Life Insurance Company be liable under both policies.

POLICY ANNIVERSARY DATE: July 1 of each year beginning July 1, 2015.

PREMIUM DUE DATE(S): The first day of each month. Minnesota Life and the policyholder agree that

premiums can be paid no later than the 45th day following the premium due date.

GROUP: This group is composed of all eligible employees as defined by Colorado State Statute.

Permanent part-time employees are included in this definition. Eligible employee is defined as: Employee means any officer or employee under the state personnel system of the state of Colorado whose salary is paid by state funds or any employee of the department of education, the Colorado commission on higher education, or the Colorado school for the deaf and the blind whose salary is paid by state funds, or any member of the military employed pursuant to section 28-3-904 C.R.S. Employee includes any officer or employee of the legislative or judicial branch, any elected or appointed state official or employee who receives compensation other than expense reimbursement from the state funds, any elected state official who does not receive compensation other than expense reimbursement from state funds, and includes any member of the board of assessment appeals. Employee does not include persons employed on a temporary basis; except that it shall include a member of the military employed pursuant to section 28-3-904 C.R.S. for more than 30 consecutive days.

Employee does not include an employee insured under the University of Colorado group life insurance plan or a full-time member of the armed forces of any country.

ENROLLMENT PERIOD: Not applicable for noncontributory insurance.

For contributory insurance:

For employees who are newly eligible, the enrollment period is equal to 31 days from

the date the person meets the definition of group.

For employees who first become eligible for dependent insurance after the newly

eligible enrollment period, the enrollment period for dependent life is 31 days from the

first day of eligibility.

WAITING PERIOD: The period commencing with the date a person meets the definition of "GROUP"

above and ending with the first day of the month next following that date.

F.70944 A

EMPLOYEE BENEFIT SCHEDULE

EMPLOYEE TERM LIFE INSURANCE:

Basic Life Insurance

Eligible Class Amount of Basic Life Insurance

All employees One times annual regular pay, rounded to the next higher \$1,000, if not already

a multiple thereof, subject to a minimum benefit of \$50,000 and maximum

benefit of \$250,000.

Supplemental Employee Life Insurance

Eligible Class Amount of Supplemental Employee Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and a maximum of the lesser of \$600,000 or eight times

annual earnings.

BASIC LIFE INSURANCE ADDITIONAL BENEFIT:

Basic Life Insurance Repatriation Benefit

Eligible Class Amount of Insurance

All employees If a death benefit becomes payable for an insured under this policy we will pay

an additional benefit to reimburse the person who incurs the transportation expenses to transport the insured's body to a mortuary near his or her primary residence, but not to exceed the lesser of \$5,000 or 10% of the basic life insurance, if the insured dies more than 200 miles from his or her primary place

of residence.

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

Basic and Supplemental Insurance

Eligible Class Amount of Basic and Supplemental Employee AD&D Insurance

All employees An amount equal to the amount of Basic and Supplemental Employee Life

Insurance for which the employee is insured under the group policy.

GENERAL PROVISIONS FOR EMPLOYEE INSURANCE

RETIREMENT REDUCTIONS: All insurance terminates at retirement, except as provided for under the

portability provision.

CONTRIBUTORY/NONCONTRIBUTORY: Basic insurance is noncontributory insurance; supplemental employee 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.

F.70944 B

For supplemental employee insurance:

For employees in an eligible class immediately prior to the effective date of the group policy:

An amount equal to the amount of contributory insurance for which the employee was insured under the prior carrier's group policy on the day immediately preceding the effective date of this policy.

For employees who first become eligible after the effective date of this policy:

\$150,000

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECTIVE DATE OF INCREASES AND DECREASES DUE TO CHANGE IN REGULAR PAY

Increases and decreases due to a change in regular pay will become effective the date of the change in regular pay. For purposes of insurance under this policy, the date of the change in regular pay means the date the payroll system is updated. Evidence of insurability will not be required for an increase in insurance due solely to an increase in regular pay. All increases are subject to the actively at work requirement.

DEPENDENTS BENEFIT SCHEDULE

DEPENDENTS TERM LIFE INSURANCE:

An employee must be approved for Supplemental Employee Life and matching accidental death and dismemberment coverage under this plan to be eligible to elect Supplemental Spouse/Civil Union Partner and Supplemental Child Life and matching accidental death and dismemberment coverage.

Supplemental Spouse/Civil Union Partner Life Insurance

Eligible Class

Amount of Supplemental Spouse/Civil Union Partner Life Insurance

All employees

An amount elected by the employee, in an increment of \$10,000, subject to a minimum of \$10,000 and subject to a maximum of the lesser of 50% of the employee's supplemental amount of insurance or \$250,000.

Supplemental Child Life Insurance

Eligible Class

Amount of Supplemental Child Life Insurance

All employees

\$5,000 or \$10,000, as elected by the employee. Supplemental child coverage cannot exceed 50% of the Employee's Supplemental amount of insurance.

An employee's first eligible newborn child is automatically covered for \$5,000 for 31 days from the child's live birth. To continue coverage on the first child, the employee must elect child coverage within those 31 days; otherwise the coverage shall terminate at the end of the 31-day period.

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

Spouse/Civil Union Partner and Child AD&D Insurance

Eligible Class

Amount of Spouse/Civil Union Partner and Child AD&D Insurance

All employees

An amount equal to the amount of Supplemental Spouse/Civil Union Partner and Child Life insurance for which the spouse/civil union partner and/or child are insured under the group policy.

F.70944 C

GENERAL PROVISIONS FOR DEPENDENTS INSURANCE

GRANDFATHERED COVERAGE:

There is a group of grandfathered employees who were able to elect coverage on his or her spouse and/or children without electing Supplemental Employee Life/AD&D coverage. The coverage for this group that is currently in place was elected prior to January 1, 2003. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

There is a group of grandfathered employees in which the spouse coverage maximum of "the lessor of 50% of the employee's supplemental amount of insurance or \$150,000" does not apply. The coverage for this group that is currently in place was elected prior to January 1, 2003 and their coverage amounts are outside of the current plan parameters. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/AD&D coverage, and the spouse/civil union partner becomes a State employee, then the spouse/civil union partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guarantee issue basis, equal to the amount he/she had as a spouse/civil union partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the spouse/civil union partner coverage ends.

CONTINUED DEPENDENTS INSURANCE UPON THE DEATH OF THE EMPLOYEE:

Notwithstanding anything in the policy to the contrary, any dependents term life and accidental death and dismemberment insurance that is in force at the time of an employee's death shall remain in force for five months from the date of the employee's death, with no further premium payment required.

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 with eligible dependents immediately prior to the effective date of this policy, the guaranteed issue amount is equal to the amount of dependents insurance for which they were insured under the prior group policy.

For employees who first become eligible for dependents insurance after the effective date of this policy, the guaranteed issue amount is as follows:

For Supplemental Spouse/Civil Union Partner

Insurance: \$30,000

For Supplemental Child Insurance: \$10,000*

* As an exception, evidence of insurability is never required of a child regardless of when application is made (new hire, family status change, or annual enrollment.)

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECT OF EMPLOYEE'S RETIREMENT:

All dependents insurance terminates upon the employee's retirement except as provided under the portability provision.

F.70944 D

ADDITIONAL INFORMATION

WAIVER OF PREMIUM APPLICATION:

Applies to contributory and noncontributory employee insurance.

ONE-TIME OPEN ENROLLMENT:

The policyholder will hold a one-time open enrollment in the spring of 2024. During this enrollment, the following elections will not require evidence of insurability:

• An employee my elect for the first time or increase his or her supplemental life insurance by five \$10,0000 increments up to \$50,000, not to exceed the guaranteed issue limit of \$150,000.

Coverage will be effective on July 1, 2024 subject to the actively at work requirement for employees.

Election changes can be made at any time, except child life changes are limited to annual enrollment or within 31 days of a Family Status Change.

An employee may make the following changes to his or her elections at annual open enrollment or within 31 days of a Family Status Change without providing any evidence of insurability:

- 1. Any reduction or termination of coverage.
- 2. Any election for child life insurance.
- 3. For changes due to a Family Status Change: Any increase in Supplemental Employee Life/AD&D insurance that does not exceed the guaranteed issue of \$150,000, including enrolling in Supplemental Employee Life/AD&D for the first time for up to \$150,000.
- 4. For changes due to a Family Status Change: Any increase in Supplemental Spouse/Civil Union Partner insurance that does not exceed the guaranteed issue of \$30,000, including enrolling in Supplemental Spouse/Civil Union Partner/AD&D for the first time for up to \$30,000.
- 5. For changes at Annual Enrollment: Employees currently participating in Employee Supplemental Life may increase their coverage by up to five increments of \$10,000, subject to the guaranteed issue limit of \$150,000. Election changes will be effective July 1 following the Annual Enrollment.
- 6. During the 2022 Annual Enrollment employees not currently participating in Employee Supplemental Life may elect coverage by up to five increments of \$10,000 without providing evidence of insurability.

Any amount requested above these amounts or any change requested outside of these events shall require evidence of insurability and will not be effective unless and until the evidence is approved by Minnesota Life.

Family Status Change means:

- Birth or adoption or otherwise acquiring a newly eligible child
- Death of a spouse/civil union partner
- Marriage
- Establishment of a civil union partnership
- Changes in employment status and result in a loss of employer sponsored life insurance coverage

ELECTION CHANGES:

F.70944 E

SPECIAL MARRIED EMPLOYEES RULES:

- If an employee is insured for Supplemental Spouse/Civil Union Partner/AD&D coverage and that spouse/civil union partner coverage terminates, the employee can apply for Supplemental Employee Life/AD&D on a guaranteed issue basis equal to the amount he or she had as a spouse/civil union partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner coverage ends.
- If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/AD&D coverage, and the spouse/civil union partner becomes a State employee, then the spouse/civil union partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guaranteed issue basis, equal to the amount he or she had as a spouse/civil union partner, but not less than \$100,000 and not to exceed \$250,000. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner coverage ends.
- If two State employees are married, or have established a civil union partnership and both have Supplemental Employee Life/AD&D coverage, and one employee terminates employment with the State and loses their Supplemental Employee Life/AD&D coverage, then the other remaining employee may add Supplemental Spouse/Civil Union Partner coverage, on a guarantee issue basis, up to an amount not to exceed the lesser of:
 - the amount that was in place as Supplemental Employee Life/AD&D coverage for the terminated employee;
 - 50% of the remaining employee's amount of coverage; and
 - **\$250,000.**

The request for new Supplemental Spouse/Civil Union Partner/AD&D coverage must be made within 31 days of the date that the employee coverage ends.

RIDER(S) TO THE GROUP POLICY

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

F.70944 F

Group Term Life Policy Amendment #7

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

To be attached to and made a part of Group Policy No. 33780 issued by Minnesota Life Insurance Company to State of Colorado. This amendment is effective as of January 1, 2023. Continued payment of premiums shall constitute acceptance of the conditions stated in this amendment. The following changes are made to the policy:

Changes in employment status is added under Family Status Change within the Election Changes section of the specifications page. The specifications page is changed to read as follows:

ELECTION CHANGES:

Election changes can be made at any time, except child life changes are limited to annual enrollment or within 31 days of a Family Status Change.

An employee may make the following changes to his or her elections at annual open enrollment or within 31 days of a Family Status Change without providing any evidence of insurability:

- 1. Any reduction or termination of coverage.
- 2. Any election for child life insurance.
- 3. For changes due to a Family Status Change: Any increase in Supplemental Employee Life/AD&D insurance that does not exceed the guaranteed issue of \$150,000, including enrolling in Supplemental Employee Life/AD&D for the first time for up to \$150,000.
- 4. For changes due to a Family Status Change: Any increase in Supplemental Spouse/Civil Union Partner insurance that does not exceed the guaranteed issue of \$30,000, including enrolling in Supplemental Spouse/Civil Union Partner/AD&D for the first time for up to \$30,000.
- 5. For changes at Annual Enrollment: Employees currently participating in Employee Supplemental Life may increase their coverage by up to five increments of \$10,000, subject to the guaranteed issue limit of \$150,000. Election changes will be effective July 1 following the Annual Enrollment.
- 6. During the 2022 Annual Enrollment employees not currently participating in Employee Supplemental Life may elect coverage by up to five increments of \$10,000 without providing evidence of insurability.

Any amount requested above these amounts or any change requested outside of these events shall require evidence of insurability and will not be effective unless and until the evidence is approved by Minnesota Life.

Family Status Change means:

- Birth or adoption or otherwise acquiring a newly eligible child
- Death of a spouse/civil union partner
- Marriage
- Establishment of a civil union partnership
- Changes in employment status and result in a loss of employer sponsored life insurance coverage

As a result of this change, the Group Policy Specifications Page is replaced with the attached Group Policy Specifications Page effective January 1, 2023.

Agreed to by Minnesota Life Insurance Company on April 24, 2023.

By Susan Meuson Algala CDJ

Vice President and Actuary

GENERAL INFORMATION

POLICYHOLDER: State of Colorado POLICY NO.: 33780-G

ASSOCIATED COMPANIES: All subsidiaries and affiliates reported to Minnesota Life by the policyholder for

inclusion in the policy.

POLICY EFFECTIVE DATE: July 1, 2014. This Specification Page represents the plan in effect as of

January 1, 2023.

Minnesota Life Insurance Company has issued Group Policy Number 33780-G to the State of Colorado effective as of July 1, 2014 as a replacement for an earlier policy

containing the same number.

In no case shall Minnesota Life Insurance Company be liable under both policies.

POLICY ANNIVERSARY DATE: July 1 of each year beginning July 1, 2015.

PREMIUM DUE DATE(S): The first day of each month. Minnesota Life and the policyholder agree that

premiums can be paid no later than the 45^{th} day following the premium due date.

GROUP: This group is composed of all eligible employees as defined by Colorado State Statute.

Permanent part-time employees are included in this definition. Eligible employee is defined as: Employee means any officer or employee under the state personnel system of the state of Colorado whose salary is paid by state funds or any employee of the department of education, the Colorado commission on higher education, or the Colorado school for the deaf and the blind whose salary is paid by state funds, or any member of the military employed pursuant to section 28-3-904 C.R.S. Employee includes any officer or employee of the legislative or judicial branch, any elected or appointed state official or employee who receives compensation other than expense reimbursement from the state funds, any elected state official who does not receive compensation other than expense reimbursement from state funds, and includes any member of the board of assessment appeals. Employee does not include persons employed on a temporary basis; except that it shall include a member of the military employed pursuant to section 28-3-904 C.R.S. for more than 30 consecutive days.

Employee does not include an employee insured under the University of Colorado group life insurance plan or a full-time member of the armed forces of any country.

ENROLLMENT PERIOD: Not applicable for noncontributory insurance.

For contributory insurance:

For employees who are newly eligible, the enrollment period is equal to 31 days from

the date the person meets the definition of group.

For employees who first become eligible for dependent insurance after the newly eligible enrollment period, the enrollment period for dependent life is 31 days from the

first day of eligibility.

WAITING PERIOD: The period commencing with the date a person meets the definition of "GROUP"

above and ending with the first day of the month next following that date.

F.70944 A

PLAN OF INSURANCE

EMPLOYEE BENEFIT SCHEDULE

EMPLOYEE TERM LIFE INSURANCE:

Basic Life Insurance

Eligible Class Amount of Basic Life Insurance

All employees One times annual regular pay, rounded to the next higher \$1,000, if not already

a multiple thereof, subject to a minimum benefit of \$50,000 and maximum

benefit of \$250,000.

Supplemental Employee Life Insurance

Eligible Class Amount of Supplemental Employee Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and a maximum of \$500,000.

BASIC LIFE INSURANCE ADDITIONAL BENEFIT:

Basic Life Insurance Repatriation Benefit

Eligible Class Amount of Insurance

All employees If a death benefit becomes payable for an insured under this policy we will pay

an additional benefit to reimburse the person who incurs the transportation expenses to transport the insured's body to a mortuary near his or her primary residence, but not to exceed the lesser of \$5,000 or 10% of the basic life insurance, if the insured dies more than 200 miles from his or her primary place

of residence.

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

Basic and Supplemental Insurance

Eligible Class Amount of Basic and Supplemental Employee AD&D Insurance

All employees An amount equal to the amount of Basic and Supplemental Employee Life

Insurance for which the employee is insured under the group policy.

GENERAL PROVISIONS FOR EMPLOYEE INSURANCE

RETIREMENT REDUCTIONS: All insurance terminates at retirement, except as provided for under the

portability provision.

CONTRIBUTORY/NONCONTRIBUTORY: Basic insurance is noncontributory insurance; supplemental employee 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.

F.70944 B

For supplemental employee insurance:

For employees in an eligible class immediately prior to the effective date of the group policy:

An amount equal to the amount of contributory insurance for which the employee was insured under the prior carrier's group policy on the day immediately preceding the effective date of this policy.

For employees who first become eligible after the effective date of this

policy:

\$150,000

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECTIVE DATE OF INCREASES AND DECREASES DUE TO CHANGE IN REGULAR PAY

Increases and decreases due to a change in regular pay will become effective the date of the change in regular pay. For purposes of insurance under this policy, the date of the change in regular pay means the date the payroll system is updated. Evidence of insurability will not be required for an increase in insurance due solely to an increase in regular pay. All increases are subject to the actively at work requirement.

DEPENDENTS BENEFIT SCHEDULE

DEPENDENTS TERM LIFE INSURANCE:

An employee must be approved for Supplemental Employee Life and matching accidental death and dismemberment coverage under this plan to be eligible to elect Supplemental Spouse/Civil Union Partner and Supplemental Child Life and matching accidental death and dismemberment coverage.

Supplemental Spouse/Civil Union Partner Life Insurance

Eligible Class Amount of Supplemental Spouse/Civil Union Partner Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and subject to a maximum of the lesser of 50% of the

employee's supplemental amount of insurance or \$250,000.

Supplemental Child Life Insurance

Eligible Class Amount of Supplemental Child Life Insurance

All employees \$5,000 or \$10,000, as elected by the employee. Supplemental child coverage

cannot exceed 50% of the Employee's Supplemental amount of insurance.

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

Spouse/Civil Union Partner and Child AD&D Insurance

Eligible Class Amount of Spouse/Civil Union Partner and Child AD&D Insurance

All employees An amount equal to the amount of Supplemental Spouse/Civil Union Partner

and Child Life insurance for which the spouse/civil union partner and/or child

are insured under the group policy.

F.70944 C

GENERAL PROVISIONS FOR DEPENDENTS INSURANCE

GRANDFATHERED COVERAGE:

There is a group of grandfathered employees who were able to elect coverage on his or her spouse and/or children without electing Supplemental Employee Life/AD&D coverage. The coverage for this group that is currently in place was elected prior to January 1, 2003. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

There is a group of grandfathered employees in which the spouse coverage maximum of "the lessor of 50% of the employee's supplemental amount of insurance or \$150,000" does not apply. The coverage for this group that is currently in place was elected prior to January 1, 2003 and their coverage amounts are outside of the current plan parameters. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/AD&D coverage, and the spouse/civil union partner becomes a State employee, then the spouse/civil union partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guarantee issue basis, equal to the amount he/she had as a spouse/civil union partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the spouse/civil union partner coverage ends.

CONTINUED DEPENDENTS INSURANCE UPON THE DEATH OF THE EMPLOYEE:

Notwithstanding anything in the policy to the contrary, any dependents term life and accidental death and dismemberment insurance that is in force at the time of an employee's death shall remain in force for five months from the date of the employee's death, with no further premium payment required.

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 with eligible dependents immediately prior to the effective date of this policy, the guaranteed issue amount is equal to the amount of dependents insurance for which they were insured under the prior group policy.

For employees who first become eligible for dependents insurance after the effective date of this policy, the guaranteed issue amount is as follows:

For Supplemental Spouse/Civil Union Partner

Insurance: \$30,000

For Supplemental Child Insurance: \$10,000*

* As an exception, evidence of insurability is never required of a child regardless of when application is made (new hire, family status change, or annual enrollment.)

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECT OF EMPLOYEE'S RETIREMENT:

All dependents insurance terminates upon the employee's retirement except as provided under the portability provision.

F.70944 D

ADDITIONAL INFORMATION

WAIVER OF PREMIUM APPLICATION:

Applies to contributory and noncontributory employee insurance.

ELECTION CHANGES:

Election changes can be made at any time, except child life changes are limited to annual enrollment or within 31 days of a Family Status Change.

An employee may make the following changes to his or her elections at annual open enrollment or within 31 days of a Family Status Change without providing any evidence of insurability:

- 1. Any reduction or termination of coverage.
- 2. Any election for child life insurance.
- 3. For changes due to a Family Status Change: Any increase in Supplemental Employee Life/AD&D insurance that does not exceed the guaranteed issue of \$150,000, including enrolling in Supplemental Employee Life/AD&D for the first time for up to \$150,000.
- 4. For changes due to a Family Status Change: Any increase in Supplemental Spouse/Civil Union Partner insurance that does not exceed the guaranteed issue of \$30,000, including enrolling in Supplemental Spouse/Civil Union Partner/AD&D for the first time for up to \$30,000.
- 5. For changes at Annual Enrollment: Employees currently participating in Employee Supplemental Life may increase their coverage by up to five increments of \$10,000, subject to the guaranteed issue limit of \$150,000. Election changes will be effective July 1 following the Annual Enrollment.
- 6. During the 2022 Annual Enrollment employees not currently participating in Employee Supplemental Life may elect coverage by up to five increments of \$10,000 without providing evidence of insurability.

Any amount requested above these amounts or any change requested outside of these events shall require evidence of insurability and will not be effective unless and until the evidence is approved by Minnesota Life.

Family Status Change means:

- Birth or adoption or otherwise acquiring a newly eligible child
- Death of a spouse/civil union partner
- Marriage
- Establishment of a civil union partnership
- Changes in employment status and result in a loss of employer sponsored life insurance coverage

SPECIAL MARRIED EMPLOYEES RULES:

- If an employee is insured for Supplemental Spouse/Civil Union Partner/AD&D coverage and that spouse/civil union partner coverage terminates, the employee can apply for Supplemental Employee Life/AD&D on a guaranteed issue basis equal to the amount he or she had as a spouse/civil union partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner coverage ends.
- If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/AD&D coverage, and the spouse/civil union partner becomes a State employee, then the spouse/civil union partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guaranteed issue basis, equal to the amount he or she had as a spouse/civil union partner, but not less than \$100,000 and not to exceed \$250,000. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner coverage ends.

F.70944 E

- If two State employees are married, or have established a civil union partnership and both have Supplemental Employee Life/AD&D coverage, and one employee terminates employment with the State and loses their Supplemental Employee Life/AD&D coverage, then the other remaining employee may add Supplemental Spouse/Civil Union Partner coverage, on a guarantee issue basis, up to an amount not to exceed the lesser of:
 - the amount that was in place as Supplemental Employee Life/AD&D coverage for the terminated employee;
 - 50% of the remaining employee's amount of coverage;
 and
 - **\$250,000.**

The request for new Supplemental Spouse/Civil Union Partner/AD&D coverage must be made within 31 days of the date that the employee coverage ends.

RIDER(S) TO THE GROUP POLICY

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

F.70944 F

Group Term Life Policy Amendment #6

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

To be attached to and made a part of Group Policy No. 33780 issued by Minnesota Life Insurance Company to State of Colorado. This amendment is effective as of March 24, 2022. Continued payment of premiums shall constitute acceptance of the conditions stated in this amendment. The following changes are made to the policy:

- 1) The guaranteed issue amount for Employee Supplemental Life is increased from \$100,000 to \$150,000.
- 2) Language is added to allow employees currently participating in Employee Supplemental Life to increase Employee Supplemental Life insurance, by up to five increments of \$10,000, at Annual Enrollment. This language is found on the Policy Specifications page under "Election Changes" and will read as follows:
 - For changes at Annual Enrollment: Employees currently participating in Employee Supplemental Life may increase their coverage by up to five increments of \$10,000, subject to the guaranteed issue limit of \$150,000. Election changes will be effective July 1 following the Annual Enrollment.
- 3) A one-time open enrollment opportunity is added to the policy. This language is found on the Policy Specifications page under "Election Changes" and will read as follows:
 - During the 2022 Annual Enrollment employees not currently
 participating in Employee Supplemental Life may elect coverage by up
 to five increments of \$10,000 without providing evidence of
 insurability.

As a result of this change, the Group Policy Specifications Page is replaced with the attached Group Policy Specifications Page effective March 24, 2022.

Agreed to by Minnesota Life Insurance Company this 27th day of June, 2022.

Vice President and Actuary

By Susan Meuson Regala

GENERAL INFORMATION

POLICYHOLDER: State of Colorado POLICY NO.: 33780-G

ASSOCIATED COMPANIES: All subsidiaries and affiliates reported to Minnesota Life by the policyholder for

inclusion in the policy.

POLICY EFFECTIVE DATE: July 1, 2014. This Specification Page represents the plan in effect as of March 24,

2022.

Minnesota Life Insurance Company has issued Group Policy Number 33780-G to the State of Colorado effective as of July 1, 2014 as a replacement for an earlier policy

containing the same number.

In no case shall Minnesota Life Insurance Company be liable under both policies.

POLICY ANNIVERSARY DATE: July 1 of each year beginning July 1, 2015.

PREMIUM DUE DATE(S): The first day of each month. Minnesota Life and the policyholder agree that

premiums can be paid no later than the 45th day following the premium due date.

GROUP: This group is composed of all eligible employees as defined by Colorado State Statute.

Permanent part-time employees are included in this definition. Eligible employee is defined as: Employee means any officer or employee under the state personnel system of the state of Colorado whose salary is paid by state funds or any employee of the department of education, the Colorado commission on higher education, or the Colorado school for the deaf and the blind whose salary is paid by state funds, or any member of the military employed pursuant to section 28-3-904 C.R.S. Employee includes any officer or employee of the legislative or judicial branch, any elected or appointed state official or employee who receives compensation other than expense reimbursement from the state funds, any elected state official who does not receive compensation other than expense reimbursement from state funds, and includes any member of the board of assessment appeals. Employee does not include persons employed on a temporary basis; except that it shall include a member of the military employed pursuant to section 28-3-904 C.R.S. for more than 30 consecutive days.

Employee does not include an employee insured under the University of Colorado group life insurance plan or a full-time member of the armed forces of any country.

ENROLLMENT PERIOD: Not applicable for noncontributory insurance.

For contributory insurance:

For employees who are newly eligible, the enrollment period is equal to 31 days from

the date the person meets the definition of group.

For employees who first become eligible for dependent insurance after the newly eligible enrollment period, the enrollment period for dependent life is 31 days from the

first day of eligibility.

WAITING PERIOD: The period commencing with the date a person meets the definition of "GROUP"

above and ending with the first day of the month next following that date.

F.70944 A

EMPLOYEE BENEFIT SCHEDULE

EMPLOYEE TERM LIFE INSURANCE:

Basic Life Insurance

Eligible Class Amount of Basic Life Insurance

All employees One times annual regular pay, rounded to the next higher \$1,000, if not already

a multiple thereof, subject to a minimum benefit of \$50,000 and maximum

benefit of \$250,000.

Supplemental Employee Life Insurance

Eligible Class Amount of Supplemental Employee Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and a maximum of \$500,000.

BASIC LIFE INSURANCE ADDITIONAL BENEFIT:

Basic Life Insurance Repatriation Benefit

Eligible Class Amount of Insurance

All employees If a death benefit becomes payable for an insured under this policy we will pay

an additional benefit to reimburse the person who incurs the transportation expenses to transport the insured's body to a mortuary near his or her primary residence, but not to exceed the lesser of \$5,000 or 10% of the basic life insurance, if the insured dies more than 200 miles from his or her primary place

of residence.

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

Basic and Supplemental Insurance

Eligible Class Amount of Basic and Supplemental Employee AD&D Insurance

All employees An amount equal to the amount of Basic and Supplemental Employee Life

Insurance for which the employee is insured under the group policy.

GENERAL PROVISIONS FOR EMPLOYEE INSURANCE

RETIREMENT REDUCTIONS: All insurance terminates at retirement, except as provided for under the

portability provision.

CONTRIBUTORY/NONCONTRIBUTORY: Basic insurance is noncontributory insurance; supplemental employee 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.

F.70944 B

For supplemental employee insurance:

For employees in an eligible class immediately prior to the effective date of the group policy:

An amount equal to the amount of contributory insurance for which the employee was insured under the prior carrier's group policy on the day immediately preceding the effective date of this policy. For employees who first become eligible after the effective date of this policy:

\$150,000

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECTIVE DATE OF INCREASES AND DECREASES DUE TO CHANGE IN REGULAR PAY

Increases and decreases due to a change in regular pay will become effective the date of the change in regular pay. For purposes of insurance under this policy, the date of the change in regular pay means the date the payroll system is updated. Evidence of insurability will not be required for an increase in insurance due solely to an increase in regular pay. All increases are subject to the actively at work requirement.

DEPENDENTS BENEFIT SCHEDULE

DEPENDENTS TERM LIFE INSURANCE:

An employee must be approved for Supplemental Employee Life and matching accidental death and dismemberment coverage under this plan to be eligible to elect Supplemental Spouse/Civil Union Partner and Supplemental Child Life and matching accidental death and dismemberment coverage.

Supplemental Spouse/Civil Union Partner Life Insurance

Eligible Class Amount of Supplemental Spouse/Civil Union Partner Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and subject to a maximum of the lesser of 50% of the

employee's supplemental amount of insurance or \$250,000.

Supplemental Child Life Insurance

Eligible Class Amount of Supplemental Child Life Insurance

All employees \$5,000 or \$10,000, as elected by the employee. Supplemental child coverage cannot exceed 50% of the Employee's Supplemental amount of insurance.

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

Spouse/Civil Union Partner and Child AD&D Insurance

Eligible Class Amount of Spouse/Civil Union Partner and Child AD&D Insurance

All employees An amount equal to the amount of Supplemental Spouse/Civil Union Partner

and Child Life insurance for which the spouse/civil union partner and/or child

are insured under the group policy.

F.70944 C

GENERAL PROVISIONS FOR DEPENDENTS INSURANCE

GRANDFATHERED COVERAGE:

There is a group of grandfathered employees who were able to elect coverage on his or her spouse and/or children without electing Supplemental Employee Life/AD&D coverage. The coverage for this group that is currently in place was elected prior to January 1, 2003. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

There is a group of grandfathered employees in which the spouse coverage maximum of "the lessor of 50% of the employee's supplemental amount of insurance or \$150,000" does not apply. The coverage for this group that is currently in place was elected prior to January 1, 2003 and their coverage amounts are outside of the current plan parameters. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/AD&D coverage, and the spouse/civil union partner becomes a State employee, then the spouse/civil union partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guarantee issue basis, equal to the amount he/she had as a spouse/civil union partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the spouse/civil union partner coverage ends.

CONTINUED DEPENDENTS INSURANCE UPON THE DEATH OF THE EMPLOYEE:

Notwithstanding anything in the policy to the contrary, any dependents term life and accidental death and dismemberment insurance that is in force at the time of an employee's death shall remain in force for five months from the date of the employee's death, with no further premium payment required.

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 with eligible dependents immediately prior to the effective date of this policy, the guaranteed issue amount is equal to the amount of dependents insurance for which they were insured under the prior group policy.

For employees who first become eligible for dependents insurance after the effective date of this policy, the guaranteed issue amount is as follows:

For Supplemental Spouse/Civil Union Partner

Insurance: \$30,000

For Supplemental Child Insurance: \$10,000*

* As an exception, evidence of insurability is never required of a child regardless of when application is made (new hire, family status change, or annual enrollment.)

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECT OF EMPLOYEE'S RETIREMENT:

All dependents insurance terminates upon the employee's retirement except as provided under the portability provision.

F.70944 D

ADDITIONAL INFORMATION

WAIVER OF PREMIUM APPLICATION:

Applies to contributory and noncontributory employee insurance.

ELECTION CHANGES:

Election changes can be made at any time, except child life changes are limited to annual enrollment or within 31 days of a Family Status Change.

An employee may make the following changes to his or her elections at annual open enrollment or within 31 days of a Family Status Change without providing any evidence of insurability:

- 1. Any reduction or termination of coverage.
- 2. Any election for child life insurance.
- 3. For changes due to a Family Status Change: Any increase in Supplemental Employee Life/AD&D insurance that does not exceed the guaranteed issue of \$150,000, including enrolling in Supplemental Employee Life/AD&D for the first time for up to \$150,000.
- 4. For changes due to a Family Status Change: Any increase in Supplemental Spouse/Civil Union Partner insurance that does not exceed the guaranteed issue of \$30,000, including enrolling in Supplemental Spouse/Civil Union Partner/AD&D for the first time for up to \$30,000.
- 5. For changes at Annual Enrollment: Employees currently participating in Employee Supplemental Life may increase their coverage by up to five increments of \$10,000, subject to the guaranteed issue limit of \$150,000. Election changes will be effective July 1 following the Annual Enrollment.
- 6. During the 2022 Annual Enrollment employees not currently participating in Employee Supplemental Life may elect coverage by up to five increments of \$10,000 without providing evidence of insurability.

Any amount requested above these amounts or any change requested outside of these events shall require evidence of insurability and will not be effective unless and until the evidence is approved by Minnesota Life.

Family Status Change means:

- Birth or adoption or otherwise acquiring a newly eligible child
- Death of a spouse/civil union partner
- Marriage
- Establishment of a civil union partnership

SPECIAL MARRIED EMPLOYEES RULES:

- If an employee is insured for Supplemental Spouse/Civil Union Partner/AD&D coverage and that spouse/civil union partner coverage terminates, the employee can apply for Supplemental Employee Life/AD&D on a guaranteed issue basis equal to the amount he or she had as a spouse/civil union partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner coverage ends.
- If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/AD&D coverage, and the spouse/civil union partner becomes a State employee, then the spouse/civil union partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guaranteed issue basis, equal to the amount he or she had as a spouse/civil union partner, but not less than \$100,000 and not to exceed \$250,000. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner coverage ends.
- If two State employees are married, or have established a civil union partnership and both have Supplemental Employee Life/AD&D

coverage, and one employee terminates employment with the State and loses their Supplemental Employee Life/AD&D coverage, then the other remaining employee may add Supplemental Spouse/Civil Union Partner coverage, on a guarantee issue basis, up to an amount not to exceed the lesser of:

- the amount that was in place as Supplemental Employee Life/AD&D coverage for the terminated employee;
- 50% of the remaining employee's amount of coverage; and
- **\$250,000.**

The request for new Supplemental Spouse/Civil Union Partner/AD&D coverage must be made within 31 days of the date that the employee coverage ends.

RIDER(S) TO THE GROUP POLICY

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

F.70944 F

Group Term Life Policy Amendment #5

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

To be attached to and made a part of Group Policy No. 33780-G issued by Minnesota Life Insurance Company to State of Colorado. This amendment is effective as of January 1, 2021. Continued payment of premiums shall constitute acceptance of the conditions stated in this amendment.

Coverage for domestic partners is removed from the policy with no grandfathering of existing domestic partner coverage.

As a result of this change, the Group Policy Specifications Page is replaced with the attached Group Policy Specifications Page effective January 1, 2021.

Agreed to by Minnesota Life Insurance Company this 4th day of March 2021.

By Susan Munson Algala
PAM

Vice President and Actuary

GENERAL INFORMATION

POLICYHOLDER: State of Colorado POLICY NO.: 33780-G

ASSOCIATED COMPANIES: All subsidiaries and affiliates reported to Minnesota Life by the policyholder for

inclusion in the policy.

POLICY EFFECTIVE DATE: July 1, 2014. This Specification Page represents the plan in effect as of January 1,

2021.

Minnesota Life Insurance Company has issued Group Policy Number 33780-G to the State of Colorado effective as of July 1, 2014 as a replacement for an earlier policy

containing the same number.

In no case shall Minnesota Life Insurance Company be liable under both policies.

POLICY ANNIVERSARY DATE: July 1 of each year beginning July 1, 2015.

PREMIUM DUE DATE(S): The first day of each month. Minnesota Life and the policyholder agree that

premiums can be paid no later than the 45th day following the premium due date.

GROUP: This group is composed of all eligible employees as defined by Colorado State Statute.

Permanent part-time employees are included in this definition. Eligible employee is defined as: Employee means any officer or employee under the state personnel system of the state of Colorado whose salary is paid by state funds or any employee of the department of education, the Colorado commission on higher education, or the Colorado school for the deaf and the blind whose salary is paid by state funds, or any member of the military employed pursuant to section 28-3-904 C.R.S. Employee includes any officer or employee of the legislative or judicial branch, any elected or appointed state official or employee who receives compensation other than expense reimbursement from the state funds, any elected state official who does not receive compensation other than expense reimbursement from state funds, and includes any member of the board of assessment appeals. Employee does not include persons employed on a temporary basis; except that it shall include a member of the military employed pursuant to section 28-3-904 C.R.S. for more than 30 consecutive days.

Employee does not include an employee insured under the University of Colorado group life insurance plan or a full-time member of the armed forces of any country.

ENROLLMENT PERIOD: Not applicable for noncontributory insurance.

For contributory insurance:

For employees who are newly eligible, the enrollment period is equal to 31 days from

the date the person meets the definition of group.

For employees who first become eligible for dependent insurance after the newly eligible enrollment period, the enrollment period for dependent life is 31 days from the

first day of eligibility.

WAITING PERIOD: The period commencing with the date a person meets the definition of "GROUP"

above and ending with the first day of the month next following that date.

F.70944 A

EMPLOYEE BENEFIT SCHEDULE

EMPLOYEE TERM LIFE INSURANCE:

Basic Life Insurance

Eligible Class Amount of Basic Life Insurance

All employees One times annual regular pay, rounded to the next higher \$1,000, if not already

a multiple thereof, subject to a minimum benefit of \$50,000 and maximum

benefit of \$250,000.

Supplemental Employee Life Insurance

Eligible Class Amount of Supplemental Employee Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and a maximum of \$500,000.

BASIC LIFE INSURANCE ADDITIONAL BENEFIT:

Basic Life Insurance Repatriation Benefit

Eligible Class Amount of Insurance

All employees If a death benefit becomes payable for an insured under this policy we will pay

an additional benefit to reimburse the person who incurs the transportation expenses to transport the insured's body to a mortuary near his or her primary residence, but not to exceed the lesser of \$5,000 or 10% of the basic life insurance, if the insured dies more than 200 miles from his or her primary place

of residence.

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

Basic and Supplemental Insurance

Eligible Class Amount of Basic and Supplemental Employee AD&D Insurance

All employees An amount equal to the amount of Basic and Supplemental Employee Life

Insurance for which the employee is insured under the group policy.

GENERAL PROVISIONS FOR EMPLOYEE INSURANCE

RETIREMENT REDUCTIONS: All insurance terminates at retirement, except as provided for under the

portability provision.

CONTRIBUTORY/NONCONTRIBUTORY: Basic insurance is noncontributory insurance; supplemental employee 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.

F.70944 B

For supplemental employee insurance:

For employees in an eligible class immediately prior to the effective date of the group policy:

An amount equal to the amount of contributory insurance for which the employee was insured under the prior carrier's group policy on the day immediately preceding the effective date of this policy. For employees who first become eligible after the effective date of this policy:

\$100,000.

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECTIVE DATE OF INCREASES AND DECREASES DUE TO CHANGE IN REGULAR PAY

Increases and decreases due to a change in regular pay will become effective the date of the change in regular pay. For purposes of insurance under this policy, the date of the change in regular pay means the date the payroll system is updated. Evidence of insurability will not be required for an increase in insurance due solely to an increase in regular pay. All increases are subject to the actively at work requirement.

DEPENDENTS BENEFIT SCHEDULE

DEPENDENTS TERM LIFE INSURANCE:

An employee must be approved for Supplemental Employee Life and matching accidental death and dismemberment coverage under this plan to be eligible to elect Supplemental Spouse/Civil Union Partner and Supplemental Child Life and matching accidental death and dismemberment coverage.

Supplemental Spouse/Civil Union Partner Life Insurance

Eligible Class Amount of Supplemental Spouse/Civil Union Partner Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and subject to a maximum of the lesser of 50% of the employee's supplemental amount of insurance or \$250,000.

Supplemental Child Life Insurance

Eligible Class Amount of Supplemental Child Life Insurance

All employees \$5,000 or \$10,000, as elected by the employee. Supplemental child coverage

cannot exceed 50% of the Employee's Supplemental amount of insurance.

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

Spouse/Civil Union Partner and Child AD&D Insurance

Eligible Class Amount of Spouse/Civil Union Partner and Child AD&D Insurance

All employees An amount equal to the amount of Supplemental Spouse/Civil Union Partner

and Child Life insurance for which the spouse/civil union partner and/or child

are insured under the group policy.

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GENERAL PROVISIONS FOR DEPENDENTS INSURANCE

GRANDFATHERED COVERAGE:

There is a group of grandfathered employees who were able to elect coverage on his or her spouse and/or children without electing Supplemental Employee Life/AD&D coverage. The coverage for this group that is currently in place was elected prior to January 1, 2003. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

There is a group of grandfathered employees in which the spouse coverage maximum of "the lessor of 50% of the employee's supplemental amount of insurance or \$150,000" does not apply. The coverage for this group that is currently in place was elected prior to January 1, 2003 and their coverage amounts are outside of the current plan parameters. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/AD&D coverage, and the spouse/civil union partner becomes a State employee, then the spouse/civil union partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guarantee issue basis, equal to the amount he/she had as a spouse/civil union partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the spouse/civil union partner coverage ends.

CONTINUED DEPENDENTS INSURANCE UPON THE DEATH OF THE EMPLOYEE:

Notwithstanding anything in the policy to the contrary, any dependents term life and accidental death and dismemberment insurance that is in force at the time of an employee's death shall remain in force for five months from the date of the employee's death, with no further premium payment required.

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 with eligible dependents immediately prior to the effective date of this policy, the guaranteed issue amount is equal to the amount of dependents insurance for which they were insured under the prior group policy.

For employees who first become eligible for dependents insurance after the effective date of this policy, the guaranteed issue amount is as follows:

For Supplemental Spouse/Civil Union Partner

Insurance: \$30,000

For Supplemental Child Insurance: \$10,000*

* As an exception, evidence of insurability is never required of a child regardless of when application is made (new hire, family status change, or annual enrollment.)

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECT OF EMPLOYEE'S RETIREMENT:

All dependents insurance terminates upon the employee's retirement except as provided under the portability provision.

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ADDITIONAL INFORMATION

WAIVER OF PREMIUM APPLICATION:

Applies to contributory and noncontributory employee insurance.

ELECTION CHANGES:

Election changes can be made at any time, except child life changes are limited to annual enrollment or within 31 days of a Family Status Change.

An employee may make changes to his or her elections at annual open enrollment or within 31 days of a Family Status Change without providing any evidence of insurability:

- 1. Any reduction or termination of coverage.
- 2. Any election for child life insurance.
- 3. For changes due to a Family Status Change: Any increase in Supplemental Employee Life/AD&D insurance that does not exceed the guaranteed issue of \$100,000, including enrolling in Supplemental Employee Life/AD&D for the first time for up to \$100,000.
- 4. For changes due to a Family Status Change: Any increase in Supplemental Spouse/Civil Union Partner insurance that does not exceed the guaranteed issue of \$30,000, including enrolling in Supplemental Spouse/Civil Union Partner/AD&D for the first time for up to \$30,000.

Any amount requested above these amounts or any change requested outside of these events shall require evidence of insurability and will not be effective unless and until the evidence is approved by Minnesota Life.

Family Status Change means:

- Birth or adoption or otherwise acquiring a newly eligible child
- Death of a spouse/civil union partner
- Marriage
- Establishment of a civil union partnership

SPECIAL MARRIED EMPLOYEES RULES:

- If an employee is insured for Supplemental Spouse/Civil Union Partner/AD&D coverage and that spouse/civil union partner coverage terminates, the employee can apply for Supplemental Employee Life/AD&D on a guaranteed issue basis equal to the amount he or she had as a spouse/civil union partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner coverage ends.
- If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/AD&D coverage, and the spouse/civil union partner becomes a State employee, then the spouse/civil union partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guaranteed issue basis, equal to the amount he or she had as a spouse/civil union partner, but not less than \$100,000 and not to exceed \$250,000. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner coverage ends.

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- If two State employees are married, or have established a civil union partnership and both have Supplemental Employee Life/AD&D coverage, and one employee terminates employment with the State and loses their Supplemental Employee Life/AD&D coverage, then the other remaining employee may add Supplemental Spouse/Civil Union Partner coverage, on a guarantee issue basis, up to an amount not to exceed the lesser of:
 - the amount that was in place as Supplemental Employee Life/AD&D coverage for the terminated employee;
 - 50% of the remaining employee's amount of coverage;
 and
 - **\$250,000.**

The request for new Supplemental Spouse/Civil Union Partner/AD&D coverage must be made within 31 days of the date that the employee coverage ends.

RIDER(S) TO THE GROUP POLICY

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

F.70944 F

Accidental Death and Dismemberment Policy Rider

Minnesota Life Insurance Company, a Securian Financial Group affiliate 400 Robert Street North • St. Paul, Minnesota 55101-2098

General Information

This rider is issued in consideration of the required premium and amends the group policy to which it is attached. This rider is subject to every term, condition, exclusion, limitation, and provision of the group policy unless otherwise expressly provided for herein.

What does this rider provide?

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

Who is eligible for insurance under this rider?

An employee or dependent who is insured under the provisions applicable to life insurance coverage under the group policy is eligible for insurance under this rider. All references to an insured in this rider shall include dependents. All provisions of this rider applicable to an "insured" shall apply to an insured dependent.

When does insurance under this rider become effective?

Insurance becomes effective on the date that the employee or dependent becomes insured for life insurance under the group policy.

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 rider means that the insured's 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 the insured's coverage under this rider is in force. The insured's death or dismemberment must occur within 365 days after the date of the injury and while his or her coverage under this rider is in force.

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

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

- (2) suicide or attempted suicide, whether sane or insane; or
- (3) the insured's 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 the insured is the operator of the motor vehicle and this insured's 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
- 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) war or any act of war, whether declared or undeclared: or
- (10) service in the military of any nation.

FOR LOSS OF

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

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

table:

Life Full Amount of AD&D Insurance
Both Hands or Both Feet . Full Amount of AD&D Insurance
Sight of Both Eyes Full Amount of AD&D Insurance
Speech and Hearing
(In both ears) Full Amount of AD&D Insurance
One Hand and One Foot Full Amount of AD&D Insurance
One Foot and Sight
of One Eye Full Amount of AD&D Insurance
One Hand and Sight
of One Eye Full Amount of AD&D Insurance
Quadriplegia Full Amount of AD&D Insurance
Paraplegia 50% of Amount of AD&D Insurance
Sight of One Eye 50% of Amount of AD&D Insurance
Speech or Hearing
(In both ears)50% of Amount of AD&D Insurance
One Hand or
One Foot50% of Amount of AD&D Insurance
Hemiplegia50% of Amount of AD&D Insurance

AMOUNT OF BENEFIT

Thumb and Index

Finger of One Hand.....25% of Amount of AD&D Insurance

Loss of hands or feet means complete severance at or above the wrist or ankle joints. Loss of sight, speech, or hearing in both ears means the entire and irrecoverable loss of sight, speech, or hearing in both ears 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 rider for any one accident, not including any amount paid according to the terms of the Additional Benefits section of this rider, will never exceed the full amount of AD&D insurance shown on the specifications page attached to the group policy.

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 the insured 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 us and the beneficiary.

To whom do we pay the benefit?

In the case of a certificate holder's accidental death, we will pay the accidental death benefit to the person or persons entitled to receive his or her death benefit under the terms of the group policy. The benefit for other losses sustained by the certificate holder will be paid to the certificate holder, if living, otherwise to the person or persons entitled to receive the certificate holder's death benefit under the terms of the group policy.

A dependent's AD&D benefit will be paid to the certificate holder, if living. If the insured employee is not living, the

death benefit payable under this rider will be paid in equal shares to the first surviving class of the classes below:

- (1) the children of the dependent, if living, otherwise;
- (2) the parents of the dependent, if living, otherwise;
- (3) the brothers and sisters of the dependent, if living, otherwise;
- (4) the insured employee's estate.

Additional Benefits

Unless stated otherwise, 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, unless otherwise stated. All provisions of this rider including but not limited to the "What does accidental death or dismemberment by accidental injury mean?" section shall apply to these additional benefits.

Career Adjustment Benefit

What is the career adjustment benefit?

If an insured employee dies as a result of a covered accident for which an accidental death insurance benefit is payable and he or she is survived by his or her spouse/civil union partner, we will pay a career adjustment benefit to the surviving spouse/civil union partner, provided that the spouse/civil union partner within 36 months after the insured employee's death, registers and is in attendance at a professional or trades training program for the purpose of obtaining employment or increasing his or her earnings.

The benefit will be equal to the lesser of:

- (1) \$5,000 per year; or
- (2) the actual tuition charges, exclusive of room and board; or
- (3) the cumulative total of \$10,000 or 25% of the insured employee's amount of accidental death insurance, whichever is less.

Proof of such costs will be required before benefits are paid.

Child Care Benefit

What is the child care benefit?

If an insured employee dies as a result of a covered accident and he or she is survived by his or her spouse/civil union partner and one or more dependent children under age 13, we will pay additional benefits to reimburse the surviving spouse/civil union partner for child care expenses they incur for the insured employee's dependent children while under age 13.

The benefit will be the lesser of:

- (1) \$5,000 per year; or
- (2) actual incurred child care expenses; or

(3) the cumulative total of \$10,000 or 25% of the insured employee's amount of accidental death insurance, whichever is less.

Child care expenses are those expenses which are for a service or supply furnished by a licensed child care provider or facility for a dependent child's care who are not a member of the insured employee's family. No payment will be made for expenses incurred more than 36 months after the date of the insured employee's death or for expenses incurred for dependent children over age 13. Proof of incurred child care expenses by the surviving spouse/civil union partner shall be required before any benefit payment is made. The child care benefit will be paid to the surviving spouse/civil union partner.

Dependent Child Education Benefit

What is the dependent child education benefit?

We will pay an education benefit on behalf of the insured employee's dependent children if an insured employee dies as a result of a covered accident and is survived by one or more dependent children, provided that:

- (1) at the time of the insured employee's death, the dependent child is enrolled as a full-time student at an accredited post-secondary educational institution (however, no benefit will be payable for the current school year); or
- (2) the dependent child enrolls on a full-time basis in an accredited post-secondary educational institution within one year of the employee's death.

The benefit payable per child will be the lesser of:

- (1) \$5,000 per year; or
- (2) the actual tuition charged, exclusive of room and board; or
- (3) the cumulative total of \$20,000 or 25% of the insured employee's amount of accidental death insurance, whichever is less.

The benefit will be payable at the beginning of each school year for a maximum of four consecutive years. The benefit will be paid to the dependent child annually if he or she is of legal age. If the dependent child is not of legal age the benefit will be paid annually to the person who provides proof they have paid or will pay the tuition bill for that school year. Proof of enrollment and tuition costs are required for each school year.

Seatbelt Benefit

What is the seatbelt benefit?

If an insured dies as a result of a covered accident which occurs while he or she is driving or riding in a private passenger car, we will pay an additional AD&D benefit equal to the lesser of:

- (1) \$10.000; or
- (2) 100% of the insured's amount of AD&D insurance.

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

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

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

Termination

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

An insured's coverage ends on the earliest of:

- (1) the date the certificate holder is no longer covered for life insurance under the group policy; or
- (2) for an insured dependent, the end of the month in which the dependent no longer meets the eligibility requirements; or
- (3) for an insured dependent, the date the dependent is no longer covered for life insurance under the group policy; or
- (4) 45 days (the grace period) after the due date of any premium contribution which is not paid.

The certificate holder must notify us or the employer when he or she no longer has any dependents eligible for coverage under this benefit so that premiums may be discontinued. All premiums paid for dependents who are no longer eligible for coverage under this benefit will be refunded without any payment of claim.

When does this rider terminate?

This rider will terminate on the earlier of:

- (1) the date we receive a written request from the policyholder to cancel this rider; or
- (2) the date the group policy is terminated.

Additional Information

Do we have the right to obtain independent medical verification?

Yes. We retain the right to have an insured medically examined at our expense 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 rider be converted to a policy of individual insurance upon termination?

No. Coverage under this rider will not be included in any insurance issued under the conversion right section of the group policy.

Renée D. Montz Secretary

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Dependents Term Life Insurance Policy Rider

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

General Information

This rider is issued in consideration of the required premium and amends the group policy to which it is attached. The rider is subject to every term, condition, exclusion, limitation, and provision of the group policy unless otherwise expressly provided for herein.

What does this rider provide?

This rider provides insurance on the lives of the insured employee's eligible dependents.

What members of the insured employee's family are eligible for insurance under this rider?

The following members of the insured employee's family are eligible for insurance under this rider:

The members of an insured employee's family are considered his or her eligible dependents. Eligible dependents are specified in statutes, primarily § 24-50-603(5) and (6.5), C.R.S., as modified or further defined by other state statutes (e.g., Title 10) or federal regulations (e.g., Affordable Care Act [ACA], IRC on taxable income).

- A. Current spouse, including common law spouse.
 - Spouse means a spouse as recognized under federal tax laws.
 - 2. Common law spouse means an adult, at least 18 years of age:
 - a. with whom the employee cohabitates; and
 - who represent themselves to the community as married to each other;
 and
 - c. there is no legal impediment to the marriage.
- B. Current civil union partner who is an adult:
 - eighteen years of age or older who is not under guardianship, unless the party under guardianship has the written consent of his or her guardian to enter into a civil union as created by Article 15 of Title 14, C.R.S.; and
 - who has entered into a civil union in accordance with the requirements of Article 15 of Title 14, C.R.S. or who has established a relationship legally entered into in other jurisdictions that are similar to civil unions created by Article 15 of Title 14,

- C.R.S. and that are not otherwise recognized pursuant to Colorado law; and
- 3. who is of the opposite gender or same gender as the employee; and
- 4. who is not a party to another civil union; and
- 5. who is not married: and
- who is not a relative to the employee.
 Article 15 of Title 14, C.R.S. prohibits a person from entering into a civil union with an ancestor, descendant, brother, sister, uncle, aunt, niece or nephew, whether the relationship is by the half or the whole blood.
- C. A child from live birth (stillborn and unborn children are not eligible) until the end of the month he or she turns age 26. The legal definition of child must be applied (e.g., first generation, parent-child relationship). As of July 1, 2011, marital status, student status, financial support, and residency are no longer factors under the ACA.
 - 1. Biological or natural child.
 - 2. Legally adopted.
 - 3. Legally placed for adoption or foster care.
 - 4. Step child as long as the employee and parent are married.
 - 5. Child of a civil union partner.
 - Child for whom the employee has a court order that specifies responsibility for health insurance coverage (legal custody or allocation of parental responsibility). Note: a court has determined there is a parentchild relationship for purposes of coverage.

E. A disabled child must be:

- 1. unmarried,
- 2. medically certificated as disabled prior to the age of 26; and
- 3. dependent upon employee or spouse/civil union partner for financial support; and
- proof of disability and dependency must be provided before becoming covered under the State's life plan and annually, if requested; and
- newly hired employees will need to provide proof that the child's disability began prior to

the child reaching age 26. If a child of a newly hired employee or current employee becomes disabled after the child reaches age 26, the child is ineligible for coverage under the State's life plan.

Exclusions

Ex-spouses and their children, civil union expartners and their children, parents, grandparents and grandchildren, siblings, aunts and uncles, nieces and nephews, cousins, and any other relatives or non-relatives in the household. The only exception is when a court determines a qualified dependent relationship exists and issues an order specifying responsibility for coverage.

If any spouse/civil union partner is insured as an eligible employee under the group policy for employee supplemental term life, he or she is not also eligible to be insured with dependent spouse/civil union partner supplemental term life coverage. If any employee is insured as an eligible spouse/civil union partner under the group policy for spouse/civil union partner supplemental term life coverage, he or she is not also eligible to be insured as an employee for supplemental term life coverage.

If both parents of a child qualify as eligible employees and they are legally married or have established a civil union partnership while covered under the group policy, the child shall be considered a dependent of only one parent for purposes of this supplement. However, if both parents of a child qualify as eligible employees and have divorced, have been legally separated, have terminated their civil union partnership, while covered under the group policy, the child shall be considered a dependent of both parents for purposes of this supplement. If any child qualifies as an eligible employee under the group policy and has supplemental employee life coverage, he or she is not eligible to be insured as a dependent child.

Any dependent child who, subsequent to the effective date of the insured employee's 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 the group policy states that evidence of insurability is required; or
- (2) the insurance is contributory and the employee does not enroll for coverage under this rider within the enrollment period shown on the specifications page attached to the group policy; or
- (3) dependents insurance for which the employee previously enrolled did not go into effect or was terminated because the employee failed to make a required premium contribution; or
- (4) during a previous period of eligibility, the employee 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 is insured by an individual policy issued under the terms of the conversion right of this rider.

When does insurance on a dependent become effective?

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

- (1) the dependent meets all eligibility requirements; and
- (2) if required, the insured employee applies for dependents coverage on forms which are approved by us; and
- (3) we are satisfied with the dependent's evidence of insurability, if we require evidence; and
- (4) we receive the required premium.

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 the group policy.

To whom will we pay the death benefit?

The death benefit payable under this rider will be paid to the insured employee if living. If the insured employee is not living, the death benefit payable under this rider will be paid in equal shares to the first surviving class of the classes below:

- (1) the children of the dependent, if living, otherwise;
- (2) the parents of the dependent, if living, otherwise;
- (3) the brothers and sisters of the dependent, if living, otherwise;
- (4) the insured employee's estate.

Termination

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

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

- (1) the end of the month in which the dependent no longer meets the eligibility requirements; or
- (2) 45 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 an employee's written request that insurance on his or her eligible dependents be terminated; or
- (4) the date the employee is no longer covered under the group policy.

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

When does this rider terminate?

This rider will terminate on the earlier of:

- the date we receive a written request to cancel this rider; or
- (2) the date the group policy is terminated.

Additional Information

What is the conversion right under this rider?

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

Conversion may be requested by the insured employee, 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 the group policy to which this rider is attached will apply.

Does any Waiver of Premium rider to the group policy apply to insured dependents?

Yes. If, due to the insured employee's disability, his or her insurance is continued in force without further payment of premiums due to any Waiver of Premium rider to the group policy, any dependents insurance provided by this rider shall also continue in force without further payment of premiums until the dependent's eligibility terminates or until the insured employee's insurance is no longer continued in force due to any such rider to the group policy.

This provision is not applicable if the dependent's insurance has been converted under the conversion right section of this rider, unless the converted policy is surrendered without claim except for refund of premiums.

Renée D. Montz Chet Landle

Secretary

President

Term Life Insurance Portability Policy Rider

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

General Information

This rider is issued in consideration of the required premium and amends the group policy to which it is attached. This rider is subject to every term, condition, exclusion, limitation and provision of the group policy unless otherwise expressly provided for herein.

What does this rider provide?

This rider provides for continuation of group life insurance for insureds who no longer meet the eligibility requirements of the group policy except as provided for herein.

To continue coverage under the provisions of this rider, an eligible insured 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 rider will then be deemed effective retroactive to the beginning of the 31-day period. This date is considered to be the insured's portability date and the insured is then considered to have portability status.

Who is eligible to continue insurance under this rider?

A certificate holder is eligible to continue insurance under this rider if he or she, except as provided by this rider, no longer meets the eligibility requirements of the group policy due to any of the following:

- the employee terminates employment, including retirement; or
- (2) the employee is no longer in a class eligible for insurance or is on a leave or layoff; or
- (3) a class or group of employees insured under the policy is 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.

The certificate holder will not be eligible to request coverage under this rider if he or she:

- (1) has attained the age of 70; or
- (2) has converted his or her insurance to an individual life policy under the terms of the group policy's conversion right section; or
- (3) was not actively at work due to sickness or injury on the day immediately preceding his or her portability date; or
- (4) loses eligibility due to termination of the group policy.

What insurance can be continued under this rider?

Both non-contributory and contributory insurance may be continued under this rider. If the certificate holder elects to continue his or her own coverage according to the provisions of this rider, he or she may also elect to continue contributory insurance for any other individual insured under his or her certificate. The certificate holder may also continue coverage under all supplements to such certificate which apply to both non-contributory and contributory insurance and by which he or she was insured immediately preceding his or her portability date, except for the Term Life Waiver of premium Certificate Supplement, which shall terminate on the portability date.

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

The minimum amount of insurance that can be continued on the life of a certificate holder under this rider is \$10,000. The minimum does not apply to any other insureds covered under this rider.

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

The maximum amount of insurance that can be continued under this rider for an insured under age 65 is the amount of insurance that was in force on the insured's portability date. For an insured who is age 65 or older on his or her portability date, the amount will not be more than 65% of the amount of insurance in force on the insured's portability date.

Will the amount of insurance continued under this rider change?

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

Can a certificate holder request a change in his or her amount of insurance continued under this rider?

Yes. The certificate holder may elect to reduce the amount of insurance provided under his or her certificate. The remaining amount of insurance on the life of a certificate holder must be at least \$10,000.

The amount of insurance continued under this rider 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 rider be converted to a policy of individual insurance?

Yes. At any time after insurance has been continued under the provisions of this rider, it may be converted to a policy of individual insurance with Minnesota Life. All other conditions and provisions of the conversion right section of the group policy to which this rider is attached will apply.

What happens if a certificate holder again becomes eligible under the group policy?

If a certificate holder who is continuing coverage under the provisions of this rider again meets the eligibility requirements of the group policy, not including the terms of this rider, he or she shall no longer be considered to have portability status. Insurance for that certificate holder may be provided only under the terms of the group policy, not including this rider, unless and until he or she no longer meets the eligibility requirements of the group policy and again returns to portability status as provided for herein.

What happens to insurance provided under this rider 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 rider. 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 rider will remain in force until terminated by the provisions of the section entitled "When will insurance continued under this rider terminate?".

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

When will insurance continued under this rider terminate?

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

- (1) the certificate holder's 70th birthday; or
- (2) the date the certificate holder again meets the eligibility requirements of the group policy, not including the terms of this rider; or
- (3) in the case of a dependent child or a spouse/civil union partner who is insured by a rider to the certificate holder's coverage, the date the certificate holder's coverage is no longer being continued under this rider, or the date the certificate holder's spouse/civil union partner or child ceases to be eligible as defined under the terms of the group policy; or
- (4) 45 days after the due date of any premium contribution which is not made.

Secretary

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Term Life Waiver of Premium Policy Rider

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

General Information

This rider is issued in consideration of the required premium and amends the group policy to which it is attached. The specifications page attached to the group policy indicates whether this rider applies to contributory insurance or noncontributory insurance. This rider is subject to every term, condition, exclusion, limitation, and provision of the group policy unless otherwise expressly provided for herein. Coverage under this rider will not be included in any insurance issued under the conversion right section of the group policy.

What does this rider provide?

This rider provides for waiver of premium for certificate holders who become totally and permanently disabled, as defined herein, while under age 60. Upon approval of proof of such disability, a certificate holder's insurance, including all riders applicable to such certificate holder, which are in force on the date of the onset of the certificate holder's disability will be continued in force without payment of premiums during the uninterrupted continuance of the total and permanent disability.

What is total disability?

Total disability is a disability which occurs while a certificate holder's insurance is in force and which results from an accidental injury or an illness that continuously prevents the certificate holder from engaging in any occupation for which he or she is reasonably suited by education, training, or experience. The certificate holder must be under the care of a licensed physician. The licensed physician cannot be the certificate holder or a member of the certificate holder's immediate family. For purposes of this rider, the certificate holder's immediate family consists of his or her spouse/civil union partner, children, parents, grandparents, grandchildren, brothers and sisters and their spouses.

What is permanent disability?

Permanent disability is a total disability which has existed continuously for at least 180 days.

Do premiums have to be paid for a certificate holder after he or she becomes disabled?

Yes. Premiums have to be paid after a certificate holder becomes disabled, but only until we approve his or her total and permanent disability claim. Continued payment prevents the possible loss of the certificate holder's coverage and eligibility if the claim is not approved. If a certificate holder's claim for benefits under this rider is approved, up to 12 months of life and accidental death and dismemberment premiums paid after the disability began will be refunded.

What if a certificate holder converts his or her group life insurance to a policy of individual insurance prior to the approval of his or her disability claim?

If a certificate holder's coverage has been converted in accordance with the conversion right section of the group policy, benefits under this rider will apply only if the converted policy is surrendered without claim, except for refund of premiums.

What will be considered due proof of total and permanent disability?

A certificate holder must furnish evidence satisfactory to us that his or her disability:

- commenced while his or her insurance under the group policy was in force; and
- (2) meets the definition of total disability; and
- (3) commenced before his or her 60th birthday; and
- (4) was continuous for 180 days or more.

We will, from time to time, also require additional proof satisfactory to us that the certificate holder continues to be totally and permanently disabled. We may also require that the certificate holder submit to one or more medical examinations at our expense.

If a certificate holder dies within one year of the date of onset of his or her disability, the certificate holder's beneficiary may claim benefits under this rider even if the certificate holder's premium payments were discontinued and he or she had not submitted due proof satisfactory to us of his or her total disability or was continuously disabled for less than 180 days. The certificate holder's beneficiary must submit due proof satisfactory to us that the certificate holder's total disability, which began before the certificate holder's premium payments were discontinued and before his or her 60th birthday, continued without interruption until his or her death.

When must we be notified of a certificate holder's disability or death?

We must receive written notice at our home office of a certificate holder's total disability within one year of the date of onset of such disability. However, 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.

We must receive written notice at our home office within one year of death that a certificate holder died during a period of continuance provided by this rider. Proof must be furnished that he or she continued to be totally disabled during the entire period of continuance until death. If such notice and proof are not provided within the required time frame, there shall be no liability for any payment under this rider.

What is the amount of insurance to be continued without payment of premium under this rider?

The amount of insurance continued without payment of premium shall be the amount of insurance that was in force on the date of onset of total disability.

How long will insurance be continued without payment of premium?

If a certificate holder becomes totally and permanently disabled, insurance will be continued, without payment of premium, until the earliest of:

- (1) the certificate holder's 65th birthday; or
- (2) the date the certificate holder recovers so that he or she is no longer totally and permanently disabled; or
- (3) the date the certificate holder fails to furnish proof of continued disability when requested or refuses to submit to a required medical examination.

What happens to a certificate holder's insurance when the waiver of premium benefit ends?

When the benefits under this rider end according to the provisions of the section entitled "How long will insurance be continued without payment of premium?," the following will apply:

(1) If the certificate holder is then eligible for coverage under the group policy, his or her insurance may be continued under the group policy provided that 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 certificate holder is no longer eligible for coverage under the group policy, he or she may convert coverage to an individual policy, as provided for under the conversion right section of the group policy.

Insurance will end for a certificate holder unless, within 31 days of the date benefits under this rider end, premium payment is resumed or the insured applies to convert his or her coverage.

When does this rider terminate?

This rider will terminate on the earlier of:

- the date we receive a written request to terminate this rider; or
- (2) the date the group policy is terminated.

Insurance being continued without further payment of premiums in accordance with the provisions of this rider will not end due solely to the termination of this rider or of the group policy.

Secretary

Renée D. Montz

President

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Accelerated Benefits Policy Rider

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

Benefits received under this Accelerated Benefits Policy Rider may be taxable. Certificate holders should seek assistance from a personal tax advisor prior to requesting an accelerated payment of death benefits.

General Information

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

What does this rider provide?

This rider provides for the accelerated payment of either the full or a partial amount of an insured's death benefit provided under the group policy. If the insured has a terminal condition as defined in this rider, an accelerated payment of the death benefit may be requested.

Definitions

accelerated benefit

The amount of the death benefit we will pay if the insured is eligible under this rider.

death benefit

The amount of the insured's life insurance as shown on the specifications page attached to the certificate holder's certificate.

immediate family

The certificate holder's spouse/civil union partner, children, parents, grandparents, grandchildren, brothers and sisters, and their spouses.

insured

For purposes of this rider, an insured employee, an insured spouse/civil union partner, or an insured dependent child.

physician

An individual who is licensed to practice medicine or treat illness in the state in which treatment is received. This does not include the certificate holder, or a member of the certificate holder's immediate family.

Terminal Condition

What is a terminal condition?

A terminal condition is a condition caused by sickness or accident which directly results in a life expectancy of twelve months or less.

What evidence do we require of the insured's terminal condition?

We must be given evidence that satisfies us that the insured's life expectancy, because of sickness or accident, is twelve months or less. That evidence must include certification by a physician.

Do we have the right to obtain independent medical verification?

Yes. We retain the right to have the insured medically examined at our own expense to verify the insured's medical condition. We may do this as often as reasonably required while accelerated benefits are being considered or paid.

Accelerated Benefit

What is the accelerated benefit?

The accelerated benefit is the amount of the death benefit payable under this rider. It is the death benefit that is being accelerated, up to 100% of the insured's amount of insurance, subject to the minimums and maximums stated below.

What are the conditions for the payment of an accelerated benefit?

We will consider the payment of an accelerated benefit, subject to all of the following conditions:

- (1) coverage must be in force and all premiums due must be fully paid; and
- (2) application must be made in writing and in a form which is satisfactory to us. We will tell a certificate holder what form is required; and
- (3) the certificate holder must be the sole owner of the certificate; and
- (4) the insured's insurance must not have an irrevocable beneficiary.

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Who may request an accelerated payment of the death benefit?

A certificate holder may request an accelerated payment of the insurance on his or her life or on the life of a spouse/civil union partner or dependent child insured under his or her certificate.

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 rider is not intended to cause an involuntary reduction of the death benefit ultimately payable to the named beneficiary. Therefore, payment of the death benefit cannot be accelerated under this rider if the insured:

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

Is there a minimum or maximum death benefit eligible for an accelerated benefit?

Yes. The minimum death benefit to be eligible for an accelerated benefit under this rider is \$10,000. The maximum death benefit to be eligible for an accelerated benefit is \$1,000,000.

Does a certificate holder have to take the entire accelerated benefit?

No. The certificate holder may choose to receive a partial accelerated benefit. If he or she does so, the insured's remaining coverage will stay in force.

If a certificate holder elects to receive only a partial accelerated benefit amount available under this rider, the remaining death benefit under the certificate must be at least \$25,000.

The certificate holder may reapply for the payment of the remaining amount of insurance at any time. However, we may ask for further satisfactory evidence that the insured meets all requirements for the accelerated benefit.

What is the effect on an insured's coverage of the receipt of an accelerated benefit?

If a certificate holder elects to accelerate the full amount of an insured's death benefit, the insured's coverage and all other benefits under the certificate and any certificate supplements which apply to that insured will end. If the insured is a certificate holder, any other individual insured under his or her certificate will be allowed to convert any such insurance to a policy of individual life insurance according to the conversion right section of the group policy to which this rider is attached.

If a partial accelerated benefit is chosen, coverage will remain in force and premiums will be reduced accordingly. The remaining amount of insurance under the certificate will be the full amount of insurance minus the amount of insurance that was accelerated.

How will we pay the accelerated benefit?

We will pay the accelerated benefit in one lump sum or in any other mutually agreeable manner.

To whom will we pay accelerated benefits?

All accelerated benefits will be paid to the certificate holder who requested the accelerated payment unless the certificate holder validly assigns them otherwise. If such certificate holder dies before all payments have been made, we will pay the remainder to the insured's beneficiary named under the certificate. Payment will be made in one lump sum which will be the present value of the payments that remain, using the interest rate we use to determine the payments.

Termination

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

An insured's coverage ends on the date the insured is no longer covered for life insurance under the group policy.

When does this rider terminate?

This rider will terminate on the earlier of:

- (1) the date we receive a written request to cancel this rider; or
- (2) the date the group policy is terminated.

Renée D. Montz Chet Luble

President

Group Term Life Policy Amendment #4

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

To be attached to and made a part of Group Policy No. 33780-G issued by Minnesota Life Insurance Company to State of Colorado. This amendment is effective as of July 1, 2019. Continued payment of premiums shall constitute acceptance of the conditions stated in this amendment.

As a change to the policy, an employee who is on a military leave of absence is eligible to have his or her insurance continued during the military leave. As a result of this change the section entitled "Can and insured employee's coverage be continued during sickness, injury, leave of absence or temporary layoff?" is amended to read as follows:

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

Yes. Insurance may be continued on an insured employee who is not actively at work due to sickness, injury, leave of absence or temporary layoff, subject to the employer's practices and procedures, including the employer's limits on the length of continuation allowed for the type of absence. Continuation is subject to the following maximum time frames:

- (1) for an employee on non-medical leave of absence or temporary layoff, insurance cannot be continued beyond 12 months from the last day the insured employee was actively at work.
- (2) for an employee on a military leave of absence, insurance may be continued during the length of the leave. Coverage that is voluntarily terminated during a military leave will be reinstated when the employee returns to active employment status without the need to provide evidence of insurability.
- (3) for an employee on a medical leave of absence, insurance cannot be continued beyond the later of 12 months from the last day the insured employee was actively at work or the date the employee attains age 65

Continuation of insurance must be in accordance with the practices and procedures that precludes individual selection.

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

As a result of this change, the Group Policy Specifications Page is replaced with the attached Group Policy Specifications Page effective July 1, 2019.

Agreed to by Minnesota Life Insurance Company this 9th day of January 2020.

SEM

Vice President and Actuary

GENERAL INFORMATION

POLICYHOLDER: State of Colorado POLICY NO.: 33780-G

ASSOCIATED COMPANIES: All subsidiaries and affiliates reported to Minnesota Life by the policyholder for

inclusion in the policy.

POLICY EFFECTIVE DATE: July 1, 2014. This Specification Page represents the plan in effect as of July 1, 2019.

Minnesota Life Insurance Company has issued Group Policy Number 33780-G to the State of Colorado effective as of July 1, 2014 as a replacement for an earlier policy

containing the same number.

In no case shall Minnesota Life Insurance Company be liable under both policies.

POLICY ANNIVERSARY DATE: July 1 of each year beginning July 1, 2015.

PREMIUM DUE DATE(S): The first day of each month. Minnesota Life and the policyholder agree that

premiums can be paid no later than the 45th day following the premium due date.

GROUP: This group is composed of all eligible employees as defined by Colorado State Statute.

Permanent part-time employees are included in this definition. Eligible employee is defined as: Employee means any officer or employee under the state personnel system of the state of Colorado whose salary is paid by state funds or any employee of the department of education, the Colorado commission on higher education, or the Colorado school for the deaf and the blind whose salary is paid by state funds, or any member of the military employed pursuant to section 28-3-904 C.R.S. Employee includes any officer or employee of the legislative or judicial branch, any elected or appointed state official or employee who receives compensation other than expense reimbursement from the state funds, any elected state official who does not receive compensation other than expense reimbursement from state funds, and includes any member of the board of assessment appeals. Employee does not include persons employed on a temporary basis; except that it shall include a member of the military employed pursuant to section 28-3-904 C.R.S. for more than 30 consecutive days.

Employee does not include an employee insured under the University of Colorado group life insurance plan or a full-time member of the armed forces of any country.

ENROLLMENT PERIOD: Not applicable for noncontributory insurance.

For contributory insurance:

For employees who are newly eligible, the enrollment period is equal to 31 days from

the date the person meets the definition of group.

For employees who first become eligible for dependent insurance after the newly eligible enrollment period, the enrollment period for dependent life is 31 days from the

first day of eligibility.

WAITING PERIOD: The period commencing with the date a person meets the definition of "GROUP"

above and ending with the first day of the month next following that date.

F.70944 A

PLAN OF INSURANCE

EMPLOYEE BENEFIT SCHEDULE

EMPLOYEE TERM LIFE INSURANCE:

Basic Life Insurance

Eligible Class Amount of Basic Life Insurance

All employees One times annual regular pay, rounded to the next higher \$1,000, if not already

a multiple thereof, subject to a minimum benefit of \$50,000 and maximum

benefit of \$250,000.

Supplemental Employee Life Insurance

Eligible Class Amount of Supplemental Employee Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and a maximum of \$500,000.

BASIC LIFE INSURANCE ADDITIONAL BENEFIT:

Basic Life Insurance Repatriation Benefit

Eligible Class Amount of Insurance

All employees If a death benefit becomes payable for an insured under this policy we will pay

an additional benefit to reimburse the person who incurs the transportation expenses to transport the insured's body to a mortuary near his or her primary residence, but not to exceed the lesser of \$5,000 or 10% of the basic life insurance, if the insured dies more than 200 miles from his or her primary place

of residence.

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

Basic and Supplemental Insurance

Eligible Class Amount of Basic and Supplemental Employee AD&D Insurance

All employees An amount equal to the amount of Basic and Supplemental Employee Life

Insurance for which the employee is insured under the group policy.

GENERAL PROVISIONS FOR EMPLOYEE INSURANCE

RETIREMENT REDUCTIONS: All insurance terminates at retirement, except as provided for under the

portability provision.

CONTRIBUTORY/NONCONTRIBUTORY: Basic insurance is noncontributory insurance; supplemental employee 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.

F.70944 B

For supplemental employee insurance:

For employees in an eligible class immediately prior to the effective date of the group policy:

An amount equal to the amount of contributory insurance for which the employee was insured under the prior carrier's group policy on the day immediately preceding the effective date of this policy.

For employees who first become eligible after the effective date of this

policy:

\$100,000.

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECTIVE DATE OF INCREASES AND DECREASES DUE TO CHANGE IN REGULAR PAY

Increases and decreases due to a change in regular pay will become effective the date of the change in regular pay. For purposes of insurance under this policy, the date of the change in regular pay means the date the payroll system is updated. Evidence of insurability will not be required for an increase in insurance due solely to an increase in regular pay. All increases are subject to the actively at work requirement.

DEPENDENTS BENEFIT SCHEDULE

DEPENDENTS TERM LIFE INSURANCE:

An employee must be approved for Supplemental Employee Life and matching accidental death and dismemberment coverage under this plan to be eligible to elect Supplemental Spouse/Civil Union Partner/Domestic Partner and Supplemental Child Life and matching accidental death and dismemberment coverage.

Supplemental Spouse/Civil Union Partner/Domestic Partner Life Insurance

Eligible Class Amount of Supplemental Spouse/Civil Union Partner/Domestic

Partner Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and subject to a maximum of the lesser of 50% of the

employee's supplemental amount of insurance or \$250,000.

Supplemental Child Life Insurance

Eligible Class Amount of Supplemental Child Life Insurance

\$5,000 or \$10,000, as elected by the employee. Supplemental child coverage All employees

cannot exceed 50% of the Employee's Supplemental amount of insurance.

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

Spouse/Civil Union Partner/Domestic Partner and Child AD&D Insurance

Eligible Class Amount of Spouse/Civil Union Partner/Domestic Partner and Child

AD&D Insurance

All employees An amount equal to the amount of Supplemental Spouse/Civil Union

Partner/Domestic Partner and Child Life insurance for which the spouse/civil union partner/domestic partner and/or child are insured under the group policy.

F.70944 C

GENERAL PROVISIONS FOR DEPENDENTS INSURANCE

GRANDFATHERED COVERAGE:

There is a group of grandfathered employees who were able to elect coverage on his or her spouse and/or children without electing Supplemental Employee Life/AD&D coverage. The coverage for this group that is currently in place was elected prior to January 1, 2003. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

There is a group of grandfathered employees in which the spouse coverage maximum of "the lessor of 50% of the employee's supplemental amount of insurance or \$150,000" does not apply. The coverage for this group that is currently in place was elected prior to January 1, 2003 and their coverage amounts are outside of the current plan parameters. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage, and the spouse/ civil union partner/domestic partner becomes a State employee, then the spouse/ civil union partner/domestic partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guarantee issue basis, equal to the amount he/she had as a spouse/ civil union partner/domestic partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the spouse/ civil union partner/domestic partner coverage ends.

CONTINUED DEPENDENTS INSURANCE UPON THE DEATH OF THE EMPLOYEE:

Notwithstanding anything in the policy to the contrary, any dependents term life and accidental death and dismemberment insurance that is in force at the time of an employee's death shall remain in force for five months from the date of the employee's death, with no further premium payment required.

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 with eligible dependents immediately prior to the effective date of this policy, the guaranteed issue amount is equal to the amount of dependents insurance for which they were insured under the prior group policy.

For employees who first become eligible for dependents insurance after the effective date of this policy, the guaranteed issue amount is as follows:

For Supplemental Spouse/Civil Union Partner/Domestic Partner

Insurance: \$30,000

For Supplemental Child Insurance: \$10,000*

* As an exception, evidence of insurability is never required of a child regardless of when application is made (new hire, family status change, or annual enrollment.)

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECT OF EMPLOYEE'S RETIREMENT:

All dependents insurance terminates upon the employee's retirement except as provided under the portability provision.

F.70944 D

ADDITIONAL INFORMATION

WAIVER OF PREMIUM APPLICATION:

Applies to contributory and noncontributory employee insurance.

ELECTION CHANGES:

Election changes can be made at any time, except child life changes are limited to annual enrollment or within 31 days of a Family Status Change.

An employee may make changes to his or her elections at annual open enrollment or within 31 days of a Family Status Change without providing any evidence of insurability:

- 1. Any reduction or termination of coverage.
- 2. Any election for child life insurance.
- 3. For changes due to a Family Status Change: Any increase in Supplemental Employee Life/AD&D insurance that does not exceed the guaranteed issue of \$100,000, including enrolling in Supplemental Employee Life/AD&D for the first time for up to \$100,000.
- 4. For changes due to a Family Status Change: Any increase in Supplemental Spouse/Civil Union Partner/Domestic Partner Life insurance that does not exceed the guaranteed issue of \$30,000, including enrolling in Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D for the first time for up to \$30,000.

Any amount requested above these amounts or any change requested outside of these events shall require evidence of insurability and will not be effective unless and until the evidence is approved by Minnesota Life.

Family Status Change means:

- Birth or adoption or otherwise acquiring a newly eligible child
- Death of a spouse/civil union partner/domestic partner
- Marriage
- Declaration of domestic partnership
- Establishment of a civil union partnership

SPECIAL MARRIED/DOMESTIC PARTNERSHIP EMPLOYEES RULES:

- If an employee is insured for Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage and that spouse/ civil union partner/domestic partner coverage terminates, the employee can apply for Supplemental Employee Life/AD&D on a guaranteed issue basis equal to the amount he or she had as a spouse/civil union partner/domestic partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner/Domestic Partner coverage ends.
- If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage, and the spouse/civil union partner/domestic partner becomes a State employee, then the spouse/civil union partner/domestic partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guaranteed issue basis, equal to the amount he or she had as a spouse/civil union partner/domestic partner, but not less than \$100,000 and not to exceed \$250,000. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner/Domestic Partner coverage ends.

F.70944 E

- If two State employees are married, or have established a civil union partnership or have declared a domestic partnership and both have Supplemental Employee Life/AD&D coverage, and one employee terminates employment with the State and loses their Supplemental Employee Life/AD&D coverage, then the other remaining employee may add Supplemental Spouse/Civil Union Partner/Domestic Partner coverage, on a guarantee issue basis, up to an amount not to exceed the lesser of:
 - the amount that was in place as Supplemental Employee Life/AD&D coverage for the terminated employee;
 - 50% of the remaining employee's amount of coverage; and
 - **\$250,000.**

The request for new Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage must be made within 31 days of the date that the employee coverage ends.

RIDER(S) TO THE GROUP POLICY

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

F.70944 F

Group Term Life Policy Amendment #3

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

To be attached to and made a part of Group Policy No. 33780-G issued by Minnesota Life Insurance Company to State of Colorado. This amendment is effective as of July 1, 2017. Continued payment of premiums shall constitute acceptance of the conditions stated in this amendment.

"Continued payment of premiums by State of Colorado shall constitute acceptance of the replacement policy." has been removed from the Policy Effective Date section shown on page A of the Specifications Page. The section has been modified as shown below:

POLICY EFFECTIVE DATE:

July 1, 2014. This Specification Page represents the plan in effect as of July 1, 2017 as revised on June 16, 2017.

Minnesota Life Insurance Company has issued Group Policy Number 33780-G to the State of Colorado effective as of July 1, 2014 as a replacement for an earlier policy containing the same number.

In no case shall Minnesota Life Insurance Company be liable under both policies.

As a result of this change, the Group Policy Specifications Page effective July 1, 2017 is replaced with the attached Group Policy Specifications Page effective July 1, 2017 as revised on June 16, 2017.

Agreed to by Minnesota Life Insurance Company this 16th day of June, 2017.

LL

Vice President and Actuary

GENERAL INFORMATION

POLICYHOLDER: State of Colorado POLICY NO.: 33780-G

ASSOCIATED COMPANIES: All subsidiaries and affiliates reported to Minnesota Life by the policyholder for

inclusion in the policy.

POLICY EFFECTIVE DATE: July 1, 2014. This Specification Page represents the plan in effect as of July 1, 2017 as

revised on June 16, 2017.

Minnesota Life Insurance Company has issued Group Policy Number 33780-G to the State of Colorado effective as of July 1, 2014 as a replacement for an earlier policy

containing the same number.

In no case shall Minnesota Life Insurance Company be liable under both policies.

POLICY ANNIVERSARY DATE: July 1 of each year beginning July 1, 2015.

PREMIUM DUE DATE(S): The first day of each month. Minnesota Life and the policyholder agree that

premiums can be paid no later than the 45th day following the premium due date.

GROUP: This group is composed of all eligible employees as defined by Colorado State Statute.

Permanent part-time employees are included in this definition. Eligible employee is defined as: Employee means any officer or employee under the state personnel system of the state of Colorado whose salary is paid by state funds or any employee of the department of education, the Colorado commission on higher education, or the Colorado school for the deaf and the blind whose salary is paid by state funds, or any member of the military employed pursuant to section 28-3-904 C.R.S. Employee includes any officer or employee of the legislative or judicial branch, any elected or appointed state official or employee who receives compensation other than expense reimbursement from the state funds, any elected state official who does not receive compensation other than expense reimbursement from state funds, and includes any member of the board of assessment appeals. Employee does not include persons employed on a temporary basis; except that it shall include a member of the military employed pursuant to section 28-3-904 C.R.S. for more than 30 consecutive days.

Employee does not include an employee insured under the University of Colorado group life insurance plan or a full-time member of the armed forces of any country.

ENROLLMENT PERIOD: Not applicable for noncontributory insurance.

For contributory insurance:

For employees who are newly eligible, the enrollment period is equal to 31 days from

the date the person meets the definition of group.

For employees who first become eligible for dependent insurance after the newly eligible enrollment period, the enrollment period for dependent life is 31 days from the

first day of eligibility.

WAITING PERIOD: The period commencing with the date a person meets the definition of "GROUP"

above and ending with the first day of the month next following that date.

F.70944 A

EMPLOYEE BENEFIT SCHEDULE

EMPLOYEE TERM LIFE INSURANCE:

Basic Life Insurance

Eligible Class Amount of Basic Life Insurance

All employees One times annual regular pay, rounded to the next higher \$1,000, if not already

a multiple thereof, subject to a minimum benefit of \$50,000 and maximum

benefit of \$250,000.

Supplemental Employee Life Insurance

Eligible Class Amount of Supplemental Employee Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and a maximum of \$500,000.

BASIC LIFE INSURANCE ADDITIONAL BENEFIT:

Basic Life Insurance Repatriation Benefit

Eligible Class Amount of Insurance

All employees If a death benefit becomes payable for an insured under this policy we will pay

an additional benefit to reimburse the person who incurs the transportation expenses to transport the insured's body to a mortuary near his or her primary residence, but not to exceed the lesser of \$5,000 or 10% of the basic life insurance, if the insured dies more than 200 miles from his or her primary place

of residence.

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

Basic and Supplemental Insurance

Eligible Class Amount of Basic and Supplemental Employee AD&D Insurance

All employees An amount equal to the amount of Basic and Supplemental Employee Life

Insurance for which the employee is insured under the group policy.

GENERAL PROVISIONS FOR EMPLOYEE INSURANCE

RETIREMENT REDUCTIONS: All insurance terminates at retirement, except as provided for under the

portability provision.

CONTRIBUTORY/NONCONTRIBUTORY: Basic insurance is noncontributory insurance; supplemental employee 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.

F.70944 B

For supplemental employee insurance:

For employees in an eligible class immediately prior to the

effective date of the group policy:

An amount equal to the amount of contributory insurance for which the employee was insured under the prior carrier's group policy on the day immediately preceding the effective date of this policy. For employees who first become eligible after the effective date of this

policy:

\$100,000.

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECTIVE DATE OF INCREASES AND DECREASES DUE TO CHANGE IN REGULAR PAY

Increases and decreases due to a change in regular pay will become effective the date of the change in regular pay. For purposes of insurance under this policy, the date of the change in regular pay means the date the payroll system is updated. Evidence of insurability will not be required for an increase in insurance due solely to an increase in regular pay. All increases are subject to the actively at work requirement.

DEPENDENTS BENEFIT SCHEDULE

DEPENDENTS TERM LIFE INSURANCE:

An employee must be approved for Supplemental Employee Life and matching accidental death and dismemberment coverage under this plan to be eligible to elect Supplemental Spouse/Civil Union Partner/Domestic Partner and Supplemental Child Life and matching accidental death and dismemberment coverage.

Supplemental Spouse/Civil Union Partner/Domestic Partner Life Insurance

Eligible Class Amount of Supplemental Spouse/Civil Union Partner/Domestic

Partner Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and subject to a maximum of the lesser of 50% of the

employee's supplemental amount of insurance or \$250,000.

Supplemental Child Life Insurance

Eligible Class Amount of Supplemental Child Life Insurance

All employees \$5,000 or \$10,000, as elected by the employee. Supplemental child coverage

cannot exceed 50% of the Employee's Supplemental amount of insurance.

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

Spouse/Civil Union Partner/Domestic Partner and Child AD&D Insurance

Eligible Class Amount of Spouse/Civil Union Partner/Domestic Partner and Child

AD&D Insurance

All employees An amount equal to the amount of Supplemental Spouse/Civil Union

Partner/Domestic Partner and Child Life insurance for which the spouse/civil union partner/domestic partner and/or child are insured under the group policy.

F.70944 C

GENERAL PROVISIONS FOR DEPENDENTS INSURANCE

GRANDFATHERED COVERAGE:

There is a group of grandfathered employees who were able to elect coverage on his or her spouse and/or children without electing Supplemental Employee Life/AD&D coverage. The coverage for this group that is currently in place was elected prior to January 1, 2003. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

There is a group of grandfathered employees in which the spouse coverage maximum of "the lessor of 50% of the employee's supplemental amount of insurance or \$150,000" does not apply. The coverage for this group that is currently in place was elected prior to January 1, 2003 and their coverage amounts are outside of the current plan parameters. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage, and the spouse/civil union partner/domestic partner becomes a State employee, then the spouse/civil union partner/domestic partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guarantee issue basis, equal to the amount he/she had as a spouse/civil union partner/domestic partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the spouse/civil union partner/domestic partner coverage ends.

CONTINUED DEPENDENTS INSURANCE UPON THE DEATH OF THE EMPLOYEE:

Notwithstanding anything in the policy to the contrary, any dependents term life and accidental death and dismemberment insurance that is in force at the time of an employee's death shall remain in force for five months from the date of the employee's death, with no further premium payment required.

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 with eligible dependents immediately prior to the effective date of this policy, the guaranteed issue amount is equal to the amount of dependents insurance for which they were insured under the prior group policy.

For employees who first become eligible for dependents insurance after the effective date of this policy, the guaranteed issue amount is as follows:

For Supplemental Spouse/Civil Union Partner/Domestic Partner

Insurance: \$30,000

For Supplemental Child Insurance: \$10,000*

* As an exception, evidence of insurability is never required of a child regardless of when application is made (new hire, family status change, or annual enrollment.)

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECT OF EMPLOYEE'S RETIREMENT:

All dependents insurance terminates upon the employee's retirement except as provided under the portability provision.

F.70944 D

ADDITIONAL INFORMATION

WAIVER OF PREMIUM APPLICATION:

Applies to contributory and noncontributory employee insurance.

ELECTION CHANGES:

Election changes can be made at any time, except child life changes are limited to annual enrollment or within 31 days of a Family Status Change.

An employee may make changes to his or her elections at annual open enrollment or within 31 days of a Family Status Change without providing any evidence of insurability:

- 1. Any reduction or termination of coverage.
- 2. Any election for child life insurance.
- 3. For changes due to a Family Status Change: Any increase in Supplemental Employee Life/AD&D insurance that does not exceed the guaranteed issue of \$100,000, including enrolling in Supplemental Employee Life/AD&D for the first time for up to \$100,000.
- 4. For changes due to a Family Status Change: Any increase in Supplemental Spouse/Civil Union Partner/Domestic Partner Life insurance that does not exceed the guaranteed issue of \$30,000, including enrolling in Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D for the first time for up to \$30,000.

Any amount requested above these amounts or any change requested outside of these events shall require evidence of insurability and will not be effective unless and until the evidence is approved by Minnesota Life.

Family Status Change means:

- Birth or adoption or otherwise acquiring a newly eligible child
- Death of a spouse/civil union partner/domestic partner
- Marriage
- Declaration of domestic partnership
- Establishment of a civil union partnership

SPECIAL MARRIED/DOMESTIC PARTNERSHIP EMPLOYEES RULES:

- If an employee is insured for Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage and that spouse/ civil union partner/domestic partner coverage terminates, the employee can apply for Supplemental Employee Life/AD&D on a guaranteed issue basis equal to the amount he or she had as a spouse/civil union partner/domestic partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner/Domestic Partner coverage ends.
- If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage, and the spouse/civil union partner/domestic partner becomes a State employee, then the spouse/civil union partner/domestic partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guaranteed issue basis, equal to the amount he or she had as a spouse/civil union partner/domestic partner, but not less than \$100,000 and not to exceed \$250,000. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner/Domestic Partner coverage ends.

F.70944 E

- If two State employees are married, or have established a civil union partnership or have declared a domestic partnership and both have Supplemental Employee Life/AD&D coverage, and one employee terminates employment with the State and loses their Supplemental Employee Life/AD&D coverage, then the other remaining employee may add Supplemental Spouse/Civil Union Partner/Domestic Partner coverage, on a guarantee issue basis, up to an amount not to exceed the lesser of:
 - the amount that was in place as Supplemental Employee Life/AD&D coverage for the terminated employee;
 - 50% of the remaining employee's amount of coverage; and
 - **\$250,000.**

The request for new Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage must be made within 31 days of the date that the employee coverage ends.

RIDER(S) TO THE GROUP POLICY

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

F.70944 F

Group Term Life Policy Amendment #2

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

To be attached to and made a part of Group Policy No. 33780-G issued by Minnesota Life Insurance Company to State of Colorado. This amendment is effective as of July 1, 2017. Continued payment of premiums shall constitute acceptance of the conditions stated in this amendment.

The plan maximum for basic life insurance is increased to \$250,000.

As a result of this change, the Group Policy Specifications Page effective July 1, 2015 is replaced with the attached Group Policy Specifications Page effective July 1, 2017.

Agreed to by Minnesota Life Insurance Company this 10th day of April, 2017.

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Vice President and Actuary

GENERAL INFORMATION

POLICYHOLDER: State of Colorado POLICY NO.: 33780-G

ASSOCIATED COMPANIES: All subsidiaries and affiliates reported to Minnesota Life by the policyholder for

inclusion in the policy.

POLICY EFFECTIVE DATE: July 1, 2014. This Specification Page represents the plan in effect as of July 1, 2017.

Minnesota Life Insurance Company has issued Group Policy Number 33780-G to the State of Colorado effective as of July 1, 2014 as a replacement for an earlier policy containing the same number. Continued payment of premiums by State of Colorado

shall constitute acceptance of the replacement policy.

In no case shall Minnesota Life Insurance Company be liable under both policies.

POLICY ANNIVERSARY DATE: July 1 of each year beginning July 1, 2015.

PREMIUM DUE DATE(S): The first day of each month. Minnesota Life and the policyholder agree that

premiums can be paid no later than the 45th day following the premium due date.

GROUP: This group is composed of all eligible employees as defined by Colorado State Statute.

Permanent part-time employees are included in this definition. Eligible employee is defined as: Employee means any officer or employee under the state personnel system of the state of Colorado whose salary is paid by state funds or any employee of the department of education, the Colorado commission on higher education, or the Colorado school for the deaf and the blind whose salary is paid by state funds, or any member of the military employed pursuant to section 28-3-904 C.R.S. Employee includes any officer or employee of the legislative or judicial branch, any elected or appointed state official or employee who receives compensation other than expense reimbursement from the state funds, any elected state official who does not receive compensation other than expense reimbursement from state funds, and includes any member of the board of assessment appeals. Employee does not include persons employed on a temporary basis; except that it shall include a member of the military employed pursuant to section 28-3-904 C.R.S. for more than 30 consecutive days.

Employee does not include an employee insured under the University of Colorado group life insurance plan or a full-time member of the armed forces of any country.

ENROLLMENT PERIOD: Not applicable for noncontributory insurance.

For contributory insurance:

For employees who are newly eligible, the enrollment period is equal to 31 days from

the date the person meets the definition of group.

For employees who first become eligible for dependent insurance after the newly eligible enrollment period, the enrollment period for dependent life is 31 days from the

first day of eligibility.

WAITING PERIOD: The period commencing with the date a person meets the definition of "GROUP"

above and ending with the first day of the month next following that date.

F.70944 A

EMPLOYEE BENEFIT SCHEDULE

EMPLOYEE TERM LIFE INSURANCE:

Basic Life Insurance

Eligible Class Amount of Basic Life Insurance

All employees One times annual regular pay, rounded to the next higher \$1,000, if not already

a multiple thereof, subject to a minimum benefit of \$50,000 and maximum

benefit of \$250,000.

Supplemental Employee Life Insurance

Eligible Class Amount of Supplemental Employee Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and a maximum of \$500,000.

BASIC LIFE INSURANCE ADDITIONAL BENEFIT:

Basic Life Insurance Repatriation Benefit

Eligible Class Amount of Insurance

All employees If a death benefit becomes payable for an insured under this policy we will pay

an additional benefit to reimburse the person who incurs the transportation expenses to transport the insured's body to a mortuary near his or her primary residence, but not to exceed the lesser of \$5,000 or 10% of the basic life insurance, if the insured dies more than 200 miles from his or her primary place

of residence.

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

Basic and Supplemental Insurance

Eligible Class Amount of Basic and Supplemental Employee AD&D Insurance

All employees An amount equal to the amount of Basic and Supplemental Employee Life

Insurance for which the employee is insured under the group policy.

GENERAL PROVISIONS FOR EMPLOYEE INSURANCE

RETIREMENT REDUCTIONS: All insurance terminates at retirement, except as provided for under the

portability provision.

CONTRIBUTORY/NONCONTRIBUTORY: Basic insurance is noncontributory insurance; supplemental employee 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.

F.70944 B

For supplemental employee insurance:

For employees in an eligible class immediately prior to the

effective date of the group policy:

An amount equal to the amount of contributory insurance for which the employee was insured under the prior carrier's group policy on the day immediately preceding the effective date of this policy. For employees who first become eligible after the effective date of this

policy:

\$100,000.

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of

insurance greater than the guaranteed issue amount.

EFFECTIVE DATE OF INCREASES AND DECREASES DUE TO CHANGE IN REGULAR PAY

Increases and decreases due to a change in regular pay will become effective the date of the change in regular pay. For purposes of insurance under this policy, the date of the change in regular pay means the date the payroll system is updated. Evidence of insurability will not be required for an increase in insurance due solely to an increase in regular pay. All increases are subject to the actively at work requirement.

DEPENDENTS BENEFIT SCHEDULE

DEPENDENTS TERM LIFE INSURANCE:

An employee must be approved for Supplemental Employee Life and matching accidental death and dismemberment coverage under this plan to be eligible to elect Supplemental Spouse/Civil Union Partner/Domestic Partner and Supplemental Child Life and matching accidental death and dismemberment coverage.

Supplemental Spouse/Civil Union Partner/Domestic Partner Life Insurance

Eligible Class Amount of Supplemental Spouse/Civil Union Partner/Domestic

Partner Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and subject to a maximum of the lesser of 50% of the

employee's supplemental amount of insurance or \$250,000.

Supplemental Child Life Insurance

Eligible Class Amount of Supplemental Child Life Insurance

All employees \$5,000 or \$10,000, as elected by the employee. Supplemental child coverage

cannot exceed 50% of the Employee's Supplemental amount of insurance.

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

Spouse/Civil Union Partner/Domestic Partner and Child AD&D Insurance

Eligible Class Amount of Spouse/Civil Union Partner/Domestic Partner and Child

AD&D Insurance

All employees An amount equal to the amount of Supplemental Spouse/Civil Union

Partner/Domestic Partner and Child Life insurance for which the spouse/civil union partner/domestic partner and/or child are insured under the group policy.

F.70944 C

GENERAL PROVISIONS FOR DEPENDENTS INSURANCE

GRANDFATHERED COVERAGE:

There is a group of grandfathered employees who were able to elect coverage on his or her spouse and/or children without electing Supplemental Employee Life/AD&D coverage. The coverage for this group that is currently in place was elected prior to January 1, 2003. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

There is a group of grandfathered employees in which the spouse coverage maximum of "the lessor of 50% of the employee's supplemental amount of insurance or \$150,000" does not apply. The coverage for this group that is currently in place was elected prior to January 1, 2003 and their coverage amounts are outside of the current plan parameters. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage, and the spouse/civil union partner/domestic partner becomes a State employee, then the spouse/civil union partner/domestic partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guarantee issue basis, equal to the amount he/she had as a spouse/civil union partner/domestic partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the spouse/civil union partner/domestic partner coverage ends.

CONTINUED DEPENDENTS INSURANCE UPON THE DEATH OF THE EMPLOYEE:

Notwithstanding anything in the policy to the contrary, any dependents term life and accidental death and dismemberment insurance that is in force at the time of an employee's death shall remain in force for five months from the date of the employee's death, with no further premium payment required.

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 with eligible dependents immediately prior to the effective date of this policy, the guaranteed issue amount is equal to the amount of dependents insurance for which they were insured under the prior group policy.

For employees who first become eligible for dependents insurance after the effective date of this policy, the guaranteed issue amount is as follows:

For Supplemental Spouse/Civil Union Partner/Domestic Partner

Insurance: \$30,000

For Supplemental Child Insurance: \$10,000*

* As an exception, evidence of insurability is never required of a child regardless of when application is made (new hire, family status change, or annual enrollment.)

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECT OF EMPLOYEE'S RETIREMENT:

All dependents insurance terminates upon the employee's retirement except as provided under the portability provision.

F.70944 D

ADDITIONAL INFORMATION

WAIVER OF PREMIUM APPLICATION:

Applies to contributory and noncontributory employee insurance.

ELECTION CHANGES:

Election changes can be made at any time, except child life changes are limited to annual enrollment or within 31 days of a Family Status Change.

An employee may make changes to his or her elections at annual open enrollment or within 31 days of a Family Status Change without providing any evidence of insurability:

- 1. Any reduction or termination of coverage.
- 2. Any election for child life insurance.
- 3. For changes due to a Family Status Change: Any increase in Supplemental Employee Life/AD&D insurance that does not exceed the guaranteed issue of \$100,000, including enrolling in Supplemental Employee Life/AD&D for the first time for up to \$100,000.
- 4. For changes due to a Family Status Change: Any increase in Supplemental Spouse/Civil Union Partner/Domestic Partner Life insurance that does not exceed the guaranteed issue of \$30,000, including enrolling in Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D for the first time for up to \$30,000.

Any amount requested above these amounts or any change requested outside of these events shall require evidence of insurability and will not be effective unless and until the evidence is approved by Minnesota Life.

Family Status Change means:

- Birth or adoption or otherwise acquiring a newly eligible child
- Death of a spouse/civil union partner/domestic partner
- Marriage
- Declaration of domestic partnership
- Establishment of a civil union partnership

SPECIAL MARRIED/DOMESTIC PARTNERSHIP EMPLOYEES RULES:

- If an employee is insured for Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage and that spouse/ civil union partner/domestic partner coverage terminates, the employee can apply for Supplemental Employee Life/AD&D on a guaranteed issue basis equal to the amount he or she had as a spouse/civil union partner/domestic partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner/Domestic Partner coverage ends.
- If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage, and the spouse/civil union partner/domestic partner becomes a State employee, then the spouse/civil union partner/domestic partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guaranteed issue basis, equal to the amount he or she had as a spouse/civil union partner/domestic partner, but not less than \$100,000 and not to exceed \$250,000. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner/Domestic Partner coverage ends.

F.70944 E

- If two State employees are married, or have established a civil union partnership or have declared a domestic partnership and both have Supplemental Employee Life/AD&D coverage, and one employee terminates employment with the State and loses their Supplemental Employee Life/AD&D coverage, then the other remaining employee may add Supplemental Spouse/Civil Union Partner/Domestic Partner coverage, on a guarantee issue basis, up to an amount not to exceed the lesser of:
 - the amount that was in place as Supplemental Employee Life/AD&D coverage for the terminated employee;
 - 50% of the remaining employee's amount of coverage; and
 - **\$250,000.**

The request for new Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage must be made within 31 days of the date that the employee coverage ends.

RIDER(S) TO THE GROUP POLICY

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

F.70944 F

Group Term Life Policy Amendment #1

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

To be attached to and made a part of Group Policy No. 33780-G issued by Minnesota Life Insurance Company to the State of Colorado. This amendment is effective as of July 1, 2015. Continued payment of premiums shall constitute acceptance of the conditions stated in this amendment.

The employee Basic Life and Basic Accidental Death and Dismemberment (AD&D) has been modified to be one times annual regular pay. As a result, the Employee Benefit Schedule Basic Employee Term Life Insurance section of the Group Policy Specifications page has been modified to read as follows:

Basic Employee Term life Insurance

Eligible Class All employees

Amount of Life Insurance

One times annual regular pay, rounded to the next higher \$1,000, if not already a multiple thereof, subject to a minimum benefit of \$50,000 and a maximum benefit of \$150,000.

The title "earning" under the Definitions section of the Group Term Life policy has been changed to read "regular pay"

As a result of these changes, the Group Policy Specification Page is replaced with the attached Group Policy Specification Page effective July 1, 2015 and the Group Life Insurance Policy is replaced in its entirety with the attached Group Term Life Insurance Policy.

Agreed to by Minnesota Life Insurance Company this 27th day of April 2015.

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Second Vice President

GROUP POLICY SPECIFICATIONS PAGE

GENERAL INFORMATION

POLICYHOLDER: State of Colorado POLICY NO.: 33780-G

ASSOCIATED COMPANIES: All subsidiaries and affiliates reported to Minnesota Life by the policyholder for

inclusion in the policy.

POLICY EFFECTIVE DATE: July 1, 2014. This Specification Page represents the plan in effect as of July 1, 2015.

Minnesota Life Insurance Company has issued Group Policy Number 33780-G to the State of Colorado effective as of July 1, 2014 as a replacement for an earlier policy containing the same number. Continued payment of premiums by State of Colorado

shall constitute acceptance of the replacement policy.

In no case shall Minnesota Life Insurance Company be liable under both policies.

POLICY ANNIVERSARY DATE: July 1 of each year beginning July 1, 2015.

PREMIUM DUE DATE(S): The first day of each month. Minnesota Life and the policyholder agree that

premiums can be paid no later than the 45th day following the premium due date.

GROUP: This group is composed of all eligible employees as defined by Colorado State Statute.

Permanent part-time employees are included in this definition. Eligible employee is defined as: Employee means any officer or employee under the state personnel system of the state of Colorado whose salary is paid by state funds or any employee of the department of education, the Colorado commission on higher education, or the Colorado school for the deaf and the blind whose salary is paid by state funds, or any member of the military employed pursuant to section 28-3-904 C.R.S. Employee includes any officer or employee of the legislative or judicial branch, any elected or appointed state official or employee who receives compensation other than expense reimbursement from the state funds, any elected state official who does not receive compensation other than expense reimbursement from state funds, and includes any member of the board of assessment appeals. Employee does not include persons employed on a temporary basis; except that it shall include a member of the military employed pursuant to section 28-3-904 C.R.S. for more than 30 consecutive days.

Employee does not include an employee insured under the University of Colorado group life insurance plan or a full-time member of the armed forces of any country.

ENROLLMENT PERIOD: Not applicable for noncontributory insurance.

For contributory insurance:

For employees who are newly eligible, the enrollment period is equal to 31 days from

the date the person meets the definition of group.

For employees who first become eligible for dependent insurance after the newly eligible enrollment period, the enrollment period for dependent life is 31 days from the

first day of eligibility.

WAITING PERIOD: The period commencing with the date a person meets the definition of "GROUP"

above and ending with the first day of the month next following that date.

PLAN OF INSURANCE

EMPLOYEE BENEFIT SCHEDULE

EMPLOYEE TERM LIFE INSURANCE:

Basic Life Insurance

Eligible Class Amount of Basic Life Insurance

All employees One times annual regular pay, rounded to the next higher \$1,000, if not already a multiple thereof, subject to a minimum benefit of \$50,000 and maximum

benefit of \$150,000.

F.70944 A

Supplemental Employee Life Insurance

Eligible Class Amount of Supplemental Employee Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and a maximum of \$500,000.

BASIC LIFE INSURANCE ADDITIONAL BENEFIT:

Basic Life Insurance Repatriation Benefit

Eligible Class Amount of Insurance

All employees If a death benefit becomes payable for an insured under this policy we will pay

an additional benefit to reimburse the person who incurs the transportation expenses to transport the insured's body to a mortuary near his or her primary residence, but not to exceed the lesser of \$5,000 or 10% of the basic life insurance, if the insured dies more than 200 miles from his or her primary place

of residence.

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

Basic and Supplemental Insurance

Eligible Class Amount of Basic and Supplemental Employee AD&D Insurance

All employees An amount equal to the amount of Basic and Supplemental Employee Life

Insurance for which the employee is insured under the group policy.

GENERAL PROVISIONS FOR EMPLOYEE INSURANCE

RETIREMENT REDUCTIONS: All insurance terminates at retirement, except as provided for under the

portability provision.

CONTRIBUTORY/NONCONTRIBUTORY: Basic insurance is noncontributory insurance; supplemental employee 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 supplemental employee insurance:

For employees in an eligible class immediately prior to the

effective date of the group policy:

An amount equal to the amount of contributory insurance for which the employee was insured under the prior carrier's group policy on the day immediately preceding the effective date of this policy.

For employees who first become eligible after the effective date of this

policy:

\$100,000.

EVIDENCE OF INSURABILITY: Evidence of insurability is required as stated in the policy and for an amount of

insurance greater than the guaranteed issue amount.

F.70944 B

EFFECTIVE DATE OF INCREASES AND DECREASES DUE TO CHANGE IN REGULAR PAY

Increases and decreases due to a change in regular pay will become effective the date of the change in regular pay. For purposes of insurance under this policy, the date of the change in regular pay means the date the payroll system is updated. Evidence of insurability will not be required for an increase in insurance due solely to an increase in regular pay. All increases are subject to the actively at work requirement.

DEPENDENTS BENEFIT SCHEDULE

DEPENDENTS TERM LIFE INSURANCE:

An employee must be approved for Supplemental Employee Life and matching accidental death and dismemberment coverage under this plan to be eligible to elect Supplemental Spouse/Civil Union Partner/Domestic Partner and Supplemental Child Life and matching accidental death and dismemberment coverage.

Supplemental Spouse/Civil Union Partner/Domestic Partner Life Insurance

Eligible Class Amount of Supplemental Spouse/Civil Union Partner/Domestic

Partner Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and subject to a maximum of the lesser of 50% of the

employee's supplemental amount of insurance or \$250,000.

Supplemental Child Life Insurance

Eligible Class Amount of Supplemental Child Life Insurance

All employees \$5,000 or \$10,000, as elected by the employee. Supplemental child coverage

cannot exceed 50% of the Employee's Supplemental amount of insurance.

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

Spouse/Civil Union Partner/Domestic Partner and Child AD&D Insurance

Eligible Class Amount of Spouse/Civil Union Partner/Domestic Partner and Child

AD&D Insurance

All employees An amount equal to the amount of Supplemental Spouse/Civil Union

Partner/Domestic Partner and Child Life insurance for which the spouse/civil union partner/domestic partner and/or child are insured under the group policy.

GENERAL PROVISIONS FOR DEPENDENTS INSURANCE

GRANDFATHERED COVERAGE:

There is a group of grandfathered employees who were able to elect coverage on his or her spouse and/or children without electing Supplemental Employee Life/AD&D coverage. The coverage for this group that is currently in place was elected prior to January 1, 2003. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

There is a group of grandfathered employees in which the spouse coverage maximum of "the lessor of 50% of the employee's supplemental amount of insurance or \$150,000" does not apply. The coverage for this group that is currently in place was elected prior to January 1, 2003 and their coverage amounts are outside of the current plan parameters. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage, and the spouse/civil union partner/domestic partner becomes a State employee, then the spouse/civil union partner/domestic partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guarantee issue basis, equal to the amount he/she had as a spouse/civil union partner/domestic partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the spouse/civil union partner/domestic partner coverage ends.

F.70944 C

CONTINUED DEPENDENTS INSURANCE UPON THE DEATH OF THE EMPLOYEE:

Notwithstanding anything in the policy to the contrary, any dependents term life and accidental death and dismemberment insurance that is in force at the time of an employee's death shall remain in force for five months from the date of the employee's death, with no further premium payment required.

CONTRIBUTORY/NONCONTRIBUTORY:
GUARANTEED ISSUE AMOUNT:

Dependents insurance is contributory insurance.

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 with eligible dependents immediately prior to the effective date of this policy, the guaranteed issue amount is equal to the amount of dependents insurance for which they were insured under the prior group policy.

For employees who first become eligible for dependents insurance after the effective date of this policy, the guaranteed issue amount is as follows:

For Supplemental Spouse/Civil Union Partner/Domestic Partner

Insurance: \$30,000

For Supplemental Child Insurance: \$10,000*

* As an exception, evidence of insurability is never required of a child regardless of when application is made (new hire, family status change, or annual enrollment.)

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECT OF EMPLOYEE'S RETIREMENT:

All dependents insurance terminates upon the employee's retirement except as provided under the portability provision.

ADDITIONAL INFORMATION

WAIVER OF PREMIUM APPLICATION:

Applies to contributory and noncontributory employee insurance.

ELECTION CHANGES:

Election changes can be made at any time, except child life changes are limited to annual enrollment or within 31 days of a Family Status Change.

An employee may make changes to his or her elections at annual open enrollment or within 31 days of a Family Status Change without providing any evidence of insurability:

- 1. Any reduction or termination of coverage.
- 2. Any election for child life insurance.
- 3. For changes due to a Family Status Change: Any increase in Supplemental Employee Life/AD&D insurance that does not exceed the guaranteed issue of \$100,000, including enrolling in Supplemental Employee Life/AD&D for the first time for up to \$100,000.
- 4. For changes due to a Family Status Change: Any increase in Supplemental Spouse/Civil Union Partner/Domestic Partner Life insurance that does not exceed the guaranteed issue of \$30,000, including enrolling in Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D for the first time for up to \$30,000.

Any amount requested above these amounts or any change requested outside of these events shall require evidence of insurability and will not be effective unless and until the evidence is approved by Minnesota Life.

Family Status Change means:

- Birth or adoption or otherwise acquiring a newly eligible child
- Death of a spouse/civil union partner/domestic partner
- Marriage

F.70944 D

SPECIAL MARRIED/DOMESTIC PARTNERSHIP EMPLOYEES RULES:

RIDER(S) TO THE GROUP POLICY

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

- Declaration of domestic partnership
- Establishment of a civil union partnership
- If an employee is insured for Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage and that spouse/ civil union partner/domestic partner coverage terminates, the employee can apply for Supplemental Employee Life/AD&D on a guaranteed issue basis equal to the amount he or she had as a spouse/civil union partner/domestic partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner/Domestic Partner coverage ends.
- If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage, and the spouse/civil union partner/domestic partner becomes a State employee, then the spouse/civil union partner/domestic partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guaranteed issue basis, equal to the amount he or she had as a spouse/civil union partner/domestic partner, but not less than \$100,000 and not to exceed \$250,000. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner/Domestic Partner coverage ends.
- If two State employees are married, or have established a civil union partnership or have declared a domestic partnership and both have Supplemental Employee Life/AD&D coverage, and one employee terminates employment with the State and loses their Supplemental Employee Life/AD&D coverage, then the other remaining employee may add Supplemental Spouse/Civil Union Partner/Domestic Partner coverage, on a guarantee issue basis, up to an amount not to exceed the lesser of:
 - the amount that was in place as Supplemental Employee Life/AD&D coverage for the terminated employee;
 - 50% of the remaining employee's amount of coverage;
 and
 - **\$250,000.**

The request for new Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage must be made within 31 days of the date that the employee coverage ends.

F.70944 E

Group Term Life Insurance Policy

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

Read Your Policy Carefully

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

Minnesota Life Insurance Company is a subsidiary of Minnesota Mutual Companies, Inc., a mutual insurance holding company. The policyholder is a member of Minnesota Mutual Companies, Inc., which holds its annual meetings on the first Tuesday in March of each year at 3 p.m. local time. The meetings are held at 400 Robert Street North, St. Paul, Minnesota 55101-2098.

Secretary

President

Vagle M. Jefen

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Jay L. Chustins

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GROUP POLICY SPECIFICATIONS PAGE

GENERAL INFORMATION

POLICYHOLDER: State of Colorado POLICY NO.: 33780-G

ASSOCIATED COMPANIES: All subsidiaries and affiliates reported to Minnesota Life by the policyholder for

inclusion in the policy.

POLICY EFFECTIVE DATE: July 1, 2014. This Specification Page represents the plan in effect as of July 1, 2015.

Minnesota Life Insurance Company has issued Group Policy Number 33780-G to the State of Colorado effective as of July 1, 2014 as a replacement for an earlier policy containing the same number. Continued payment of premiums by State of Colorado

shall constitute acceptance of the replacement policy.

In no case shall Minnesota Life Insurance Company be liable under both policies.

POLICY ANNIVERSARY DATE: July 1 of each year beginning July 1, 2015.

PREMIUM DUE DATE(S): The first day of each month. Minnesota Life and the policyholder agree that

premiums can be paid no later than the 45th day following the premium due date.

GROUP: This group is composed of all eligible employees as defined by Colorado State Statute.

Permanent part-time employees are included in this definition. Eligible employee is defined as: Employee means any officer or employee under the state personnel system of the state of Colorado whose salary is paid by state funds or any employee of the department of education, the Colorado commission on higher education, or the Colorado school for the deaf and the blind whose salary is paid by state funds, or any member of the military employed pursuant to section 28-3-904 C.R.S. Employee includes any officer or employee of the legislative or judicial branch, any elected or appointed state official or employee who receives compensation other than expense reimbursement from the state funds, any elected state official who does not receive compensation other than expense reimbursement from state funds, and includes any member of the board of assessment appeals. Employee does not include persons employed on a temporary basis; except that it shall include a member of the military employed pursuant to section 28-3-904 C.R.S. for more than 30 consecutive days.

Employee does not include an employee insured under the University of Colorado group life insurance plan or a full-time member of the armed forces of any country.

ENROLLMENT PERIOD: Not applicable for noncontributory insurance.

For contributory insurance:

For employees who are newly eligible, the enrollment period is equal to $31\ days$ from

the date the person meets the definition of group.

For employees who first become eligible for dependent insurance after the newly eligible enrollment period, the enrollment period for dependent life is 31 days from the

first day of eligibility.

WAITING PERIOD: The period commencing with the date a person meets the definition of "GROUP"

above and ending with the first day of the month next following that date.

PLAN OF INSURANCE

EMPLOYEE BENEFIT SCHEDULE

EMPLOYEE TERM LIFE INSURANCE:

Basic Life Insurance

Eligible Class Amount of Basic Life Insurance

All employees One times annual base earnings, rounded to the next higher \$1000 if not already a multiple thereof subject to a minimum of \$50,000 and maximum of \$150,000.

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Supplemental Employee Life Insurance

Eligible Class Amount of Supplemental Employee Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and a maximum of \$500,000.

BASIC LIFE INSURANCE ADDITIONAL BENEFIT:

Basic Life Insurance Repatriation Benefit

Eligible Class Amount of Insurance

All employees If a death benefit becomes payable for an insured under this policy we will pay

an additional benefit to reimburse the person who incurs the transportation expenses to transport the insured's body to a mortuary near his or her primary residence, but not to exceed the lesser of \$5,000 or 10% of the basic life insurance, if the insured dies more than 200 miles from his or her primary place

of residence.

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

Basic and Supplemental Insurance

Eligible Class Amount of Basic and Supplemental Employee AD&D Insurance

All employees An amount equal to the amount of Basic and Supplemental Employee Life

Insurance for which the employee is insured under the group policy.

GENERAL PROVISIONS FOR EMPLOYEE INSURANCE

RETIREMENT REDUCTIONS: All insurance terminates at retirement, except as provided for under the

portability provision.

CONTRIBUTORY/NONCONTRIBUTORY: Basic insurance is noncontributory insurance; supplemental employee 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 supplemental employee insurance:

For employees in an eligible class immediately prior to the

effective date of the group policy:

An amount equal to the amount of contributory insurance for which the employee was insured under the prior carrier's group policy on the day immediately preceding the effective date of this policy.

For employees who first become eligible after the effective date of this

policy:

\$100,000.

EVIDENCE OF INSURABILITY: Evidence of insurability is required as stated in the policy and for an amount of

insurance greater than the guaranteed issue amount.

F.70944 B

DEPENDENTS BENEFIT SCHEDULE

DEPENDENTS TERM LIFE INSURANCE:

An employee must be approved for Supplemental Employee Life and matching accidental death and dismemberment coverage under this plan to be eligible to elect Supplemental Spouse/Civil Union Partner/Domestic Partner and Supplemental Child Life and matching accidental death and dismemberment coverage.

Supplemental Spouse/Civil Union Partner/Domestic Partner Life Insurance

Eligible Class Amount of Supplemental Spouse/Civil Union Partner/Domestic

Partner Life Insurance

All employees An amount elected by the employee, in an increment of \$10,000, subject to a

minimum of \$10,000 and subject to a maximum of the lesser of 50% of the

employee's supplemental amount of insurance or \$250,000.

Supplemental Child Life Insurance

Eligible Class Amount of Supplemental Child Life Insurance

All employees \$5,000 or \$10,000, as elected by the employee. Supplemental child coverage

cannot exceed 50% of the Employee's Supplemental amount of insurance.

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

Spouse/Civil Union Partner/Domestic Partner and Child AD&D Insurance

Eligible Class Amount of Spouse/Civil Union Partner/Domestic Partner and Child

AD&D Insurance

All employees An amount equal to the amount of Supplemental Spouse/Civil Union

Partner/Domestic Partner and Child Life insurance for which the spouse/civil union partner/domestic partner and/or child are insured under the group policy.

GENERAL PROVISIONS FOR DEPENDENTS INSURANCE

GRANDFATHERED COVERAGE:

There is a group of grandfathered employees who were able to elect coverage on his or her spouse and/or children without electing Supplemental Employee Life/AD&D coverage. The coverage for this group that is currently in place was elected prior to January 1, 2003. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

There is a group of grandfathered employees in which the spouse coverage maximum of "the lessor of 50% of the employee's supplemental amount of insurance or \$150,000" does not apply. The coverage for this group that is currently in place was elected prior to January 1, 2003 and their coverage amounts are outside of the current plan parameters. The list of this closed grandfathered group is on file and of record with the policyholder and Minnesota Life.

If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage, and the spouse/ civil union partner/domestic partner becomes a State employee, then the spouse/ civil union partner/domestic partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guarantee issue basis, equal to the amount he/she had as a spouse/ civil union partner/domestic partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the spouse/ civil union partner/domestic partner coverage ends.

CONTINUED DEPENDENTS INSURANCE UPON THE DEATH OF THE EMPLOYEE:

Notwithstanding anything in the policy to the contrary, any dependents term life and accidental death and dismemberment insurance that is in force at the time of an employee's death shall remain in force for five months from the date of the employee's death, with no further premium payment required.

CONTRIBUTORY/NONCONTRIBUTORY: Dependents insurance is contributory insurance.

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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 with eligible dependents immediately prior to the effective date of this policy, the guaranteed issue amount is equal to the amount of dependents insurance for which they were insured under the prior group policy.

For employees who first become eligible for dependents insurance after the effective date of this policy, the guaranteed issue amount is as follows:

For Supplemental Spouse/Civil Union Partner/Domestic Partner

Insurance: \$30,000

For Supplemental Child Insurance: \$10,000*

* As an exception, evidence of insurability is never required of a child regardless of when application is made (new hire, family status change, or annual enrollment.)

EVIDENCE OF INSURABILITY:

Evidence of insurability is required as stated in the policy and for an amount of insurance greater than the guaranteed issue amount.

EFFECT OF EMPLOYEE'S RETIREMENT:

All dependents insurance terminates upon the employee's retirement except as provided under the portability provision.

ADDITIONAL INFORMATION

WAIVER OF PREMIUM APPLICATION:

Applies to contributory and noncontributory employee insurance.

ELECTION CHANGES:

Election changes can be made at any time, except child life changes are limited to annual enrollment or within 31 days of a Family Status Change.

An employee may make changes to his or her elections at annual open enrollment or within 31 days of a Family Status Change without providing any evidence of insurability:

- 1. Any reduction or termination of coverage.
- 2. Any election for child life insurance.
- 3. For changes due to a Family Status Change: Any increase in Supplemental Employee Life/AD&D insurance that does not exceed the guaranteed issue of \$100,000, including enrolling in Supplemental Employee Life/AD&D for the first time for up to \$100,000.
- 4. For changes due to a Family Status Change: Any increase in Supplemental Spouse/Civil Union Partner/Domestic Partner Life insurance that does not exceed the guaranteed issue of \$30,000, including enrolling in Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D for the first time for up to \$30,000.

Any amount requested above these amounts or any change requested outside of these events shall require evidence of insurability and will not be effective unless and until the evidence is approved by Minnesota Life.

Family Status Change means:

- Birth or adoption or otherwise acquiring a newly eligible child
- Death of a spouse/civil union partner/domestic partner
- Marriage
- Declaration of domestic partnership
- Establishment of a civil union partnership

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SPECIAL MARRIED/DOMESTIC PARTNERSHIP EMPLOYEES RULES:

RIDER(S) TO THE GROUP POLICY

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

- If an employee is insured for Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage and that spouse/ civil union partner/domestic partner coverage terminates, the employee can apply for Supplemental Employee Life/AD&D on a guaranteed issue basis equal to the amount he or she had as a spouse/civil union partner/domestic partner. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner/Domestic Partner coverage ends.
- If an employee has Supplement Employee Life/AD&D and Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage, and the spouse/civil union partner/domestic partner becomes a State employee, then the spouse/civil union partner/domestic partner may receive an amount of Supplemental Employee Life/AD&D coverage, on a guaranteed issue basis, equal to the amount he or she had as a spouse/civil union partner/domestic partner, but not less than \$100,000 and not to exceed \$250,000. The request for new Supplemental Employee Life/AD&D coverage must be made within 31 days of the date that the Supplemental Spouse/Civil Union Partner/Domestic Partner coverage ends.
- If two State employees are married, or have established a civil union partnership or have declared a domestic partnership and both have Supplemental Employee Life/AD&D coverage, and one employee terminates employment with the State and loses their Supplemental Employee Life/AD&D coverage, then the other remaining employee may add Supplemental Spouse/Civil Union Partner/Domestic Partner coverage, on a guarantee issue basis, up to an amount not to exceed the lesser of:
 - the amount that was in place as Supplemental Employee Life/AD&D coverage for the terminated employee;
 - 50% of the remaining employee's amount of coverage; and
 - **\$250,000.**

The request for new Supplemental Spouse/Civil Union Partner/Domestic Partner Life/AD&D coverage must be made within 31 days of the date that the employee coverage ends.

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Definitions

associated company

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

certificate effective date

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

certificate holder

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

contributory insurance

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

employee

Any officer or employee under the state personnel system of the state of Colorado whose salary is paid by state funds or any employee of the department of education, the Colorado commission on higher education, or the Colorado school for the deaf and the blind whose salary is paid by state funds, or any member of the military employed pursuant to section 28-3-904 C.R.S. Employee includes any officer or employee of the legislative or judicial branch, any elected or appointed state official or employee who receives compensation other than expense reimbursement from the state funds, any elected state official who does not receive compensation other than expense reimbursement from state funds, and includes any member of the board of assessment appeals. Employee does not include persons employed on a temporary basis: except that it shall include a member of the military employed pursuant to section 28-3-904 C.R.S. for more than 30 consecutive days.

Employee does not include an employee insured under the University of Colorado group life insurance plan or a full-time member of the armed forces of any country.

employer

The policyholder or any designated associated companies.

evidence of insurability

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

insured

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

non-work day

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

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

noncontributory insurance

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

policy anniversary

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

policy effective date

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

policyholder

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

regular pay

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

specifications page

The outline which summarizes 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 policy. The waiting period is shown on the specifications page attached to this policy.

we, our, us

Minnesota Life Insurance Company.

you, your

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

General Information

What is your agreement with us?

This policy and your application which is attached contain the entire contract between you and us. Any statements you make will be considered representations and not warranties. Also, any statement that you make will not be used to void this policy, nor will it be used in our defense if we refuse to pay a claim, unless the statement is contained in your application.

No change or waiver of any provisions of this policy, or any certificate issued under it, will be valid unless made in writing by us and signed by our president, a vicepresident, our secretary, or an assistant secretary. No agent or other person has the authority to change or waive any provisions of this policy, or of any certificate issued under it.

Are employees of associated companies eligible for insurance under this policy?

Yes. Employees of associated companies may be eligible for insurance under this policy. Associated companies are shown on the specifications page attached to this policy. You represent any associated company in all transactions pertaining to this policy. Your acts or omissions and every notice given by us to you shall be binding on every associated company. When an associated company ceases its participation under the policy, the policy shall be considered to be terminated for all employees of the associated company. All provisions related to the policy terminating will apply to such employees.

Can this policy be amended?

Yes. The insured's consent is not required to amend this policy or any certificates issued under it. Any amendment will be without prejudice to any claim for benefits incurred prior to the effective date of the amendment.

Who is eligible for insurance?

An employee is eligible if he or she:

- is a member of the group and of an eligible class as shown on the specifications page attached to this policy; and
- (2) has satisfied the waiting period as shown on the specifications page attached to this policy; and
- (3) meets the actively at work requirement as shown in the section entitled "What is the actively at work requirement?".

Are retired employees eligible for insurance?

Retirees are not eligible under this policy except that coverage may be continued for a retiree under the portability provisions.

What is the actively at work requirement?

To be eligible to become insured or to receive an increase in the amount of insurance, an employee must be actively at work performing his or her customary duties at the employer's normal place of business, or at other places the employer's business requires him or her to travel.

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

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

When will we require evidence of insurability?

Evidence of insurability will be required if:

- the specifications page attached to this policy states that evidence of insurability is required; or
- (2) the insurance is contributory and the employee does not enroll within the enrollment period shown on the specifications page attached to this policy; or
- (3) the insurance for which the employee previously enrolled did not go into effect or was terminated because the employee failed to make a required premium contribution; or
- (4) during a previous period of eligibility, the employee failed to submit required evidence of insurability or that which was submitted was not satisfactory to us; or
- (5) the employee is insured by an individual policy issued under the terms of the conversion right section.

When does insurance become effective?

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

- an employee meets all eligibility requirements; and
- (2) if required, the employee applies for the insurance on forms which are approved by us; and
- (3) we are satisfied with the employee's evidence of insurability, if we require evidence; and
- (4) we receive the required premium.

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

Yes. Insurance may be continued on an insured employee who is not actively at work due to sickness, injury, leave of absence or temporary layoff, subject to the employer's practices and procedures, including the employer's limits on the length of continuation allowed for the type of absence. Continuation is subject to the following maximum time frames:

- (1) for an employee on non-medical leave of absence or temporary layoff, insurance cannot be continued beyond 12 months from the last day the insured employee was actively at work.
- (2) for an employee on a medical leave of absence, insurance cannot be continued beyond the later of 12 months from the last day the insured employee was actively at work or the date the employee attains age 65.

If an employee goes out on a military leave, insurance will terminate on the last date of employment prior to the leave. When the employee returns from the military leave as an active employee, his or her insurance will be reinstated at the same amount of insurance that he or she had prior to the military leave without having to provide evidence of insurability.

Continuation of insurance must be in accordance with the practices and procedures that precludes individual selection.

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

Premiums

When and how often are premiums due?

Unless we have agreed to some other premium payment procedure, premiums for this policy are remitted to us monthly. Premiums are due on the premium due date as shown on the specifications page attached to this policy. We apply premiums consecutively to keep the insurance in force.

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

Premium contributions for contributory insurance are to be paid to you. The premium contributions by insureds for contributory insurance should be remitted to us as due along with the premiums payable for noncontributory insurance.

How is the premium determined?

The premium will be the premium rate multiplied by the number of \$1,000 units of insurance in force on the date premiums are due. The premium may also be computed by any other method on which you and we agree.

We may change the premium rate:

- (1) on any premium due date following the expiration of any rate guarantee period; or
- (2) anytime, if the policy terms are amended or the total amount of insurance in force changes by 25% or more.

Can a premium be paid after the date it is due?

Yes. This policy has a 45-day grace period. If a premium is not paid on or before the date it is due, that premium may be paid during the 45-day period following the due date. The insurance under this policy will remain in effect during the 45-day grace period. This grace period does not apply to the first premium payment.

Death Benefit

What is the amount of the death benefit?

The amount of the death benefit is the amount of insurance shown on the specifications page attached to this group policy.

Can an insured request a change in the amount of his or her contributory insurance?

Yes. If the policyholder's plan of insurance, as reflected in the specifications page attached to this policy, allows for a choice of amounts of insurance for the insured's class, an insured can request an increase or a decrease in the amount of his or her contributory insurance within the limitations of the policyholder's plan of insurance, including any limitations on when and how often such requests may be made.

If an insured requests an increase in the amount of his or her contributory insurance, we will require evidence of insurability, unless otherwise noted on the specifications page.

When will changes in an insured's coverage amount be effective?

Requested increases in the amount of an insured's contributory insurance, if approved, are effective on the date we approve the increase. Requested decreases in the amount of an insured's contributory insurance are effective on the first day of the month following receipt of the insured's request for a decrease, or if different, according to the administrative practices of the employer.

Requests for a change made during a special enrollment period offered by the employer will not become effective prior to the general effective date of elections made during that enrollment.

Increases and decreases in insurance amounts which result from a change in the insured's eligible class or earnings will be effective as shown on the specifications page attached to this policy.

All increases in the amount of insurance are subject to the actively at work requirement.

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 an individual died while insured under this policy. 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. A beneficiary is named by an insured to receive the death benefit to be paid at the insured's death. The insured may name one or more beneficiaries. The insured cannot name you or an associated company as a beneficiary.

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

If there is more than one beneficiary, each will receive an equal share, unless the insured has requested another method in writing. To receive the death benefit, a beneficiary must be living at the time of the insured's death. In the event a beneficiary is not living at the time of the insured's 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 the insured and a beneficiary, the death benefit will be paid as if the insured survived the beneficiary.

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

- the insured's lawful spouse/civil union partner (does not include a domestic partner) if living, otherwise;
- (2) the insured's natural or legally adopted child (children) in equal shares, if living, otherwise;
- (3) the insured's parents in equal shares, if living, otherwise;
- (4) the insured's brothers and sisters in equal share, if living, otherwise;
- (5) the personal representative of the insured's estate.

Can an insured add or change beneficiaries?

Yes. An insured can add or change beneficiaries if all of the following are true:

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

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

Termination

When does an insured's coverage terminate?

The insured's coverage ends on the earliest of the following:

- (1) the date this policy ends; or
- (2) the end of the month in which the employee no longer meets the eligibility requirements; or
- (3) the date the policy is amended so the employee is no longer eligible; or
- (4) 45 days (the grace period) after the due date of any premium contribution which is not paid; or
- (5) the last day for which premium contributions have been paid following an employee's written request to cease participation under this policy.

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

Can insurance on the life of an insured be reinstated after termination?

Yes. When an insured's coverage terminates because he or she is no longer eligible, and the insured becomes eligible again within three months after the date his or her coverage terminated, the insured's coverage under this policy may be reinstated.

Provided the insured is not then covered by an individual policy issued under the terms of the conversion right section, his or her coverage under this group policy shall be reinstated automatically, without evidence of insurability or satisfaction of any waiting period. The amount of insurance will be that which applies to the classification to which he or she then belongs, on the date he or she again becomes eligible. If the policyholder's plan of insurance provides for contributory insurance under this policy, an insured's amount of contributory insurance will be limited to that for which he or she was insured immediately prior to the loss of coverage.

When does this group policy terminate?

You may terminate this group policy by giving us 90 days prior written notice. We reserve the right to terminate this policy on the earliest of the following to occur:

- (1) 45 days (the grace period) after the due date of any premiums which are not paid; or
- (2) on any subsequent policy anniversary after the date the number of employees insured is less than any minimum established by us or as required by applicable state law; or
- (3) 180 days after we provide you with notice of our intent to terminate this policy.

Can this policy be reinstated?

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

Conversion Right

What is the conversion right?

An insured can convert this insurance to a new individual life insurance policy if all or part of the insured's life insurance under this policy terminates.

The insured may convert up to the full amount of terminated insurance if termination occurs because he or she moves from one existing eligible class to another, or he or she is no longer in an eligible class.

What is the limited conversion right?

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

- (1) the policy is terminated; or
- (2) the policy is changed to reduce or terminate the insurance for that individual.

The insured may convert up to the full amount of terminated insurance, but not more than the maximum. The maximum is the lesser of:

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

Neither the conversion right nor the limited conversion right is available if the insured's coverage under this policy terminates due to failure to make, when due, required premium contributions.

Under both the conversion right and the limited conversion right, the insured may convert his or her 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, accidental death and dismemberment benefits, or accelerated benefits.

How does an insured convert his or her insurance?

An insured converts his or her insurance by applying for an individual policy and paying the first premium within 31 days after the 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, the insured's age, and the class of risk to which the insured belongs 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 this policy terminates.

What happens if the insured dies during the 31-day period allowed for conversion?

If the insured dies 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 the insured would have been eligible to convert under the terms of the conversion right section.

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

Additional Information

What if an insured's age has been misstated?

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

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

Is there a suicide exclusion?

The life insurance suicide exclusion applies to Supplemental Employee Life insurance. Supplemental Spouse/Civil Union Partner/Domestic Partner Life insurance and Supplemental Child Life insurance under this policy. The life insurance suicide exclusion does not apply to Basic Life insurance under this policy.

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

If there has been an increase in the insured's amount of life 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 one year of the effective date of the life insurance increase, our liability with respect to that life insurance increase will be limited to the life insurance premiums paid and attributable to such life insurance increases.

Exclusions for AD&D insurance, including a AD&D insurance suicide exclusion, applies to Basic AD&D insurance, Supplemental Employee AD&D insurance, Supplemental Spouse/Civil Union Partner/Domestic Partner AD&D insurance and Supplemental Child AD&D insurance and are listed on the applicable rider.

When does an insured's insurance become incontestable?

Except for non-payment of premiums, after the insured's insurance has been in force during his or her lifetime for two years from the effective date of his or her coverage, we cannot contest the insured's coverage. However, if there has been an increase in the amount of insurance for which the insured was 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 the insured makes in his or her application will be considered representations and not warranties. Also, any statement an insured makes will not be used to void his or her insurance, nor defend against a claim, unless the statement is contained in the application and any evidence of insurability application attached to the insured's certificate.

Can an insured's insurance be assigned?

Yes. However, we will not be bound by an assignment of the certificate or of any interest in it unless it is made as a written instrument, the insured files the original instrument or a certified copy with us at our home office, and we send the insured an acknowledged copy. We are not responsible for the validity of any assignment. An insured is responsible for ensuring that the assignment is legal in his or her state and that it accomplishes his or her intended goals. If a claim is based on an assignment, we may require proof of interest of the claimant. A valid assignment will take precedence over any claim of a beneficiary.

Are you required to maintain records?

Yes. You are required to maintain adequate records of any information necessary for us to administer this policy.

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

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

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

Will this policy receive experience credits?

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

Are you our agent?

No. For all purposes of this policy, neither you, an associated company, nor any administrator you appoint is our agent. We will not be liable for any of your acts or omissions or those of an associated company or administrator.

Will the provisions of this policy conform with state law?

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

Accidental Death and Dismemberment Policy Rider

Minnesota Life Insurance Company, a Securian Financial Group affiliate 400 Robert Street North • St. Paul, Minnesota 55101-2098

General Information

This rider is issued in consideration of the required premium and amends the group policy to which it is attached. This rider is subject to every term, condition, exclusion, limitation, and provision of the group policy unless otherwise expressly provided for herein.

What does this rider provide?

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

Who is eligible for insurance under this rider?

An employee or dependent who is insured under the provisions applicable to life insurance coverage under the group policy is eligible for insurance under this rider. All references to an insured in this rider shall include dependents. All provisions of this rider applicable to an "insured" shall apply to an insured dependent.

When does insurance under this rider become effective?

Insurance becomes effective on the date that the employee or dependent becomes insured for life insurance under the group policy.

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 rider means that the insured's 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 the insured's coverage under this rider is in force. The insured's death or dismemberment must occur within 365 days after the date of the injury and while his or her coverage under this rider is in force.

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

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

- (2) suicide or attempted suicide, whether sane or insane; or
- (3) the insured's 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 the insured is the operator of the motor vehicle and this insured's 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) war or any act of war, whether declared or undeclared; or
- (10) service in the military of any nation.

FOR LOSS OF

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

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

table.

LiteFull Amount of AD&D Insurance
Both Hands or Both FeetFull Amount of AD&D Insurance
Sight of Both EyesFull Amount of AD&D Insurance
Speech and Hearing
(In both ears)Full Amount of AD&D Insurance
One Hand and One Foot Full Amount of AD&D Insurance
One Foot and Sight
of One EyeFull Amount of AD&D Insurance
One Hand and Sight
of One EyeFull Amount of AD&D Insurance
QuadriplegiaFull Amount of AD&D Insurance
Paraplegia 50% of Amount of AD&D Insurance
Sight of One Eye 50% of Amount of AD&D Insurance
Speech or Hearing
(In both ears) 50% of Amount of AD&D Insurance
One Hand or
One Foot 50% of Amount of AD&D Insurance
Hemiplegia 50% of Amount of AD&D Insurance

AMOUNT OF BENEFIT

Full Amount of ADPD Incurance

Thumb and Index

Finger of One Hand.....25% of Amount of AD&D Insurance

Loss of hands or feet means complete severance at or above the wrist or ankle joints. Loss of sight, speech, or hearing in both ears means the entire and irrecoverable loss of sight, speech, or hearing in both ears 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 rider for any one accident, not including any amount paid according to the terms of the Additional Benefits section of this rider, will never exceed the full amount of AD&D insurance shown on the specifications page attached to the group policy.

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 the insured 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 us and the beneficiary.

To whom do we pay the benefit?

In the case of a certificate holder's accidental death, we will pay the accidental death benefit to the person or persons entitled to receive his or her death benefit under the terms of the group policy. The benefit for other losses sustained by the certificate holder will be paid to the certificate holder, if living, otherwise to the person or persons entitled to receive the certificate holder's death benefit under the terms of the group policy.

A dependent's AD&D benefit will be paid to the certificate holder, if living. If the insured employee is not living, the

death benefit payable under this rider will be paid in equal shares to the first surviving class of the classes below:

- (1) the children of the dependent, if living, otherwise;
- (2) the parents of the dependent, if living, otherwise;
- (3) the brothers and sisters of the dependent, if living, otherwise;
- (4) the insured employee's estate.

Additional Benefits

Unless stated otherwise, 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, unless otherwise stated. All provisions of this rider including but not limited to the "What does accidental death or dismemberment by accidental injury mean?" section shall apply to these additional benefits.

Career Adjustment Benefit

What is the career adjustment benefit?

If an insured employee dies as a result of a covered accident for which an accidental death insurance benefit is payable and he or she is survived by his or her spouse/civil union partner/domestic partner, we will pay a career adjustment benefit to the surviving spouse/civil union partner/domestic partner, provided that the spouse/civil union partner/domestic partner within 36 months after the insured employee's death, registers and is in attendance at a professional or trades training program for the purpose of obtaining employment or increasing his or her earnings.

The benefit will be equal to the lesser of:

- (1) \$5,000 per year; or
- (2) the actual tuition charges, exclusive of room and board; or
- (3) the cumulative total of \$10,000 or 25% of the insured employee's amount of accidental death insurance, whichever is less.

Proof of such costs will be required before benefits are paid.

Child Care Benefit

What is the child care benefit?

If an insured employee dies as a result of a covered accident and he or she is survived by his or her spouse/civil union partner/domestic partner and one or more dependent children under age 13, we will pay additional benefits to reimburse the surviving spouse/civil union partner/domestic partner for child care expenses they incur for the insured employee's dependent children while under age 13.

The benefit will be the lesser of:

- (1) \$5,000 per year; or
- (2) actual incurred child care expenses; or

(3) the cumulative total of \$10,000 or 25% of the insured employee's amount of accidental death insurance, whichever is less.

Child care expenses are those expenses which are for a service or supply furnished by a licensed child care provider or facility for a dependent child's care who are not a member of the insured employee's family. No payment will be made for expenses incurred more than 36 months after the date of the insured employee's death or for expenses incurred for dependent children over age 13. Proof of incurred child care expenses by the surviving spouse/civil union partner/domestic partner shall be required before any benefit payment is made. The child care benefit will be paid to the surviving spouse/civil union partner/domestic partner.

Dependent Child Education Benefit

What is the dependent child education benefit?

We will pay an education benefit on behalf of the insured employee's dependent children if an insured employee dies as a result of a covered accident and is survived by one or more dependent children, provided that:

- (1) at the time of the insured employee's death, the dependent child is enrolled as a full-time student at an accredited post-secondary educational institution (however, no benefit will be payable for the current school year); or
- (2) the dependent child enrolls on a full-time basis in an accredited post-secondary educational institution within one year of the employee's death.

The benefit payable per child will be the lesser of:

- (1) \$5,000 per year; or
- (2) the actual tuition charged, exclusive of room and board; or
- (3) the cumulative total of \$20,000 or 25% of the insured employee's amount of accidental death insurance, whichever is less.

The benefit will be payable at the beginning of each school year for a maximum of four consecutive years. The benefit will be paid to the dependent child annually if he or she is of legal age. If the dependent child is not of legal age the benefit will be paid annually to the person who provides proof they have paid or will pay the tuition bill for that school year. Proof of enrollment and tuition costs are required for each school year.

Seatbelt Benefit

What is the seatbelt benefit?

If an insured dies as a result of a covered accident which occurs while he or she is driving or riding in a private passenger car, we will pay an additional AD&D benefit equal to the lesser of:

- (1) \$10,000; or
- (2) 100% of the insured's amount of AD&D insurance.

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

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

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

Termination

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

An insured's coverage ends on the earliest of:

- the date the certificate holder is no longer covered for life insurance under the group policy; or
- (2) for an insured dependent, the end of the month in which the dependent no longer meets the eligibility requirements; or
- (3) for an insured dependent, the date the dependent is no longer covered for life insurance under the group policy; or
- (4) 45 days (the grace period) after the due date of any premium contribution which is not paid.

The certificate holder must notify us or the employer when he or she no longer has any dependents eligible for coverage under this benefit so that premiums may be discontinued. All premiums paid for dependents who are no longer eligible for coverage under this benefit will be refunded without any payment of claim.

When does this rider terminate?

This rider will terminate on the earlier of:

- (1) the date we receive a written request from the policyholder to cancel this rider; or
- (2) the date the group policy is terminated.

Additional Information

Do we have the right to obtain independent medical verification?

Yes. We retain the right to have an insured medically examined at our expense 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 rider be converted to a policy of individual insurance upon termination?

No. Coverage under this rider will not be included in any insurance issued under the conversion right section of the group policy.

Secretary

President

Dependents Term Life Insurance Policy Rider

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

General Information

This rider is issued in consideration of the required premium and amends the group policy to which it is attached. The rider is subject to every term, condition, exclusion, limitation, and provision of the group policy unless otherwise expressly provided for herein.

What does this rider provide?

This rider provides insurance on the lives of the insured employee's eligible dependents.

What members of the insured employee's family are eligible for insurance under this rider?

The following members of the insured employee's family are eligible for insurance under this rider:

The members of an insured employee's family are considered his or her eligible dependents. Eligible dependents are specified in statutes, primarily § 24-50-603(5) and (6.5), C.R.S., as modified or further defined by other state statutes (e.g., Title 10) or federal regulations (e.g., Affordable Care Act [ACA], IRC on taxable income).

- A. Current spouse, including common law spouse.
 - Spouse means a spouse as recognized under federal tax laws.
 - 2. Common law spouse means an adult, at least 18 years of age:
 - a. with whom the employee cohabitates; and
 - who represent themselves to the community as married to each other;
 - there is no legal impediment to the marriage.
- B. Current civil union partner who is an adult:
 - eighteen years of age or older who is not under guardianship, unless the party under guardianship has the written consent of his or her guardian to enter into a civil union as created by Article 15 of Title 14, C.R.S.; and
 - who has entered into a civil union in accordance with the requirements of Article 15 of Title 14, C.R.S. or who has established a relationship legally entered into in other jurisdictions that are similar to civil unions created by Article 15 of Title 14,

- C.R.S. and that are not otherwise recognized pursuant to Colorado law; and
- 3. who is of the opposite gender or same gender as the employee; and
- 4. who is not a party to another civil union; and
- 5. who is not a party to a domestic partnership; and
- 6. who is not married; and
- who is not a relative to the employee.
 Article 15 of Title 14, C.R.S. prohibits a person from entering into a civil union with an ancestor, descendant, brother, sister, uncle, aunt, niece or nephew, whether the relationship is by the half or the whole blood.
- C. Current domestic partner who is an adult, at least 18 years of age:
 - 1. who is of the same gender as the employee; and
 - with whom the employee has shared an exclusive, committed relationship with that same person for at least one year prior to enrollment with the intent for the relationship to last indefinitely; and
 - who is not related to the employee by blood to a degree that would prohibit marriage; and
 - 4. who is not married: and
 - 5. who is not in another domestic partnership; and
 - 6. who is not in a civil union partnership.
- D. A child from live birth (stillborn and unborn children are not eligible) until the end of the month he or she turns age 26. The legal definition of child must be applied (e.g., first generation, parent-child relationship). As of July 1, 2011, marital status, student status, financial support, and residency are no longer factors under the ACA.
 - 1. Biological or natural child.
 - 2. Legally adopted.
 - 3. Legally placed for adoption or foster care.
 - 4. Step child as long as the employee and parent are married.
 - 5. Child of a civil union partner.
 - 6. Child of a domestic partner as long the employee and partner are in the committed relationship.

7. Child for whom the employee has a court order that specifies responsibility for health insurance coverage (legal custody or allocation of parental responsibility). Note: a court has determined there is a parentchild relationship for purposes of coverage.

E. A disabled child must be:

- 1. unmarried,
- 2. medically certificated as disabled prior to the age of 26; and
- dependent upon employee or spouse/domestic partner/civil union partner for financial support; and
- proof of disability and dependency must be provided before becoming covered under the State's life plan and annually, if requested; and
- 5. newly hired employees will need to provide proof that the child's disability began prior to the child reaching age 26. If a child of a newly hired employee or current employee becomes disabled after the child reaches age 26, the child is ineligible for coverage under the State's life plan.

Exclusions

Ex-spouses and their children, civil union expartners and their children, same-gender domestic ex-partners and their children, opposite-gender domestic partners and their children, parents, grandparents and grandchildren, siblings, aunts and uncles, nieces and nephews, cousins, and any other relatives or non-relatives in the household. The only exception is when a court determines a qualified dependent relationship exists and issues an order specifying responsibility for coverage.

If any spouse/civil union partner/domestic partner is insured as an eligible employee under the group policy for employee supplemental term life, he or she is not also eligible to be insured with dependent spouse/civil union partner/domestic partner supplemental term life coverage. If any employee is insured as an eligible spouse/civil union partner/domestic partner under the group policy for spouse/civil union partner/domestic partner supplemental term life coverage, he or she is not also eligible to be insured as an employee for supplemental term life coverage.

If both parents of a child qualify as eligible employees and they are legally married or have established a civil union partnership or have declared a domestic partnership while covered under the group policy, the child shall be considered a dependent of only one parent for purposes of this supplement. However, if both parents of a child qualify as eligible employees and have divorced, have been legally separated, have terminated their civil union partnership or have terminated their domestic partnership, while covered under the group policy, the child shall be

considered a dependent of both parents for purposes of this supplement. If any child qualifies as an eligible employee under the group policy and has supplemental employee life coverage, he or she is not eligible to be insured as a dependent child.

Any dependent child who, subsequent to the effective date of the insured employee's 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:

- the specifications page attached to the group policy states that evidence of insurability is required; or
- (2) the insurance is contributory and the employee does not enroll for coverage under this rider within the enrollment period shown on the specifications page attached to the group policy; or
- (3) dependents insurance for which the employee previously enrolled did not go into effect or was terminated because the employee failed to make a required premium contribution; or
- (4) during a previous period of eligibility, the employee 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 is insured by an individual policy issued under the terms of the conversion right of this rider.

When does insurance on a dependent become effective?

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

- (1) the dependent meets all eligibility requirements; and
- (2) if required, the insured employee applies for dependents coverage on forms which are approved by us; and
- (3) we are satisfied with the dependent's evidence of insurability, if we require evidence; and
- (4) we receive the required premium.

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 the group policy.

To whom will we pay the death benefit?

The death benefit payable under this rider will be paid to the insured employee if living. If the insured employee is not living, the death benefit payable under this rider will be paid in equal shares to the first surviving class of the classes below:

- (1) the children of the dependent, if living, otherwise;
- (2) the parents of the dependent, if living, otherwise;
- (3) the brothers and sisters of the dependent, if living, otherwise:
- (4) the insured employee's estate.

Termination

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

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

- (1) the end of the month in which the dependent no longer meets the eligibility requirements; or
- (2) 45 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 an employee's written request that insurance on his or her eligible dependents be terminated; or
- (4) the date the employee is no longer covered under the group policy.

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

When does this rider terminate?

This rider will terminate on the earlier of:

- (1) the date we receive a written request to cancel this rider; or
- (2) the date the group policy is terminated.

Additional Information

What is the conversion right under this rider?

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

Conversion may be requested by the insured employee, 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 the group policy to which this rider is attached will apply.

Does any Waiver of Premium rider to the group policy apply to insured dependents?

Yes. If, due to the insured employee's disability, his or her insurance is continued in force without further payment of premiums due to any Waiver of Premium rider to the group policy, any dependents insurance provided by this rider shall also continue in force without further payment of premiums until the dependent's eligibility terminates or until the insured employee's insurance is no longer continued in force due to any such rider to the group policy.

This provision is not applicable if the dependent's insurance has been converted under the conversion right section of this rider, unless the converted policy is surrendered without claim except for refund of premiums.

Secretary

Jay L. Chustens

President

Vagle M. Jefen

Term Life Insurance Portability Policy Rider

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

General Information

This rider is issued in consideration of the required premium and amends the group policy to which it is attached. This rider is subject to every term, condition, exclusion, limitation and provision of the group policy unless otherwise expressly provided for herein.

What does this rider provide?

This rider provides for continuation of group life insurance for insureds who no longer meet the eligibility requirements of the group policy except as provided for herein.

To continue coverage under the provisions of this rider, an eligible insured 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 rider will then be deemed effective retroactive to the beginning of the 31-day period. This date is considered to be the insured's portability date and the insured is then considered to have portability status.

Who is eligible to continue insurance under this rider?

A certificate holder is eligible to continue insurance under this rider if he or she, except as provided by this rider, no longer meets the eligibility requirements of the group policy due to any of the following:

- the employee terminates employment, including retirement; or
- (2) the employee is no longer in a class eligible for insurance or is on a leave or layoff; or
- (3) a class or group of employees insured under the policy is 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.

The certificate holder will not be eligible to request coverage under this rider if he or she:

- (1) has attained the age of 70; or
- (2) has converted his or her insurance to an individual life policy under the terms of the group policy's conversion right section; or
- (3) was not actively at work due to sickness or injury on the day immediately preceding his or her portability date; or
- (4) loses eligibility due to termination of the group policy.

What insurance can be continued under this rider?

Both non-contributory and contributory insurance may be continued under this rider. If the certificate holder elects to continue his or her own coverage according to the provisions of this rider, he or she may also elect to continue contributory insurance for any other individual insured under his or her certificate. The certificate holder may also continue coverage under all supplements to such certificate which apply to both non-contributory and contributory insurance and by which he or she was insured immediately preceding his or her portability date, except for the Term Life Waiver of premium Certificate Supplement, which shall terminate on the portability date.

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

The minimum amount of insurance that can be continued on the life of a certificate holder under this rider is \$10,000. The minimum does not apply to any other insureds covered under this rider.

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

The maximum amount of insurance that can be continued under this rider for an insured under age 65 is the amount of insurance that was in force on the insured's portability date. For an insured who is age 65 or older on his or her portability date, the amount will not be more than 65% of the amount of insurance in force on the insured's portability date.

Will the amount of insurance continued under this rider change?

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

Can a certificate holder request a change in his or her amount of insurance continued under this rider?

Yes. The certificate holder may elect to reduce the amount of insurance provided under his or her certificate. The remaining amount of insurance on the life of a certificate holder must be at least \$10,000.

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

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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 rider be converted to a policy of individual insurance?

Yes. At any time after insurance has been continued under the provisions of this rider, it may be converted to a policy of individual insurance with Minnesota Life. All other conditions and provisions of the conversion right section of the group policy to which this rider is attached will apply.

What happens if a certificate holder again becomes eligible under the group policy?

If a certificate holder who is continuing coverage under the provisions of this rider again meets the eligibility requirements of the group policy, not including the terms of this rider, he or she shall no longer be considered to have portability status. Insurance for that certificate holder may be provided only under the terms of the group policy, not including this rider, unless and until he or she no longer meets the eligibility requirements of the group policy and again returns to portability status as provided for herein.

What happens to insurance provided under this rider 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 rider. 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 rider will remain in force until terminated by the provisions of the section entitled "When will insurance continued under this rider terminate?".

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

When will insurance continued under this rider terminate?

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

- (1) the certificate holder's 70th birthday; or
- (2) the date the certificate holder again meets the eligibility requirements of the group policy, not including the terms of this rider; or
- (3) in the case of a dependent child or a spouse/civil union partner/domestic partner who is insured by a rider to the certificate holder's coverage, the date the certificate holder's coverage is no longer being continued under this rider, or the date the certificate holder's spouse/civil union partner/domestic partner or child ceases to be eligible as defined under the terms of the group policy; or
- (4) 45 days after the due date of any premium contribution which is not made.

Secretary

Presiden

Term Life Waiver of Premium Policy Rider

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

General Information

This rider is issued in consideration of the required premium and amends the group policy to which it is attached. The specifications page attached to the group policy indicates whether this rider applies to contributory insurance or noncontributory insurance. This rider is subject to every term, condition, exclusion, limitation, and provision of the group policy unless otherwise expressly provided for herein. Coverage under this rider will not be included in any insurance issued under the conversion right section of the group policy.

What does this rider provide?

This rider provides for waiver of premium for certificate holders who become totally and permanently disabled, as defined herein, while under age 60. Upon approval of proof of such disability, a certificate holder's insurance, including all riders applicable to such certificate holder, which are in force on the date of the onset of the certificate holder's disability will be continued in force without payment of premiums during the uninterrupted continuance of the total and permanent disability.

What is total disability?

Total disability is a disability which occurs while a certificate holder's insurance is in force and which results from an accidental injury or an illness that continuously prevents the certificate holder from engaging in any occupation for which he or she is reasonably suited by education, training, or experience. The certificate holder must be under the care of a licensed physician. The licensed physician cannot be the certificate holder or a member of the certificate holder's immediate family. For purposes of this rider, the certificate holder's immediate family consists of his or her spouse/civil union partner/domestic partner, children, parents, grandparents, grandchildren, brothers and sisters and their spouses.

What is permanent disability?

Permanent disability is a total disability which has existed continuously for at least 180 days.

Do premiums have to be paid for a certificate holder after he or she becomes disabled?

Yes. Premiums have to be paid after a certificate holder becomes disabled, but only until we approve his or her total and permanent disability claim. Continued payment prevents the possible loss of the certificate holder's coverage and eligibility if the claim is not approved. If a certificate holder's claim for benefits under this rider is approved, up to 12 months of life and accidental death and dismemberment premiums paid after the disability began will be refunded.

What if a certificate holder converts his or her group life insurance to a policy of individual insurance prior to the approval of his or her disability claim?

If a certificate holder's coverage has been converted in accordance with the conversion right section of the group policy, benefits under this rider will apply only if the converted policy is surrendered without claim, except for refund of premiums.

What will be considered due proof of total and permanent disability?

A certificate holder must furnish evidence satisfactory to us that his or her disability:

- commenced while his or her insurance under the group policy was in force; and
- (2) meets the definition of total disability; and
- (3) commenced before his or her 60th birthday; and
- (4) was continuous for 180 days or more.

We will, from time to time, also require additional proof satisfactory to us that the certificate holder continues to be totally and permanently disabled. We may also require that the certificate holder submit to one or more medical examinations at our expense.

If a certificate holder dies within one year of the date of onset of his or her disability, the certificate holder's beneficiary may claim benefits under this rider even if the certificate holder's premium payments were discontinued and he or she had not submitted due proof satisfactory to us of his or her total disability or was continuously disabled for less than 180 days. The certificate holder's beneficiary must submit due proof satisfactory to us that the certificate holder's total disability, which began before the certificate holder's premium payments were discontinued and before his or her 60th birthday, continued without interruption until his or her death.

When must we be notified of a certificate holder's disability or death?

We must receive written notice at our home office of a certificate holder's total disability within one year of the date of onset of such disability. However, 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.

We must receive written notice at our home office within one year of death that a certificate holder died during a period of continuance provided by this rider. Proof must be furnished that he or she continued to be totally disabled during the entire period of continuance until death. If such notice and proof are not provided within the required time frame, there shall be no liability for any payment under this rider.

What is the amount of insurance to be continued without payment of premium under this rider?

The amount of insurance continued without payment of premium shall be the amount of insurance that was in force on the date of onset of total disability.

How long will insurance be continued without payment of premium?

If a certificate holder becomes totally and permanently disabled, insurance will be continued, without payment of premium, until the earliest of:

- (1) the certificate holder's 65th birthday; or
- (2) the date the certificate holder recovers so that he or she is no longer totally and permanently disabled; or
- (3) the date the certificate holder fails to furnish proof of continued disability when requested or refuses to submit to a required medical examination.

What happens to a certificate holder's insurance when the waiver of premium benefit ends?

When the benefits under this rider end according to the provisions of the section entitled "How long will insurance be continued without payment of premium?," the following will apply:

(1) If the certificate holder is then eligible for coverage under the group policy, his or her insurance may be continued under the group policy provided that 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 certificate holder is no longer eligible for coverage under the group policy, he or she may convert coverage to an individual policy, as provided for under the conversion right section of the group policy.

Insurance will end for a certificate holder unless, within 31 days of the date benefits under this rider end, premium payment is resumed or the insured applies to convert his or her coverage.

When does this rider terminate?

Secretary

This rider will terminate on the earlier of:

- the date we receive a written request to terminate this rider; or
- (2) the date the group policy is terminated.

Insurance being continued without further payment of premiums in accordance with the provisions of this rider will not end due solely to the termination of this rider or of the group policy.

President

Accelerated Benefits Policy Rider

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

Benefits received under this Accelerated Benefits Policy Rider may be taxable. Certificate holders should seek assistance from a personal tax advisor prior to requesting an accelerated payment of death benefits.

General Information

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

What does this rider provide?

This rider provides for the accelerated payment of either the full or a partial amount of an insured's death benefit provided under the group policy. If the insured has a terminal condition as defined in this rider, an accelerated payment of the death benefit may be requested.

Definitions

accelerated benefit

The amount of the death benefit we will pay if the insured is eligible under this rider.

death benefit

The amount of the insured's life insurance as shown on the specifications page attached to the certificate holder's certificate.

immediate family

The certificate holder's spouse/civil union partner/domestic partner, children, parents, grandparents, grandchildren, brothers and sisters, and their spouses.

insured

For purposes of this rider, an insured employee, an insured spouse/civil union partner/domestic partner, or an insured dependent child.

physician

An individual who is licensed to practice medicine or treat illness in the state in which treatment is received. This does not include the certificate holder, or a member of the certificate holder's immediate family.

Terminal Condition

What is a terminal condition?

A terminal condition is a condition caused by sickness or accident which directly results in a life expectancy of twelve months or less.

What evidence do we require of the insured's terminal condition?

We must be given evidence that satisfies us that the insured's life expectancy, because of sickness or accident, is twelve months or less. That evidence must include certification by a physician.

Do we have the right to obtain independent medical verification?

Yes. We retain the right to have the insured medically examined at our own expense to verify the insured's medical condition. We may do this as often as reasonably required while accelerated benefits are being considered or paid.

Accelerated Benefit

What is the accelerated benefit?

The accelerated benefit is the amount of the death benefit payable under this rider. It is the death benefit that is being accelerated, up to 100% of the insured's amount of insurance, subject to the minimums and maximums stated below.

What are the conditions for the payment of an accelerated benefit?

We will consider the payment of an accelerated benefit, subject to all of the following conditions:

- coverage must be in force and all premiums due must be fully paid; and
- (2) application must be made in writing and in a form which is satisfactory to us. We will tell a certificate holder what form is required; and
- (3) the certificate holder must be the sole owner of the certificate; and
- (4) the insured's insurance must not have an irrevocable beneficiary.

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Who may request an accelerated payment of the death benefit?

A certificate holder may request an accelerated payment of the insurance on his or her life or on the life of a spouse/civil union partner/domestic partner or dependent child insured under his or her certificate.

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 rider is not intended to cause an involuntary reduction of the death benefit ultimately payable to the named beneficiary. Therefore, payment of the death benefit cannot be accelerated under this rider if the insured:

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

Is there a minimum or maximum death benefit eligible for an accelerated benefit?

Yes. The minimum death benefit to be eligible for an accelerated benefit under this rider is \$10,000. The maximum death benefit to be eligible for an accelerated benefit is \$1,000,000.

Does a certificate holder have to take the entire accelerated benefit?

No. The certificate holder may choose to receive a partial accelerated benefit. If he or she does so, the insured's remaining coverage will stay in force.

If a certificate holder elects to receive only a partial accelerated benefit amount available under this rider, the remaining death benefit under the certificate must be at least \$25,000.

The certificate holder may reapply for the payment of the remaining amount of insurance at any time. However, we may ask for further satisfactory evidence that the insured meets all requirements for the accelerated benefit.

What is the effect on an insured's coverage of the receipt of an accelerated benefit?

If a certificate holder elects to accelerate the full amount of an insured's death benefit, the insured's coverage and all other benefits under the certificate and any certificate supplements which apply to that insured will end. If the insured is a certificate holder, any other individual insured under his or her certificate will be allowed to convert any such insurance to a policy of individual life insurance according to the conversion right section of the group policy to which this rider is attached.

If a partial accelerated benefit is chosen, coverage will remain in force and premiums will be reduced accordingly. The remaining amount of insurance under the certificate will be the full amount of insurance minus the amount of insurance that was accelerated.

How will we pay the accelerated benefit?

We will pay the accelerated benefit in one lump sum or in any other mutually agreeable manner.

To whom will we pay accelerated benefits?

All accelerated benefits will be paid to the certificate holder who requested the accelerated payment unless the certificate holder validly assigns them otherwise. If such certificate holder dies before all payments have been made, we will pay the remainder to the insured's beneficiary named under the certificate. Payment will be made in one lump sum which will be the present value of the payments that remain, using the interest rate we use to determine the payments.

Termination

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

An insured's coverage ends on the date the insured is no longer covered for life insurance under the group policy.

When does this rider terminate?

This rider will terminate on the earlier of:

- (1) the date we receive a written request to cancel this rider; or
- (2) the date the group policy is terminated.