

Group Term Life Amendment #2

Securian Life Insurance Company

400 Robert Street North • St. Paul, Minnesota 55101-2098

To be attached to and made a part of Group Policy number 70466, issued by Securian Life Insurance Company to University of Rochester. This amendment is effective as of the dates shown below.

Effective July 1, 2024:

The amount of basic AD&D insurance for Groups 1, 2, 3a and 3b is amended to read as follows:

Groups 1, 2, 3a, 3b An amount equal to the amount of university-paid life insurance for which the employee is insured under the group policy.

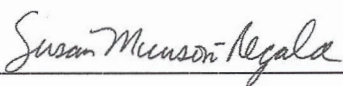
Effective September 1, 2024:

A new Group 9 – High-Level Faculty Member is added to the policy.

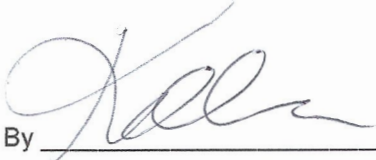
As a result of this amendment, the following changes are made to the Group Policy:

- The Certificate of Insurance Schedule is replaced in its entirety with the attached Certificate of Insurance Schedule.
- The Group Term Life Certificate of Insurance bearing the date of September 1, 2024 replaces the prior attached certificate.

Agreed to by Securian Life Insurance Company on October 24, 2024.

By  LL
Vice President and Actuary

Agreed to by the policyholder:

By 
Title CHRO
Date 12/10/24

Certificates of Insurance Schedule

The following Certificates of Insurance are attached to and made a part of this policy:

Current Certificates

<u>Certificate Title</u>	<u>Certificate Form Number</u>	<u>Applies To</u>	<u>Effective Date</u>
Employee Group Term Life Certificate of Insurance	19-31702.31	Groups 1, 2, 3a, 3b, 5, 6, 7, 8 and 9	September 1, 2024

Historical Certificates

<u>Certificate Title</u>	<u>Certificate Form Number</u>	<u>Applies To</u>	<u>Effective Date</u>
Employee Group Term Life Certificate of Insurance	19-31702.31	Groups 1, 2, 3a, 3b, 5, 6, 7 and 8	July 1, 2024, as revised on July 11, 2024
Employee Group Term Life Certificate of Insurance	19-31702.31	Groups 1, 2, 3a, 3b, 5, 6, 7 and 8	July 1, 2024

Group Term Life Amendment #1

Securian Life Insurance Company

400 Robert Street North • St. Paul, Minnesota 55101-2098


To be attached to and made a part of Group Policy number 70466, issued by Securian Life Insurance Company to University of Rochester. This amendment is effective as of July 1, 2024.

As a correction to the policy, the Accidental Death and Dismemberment Certificate Supplement is not portable.

As a result of this amendment, the following changes are made to the Group Policy:

- The Certificate of Insurance Schedule is replaced in its entirety with the attached Certificate of Insurance Schedule.
- The Group Term Life Certificate of Insurance bearing the date of July 1, 2024, as revised on July 11, 2024, replaces the prior attached certificate.

Agreed to by Securian Life Insurance Company on July 11, 2024.

By  SEM
Vice President and Actuary

Agreed to by the policyholder:

Approved on 8/19/2024 via email from authorized representative of the policyholder.

Certificates of Insurance Schedule

The following Certificates of Insurance are attached to and made a part of this policy:

Current Certificates

<u>Certificate Title</u>	<u>Certificate Form Number</u>	<u>Applies To</u>	<u>Effective Date</u>
Employee Group Term Life Certificate of Insurance	19-31702.31	Groups 1, 2, 3a, 3b, 5, 6, 7 and 8	July 1, 2024, as revised on July 11, 2024

Historical Certificates

<u>Certificate Title</u>	<u>Certificate Form Number</u>	<u>Applies To</u>	<u>Effective Date</u>
Employee Group Term Life Certificate of Insurance	19-31702.31	Groups 1, 2, 3a, 3b, 5, 6, 7 and 8	July 1, 2024

Group Term Life Insurance Policy

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

POLICYHOLDER: University of Rochester

POLICY NUMBER: 70466

POLICY SITUS: This policy was issued and delivered in New York.

POLICY EFFECTIVE DATE: July 1, 2024

POLICY ANNIVERSARY DATE: January 1 of each year beginning January 1, 2025

POLICY PREMIUM DUE DATE(S): The first day of each month

Read Your Policy Carefully

This policy was issued to the policyholder on the effective date shown above. 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.

Signed for Securian Life Insurance Company at St. Paul, Minnesota on the effective date.

Renee D. Montz

Secretary

Stephen M. Hefner

President

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GROUP TERM LIFE INSURANCE POLICY • NONPARTICIPATING •
ANNUALLY RENEWABLE • CONTRIBUTORY AND NON-CONTRIBUTORY

Certificates of Insurance Schedule

The following Certificates of Insurance are attached to and made a part of this policy:

<u>Certificate Title</u>	<u>Certificate Form Number</u>	<u>Applies To</u>	<u>Effective Date</u>
Employee Group Term Life Certificate of Insurance	19-31702.31	Groups 1, 2, 3a, 3b, 5, 6, 7 and 8	July 1, 2024

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.

contributory insurance

Insurance for which an employee is required to make premium contributions.

noncontributory insurance

Insurance for which an employee is not required to make premium contributions.

policyholder

The owner of the group policy as shown on the first page of this policy.

we, our, us

Securian Life Insurance Company.

written

All references in the certificate to "in writing", "written" shall include any method made available by the policyholder and us, including digital, electronic or paper.

you, your

The policyholder.

General Information

What is your agreement with us?

This policy, the certificate and your application contain the entire insurance contract between you and us. Any statements you make will be considered representations and not warranties. Only provisions contained in this policy, the certificate, any certificate supplement, amendment or endorsement signed by you and us, or in the copy of your application shall not affect the rights of you, the insured or his or her 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.

Are employees of associated companies eligible for insurance under this policy?

Yes. Employees of associated companies may be eligible for insurance under 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.

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 first page of this policy. We apply premiums consecutively to keep the insurance in force.

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 10% or more.

Premiums for contributory coverage are based on your attained age and increase with age. We will notify the policyholder 31 days in advance of a change in premium rates.

What factors do we consider when premium is changed?

If premium is changed, the change will be based upon future estimated or emerging experience, which factors include: interest rates, mortality, taxes, our expenses and profit considerations.

Can a premium be paid after the date it is due?

Yes. This policy has a 31-day grace period. If a premium is not paid on or before the date it is due, that premium may be paid during the 31-day period following the due

date. The insurance under this policy will remain in effect during the 31-day grace period.

Can the premium be adjusted?

Yes. An adjustment will be made to the premium on each due date for insurance which was effective or terminated before the most recent due date, but not reflected in prior premium payments, so that the correct premium is paid.

Termination

When does this group policy terminate?

You may terminate this group policy by giving us 31 days prior written notice. We reserve the right to terminate this policy on the earlier of the following to occur:

- (1) 31 days (the grace period) after the due date of any premiums which are not paid; or
- (2) any policy anniversary so long as we provide you 31 days notice of our intent to terminate this policy.

Additional Information

Can insurance coverage be contested?

After two years from its date of issue, we cannot contest this policy except for the non-payment of premiums by you. If we discover a material misrepresentation you made, we may contest this policy. However, any statement you make will not be used to contest an individual certificate holder's coverage.

Are you required to maintain records?

Yes. You are required to maintain adequate records of any information necessary for us to administer this policy. We will have reasonable access to audit such records in order to administer the policy.

If an administration or clerical error is made in keeping records on or administering the insurance under this policy, it will not affect otherwise valid insurance. Any clerical error is subject to the incontestability clause.

A clerical or administrative error, however, does not continue insurance which is otherwise stopped, make insurance effective when it should not have been or change the amount of insurance provided by the provisions of this policy and no claim shall be paid on amounts put into effect as a result of a past clerical or administrative error. If an error causes a change in premium payment, a fair adjustment will be made.

Will a certificate of insurance be provided for each insured?

Yes. We will provide you with a certificate of insurance for delivery to each insured. The certificate will include information regarding the principal provisions of his or her coverage.

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 New York, we will file a revised provision for approval. Any amendment will be signed by you and us. Nothing in this group policy invalidates or impairs any rights or benefits as stated in the certificate or granted by New York law.

Does ownership of this policy entitle you to membership in Securian Life Insurance Company's parent company?

No. The ultimate parent company of Securian Life Insurance Company is a mutual insurance holding company. This policy does not entitle you to any holding company membership rights.

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