

 <small>- INCORPORATED -</small>	Guardian Life Plan Year Effective January 1, 2016	
PLAN NAME	BASIC LIFE	VOLUNTARY TERM LIFE
COVERAGE AMOUNT	200% of your annual earnings	\$10,000 increments
MAXIMUM BENEFIT	\$200,000	\$200,000
ACCIDENTAL DEATH AND DISMEMBERMENT	Equal to one times your life benefit	Not Applicable
SPOUSE BENEFIT <small>Terminates at age 70</small>	Not Applicable	100% of employee coverage to a maximum of \$50,000
CHILD BENEFIT <small>14 days to 23 years (25 if full time student)</small>	Not Applicable	10% of employee coverage to a maximum of \$10,000
GUARANTEE ISSUE <small>The "guarantee" means you are not required to answer health questions to qualify for coverage up to and including the specified amount, when you sign up for coverage during the initial enrollment period</small>	Underwriting may be required, depending on amount and/or age	Up to \$150,000 per Employee \$10,000 per Spouse \$10,000 per Children
PORTABILITY <small>Allows you to take your coverage with you if you terminate employment</small>	Yes, with age and other restrictions, including evidence of insurability	Yes, with age and other restrictions
CONVERSION <small>Allows you to continue your coverage after the group plan has terminated</small>	Yes, with restrictions	Yes, with restrictions
ACCELERATED LIFE BENEFIT <small>A lump sum benefit is paid to you if you are diagnosed with a terminal condition as defined by the plan</small>	Not Applicable	Yes
WAIVER OF PREMIUMS <small>Premium will not need to be paid if you are totally disabled</small>	For employees disabled prior to age 60, if conditions are met	For employees disabled prior to age 60, with premiums waived until age 65, if conditions are met
BENEFIT REDUCTIONS <small>Benefits are reduced by a certain percentage as employee ages</small>	50% at age 70	35% at age 65 60% at age 70 75% at age 75 85% at age 80
EMPLOYEE COST PER PAY PERIOD	The cost of the basic life coverage is provided to you at no cost by DieselUSAGroup.	Based on age and amount of life insurance benefit Increase annually after you enter next five year age group See following pages for rates

Note: This is a general summary of benefits. Please consult the certificate of coverage for complete details of the plan. If there is a discrepancy between this summary and the actual certificate will prevail.