



# Your APA Group Term Life & Voluntary Accidental Death & Dismemberment Insurance Plan

Insured by MetLife Effective  
November 1, 2023

The Group Term Life and Voluntary Accidental Death and Dismemberment Insurance coverages are underwritten by MetLife, One Madison Avenue, New York, New York 10010-369075. This brochure is intended to be a summary of your benefits and does not include all plan provisions, exclusions and limitations. A Booklet-Certificate with complete plan information, including limitations and exclusions, will be provided. If there is a discrepancy between this document and the Booklet-Certificate issued by MetLife, the terms of the Booklet-Certificate will govern.

## For Active Members

### **INSURANCE AMOUNT**

APA members may apply for amounts of coverage from \$50,000 to \$1,500,000. In addition, APA members may apply for:

- Spouse coverage in amounts of up to 50 percent of the member's coverage up to \$500,000; and
- Coverage for dependent children in the amount of \$10,000.

### **ELIGIBILITY**

Active APA members may apply for coverage or increase coverage at any time. **You must be on active flying status on the date coverage starts (not on paid or unpaid sick leave).** Coverage will become effective only when approved by MetLife based on the individual's evidence of insurability.

New APA members may apply for up to \$150,000 of coverage without proof of insurability as long as the application is made within twelve (12) months of the date you first become eligible to be an APA member. If you apply after twelve (12) months, you will need to prove insurability.

Retired APA members may also be eligible to continue insurance for as long as they desire.

### **SPOUSE COVERAGE**

An APA member may purchase insurance coverage for a spouse whose evidence of insurability is satisfactory to MetLife in an amount of up to 50% of the member's coverage amount up to \$500,000. The APA member must participate for the spouse to enroll.

### **DEPENDENT CHILD COVERAGE**

An insured member may request coverage for dependents. Child/children coverage is provided to age 25. The coverage amount is \$10,000 per child. The monthly premium is \$1.19 per family and covers all eligible dependent children.

### **CONTINUATION FOLLOWING DEATH OF MEMBER**

When your insurance ends or reduces, you may be able to convert some or all of your insurance to permanent, "non-term" life insurance. Please contact the Claims Administrator or MetLife within 30 days of your loss of coverage.

### **UNDERWRITING STANDARDS**

APA members and their dependents who are requesting coverage or increasing their coverage must go to the BenefitElect portal and complete the appropriate health questionnaire. In addition to the information contained in the enrollment form and the health questionnaire, the underwriter may also require additional medical history information in some cases.

If the above information reveals a potential health problem, you will be requested to complete the "statement of health long form" questionnaire located within the BenefitElect website. MetLife reserves the right to request a routine medical examination at MetLife's expense. They will contact you or your spouse if an examination is required. The underwriting and application process normally requires four to five weeks.

---

**CONVERSION PRIVILEGE**

When your insurance ends or reduces, you may be able to convert some or all of your insurance to permanent, "non-term" life insurance. Please contact the Claims Administrator or MetLife within 30 days of your loss of coverage.

---

**BENEFICIARY**

You may select or change your beneficiary at any time by notifying the Claims Administrator in writing. Members are automatically the beneficiary of their dependent's benefit. A trust may be the owner and/or beneficiary of the benefits.

---

**FORMS OF BENEFIT SETTLEMENTS**

Benefit payments are usually paid in a Total Control Account. You or your beneficiary may select an alternate method of periodic income payments, with equal monthly installments of all or part of the proceeds (with interest) paid over a fixed period of time or a single sum. Several other modes of settlement are also available and may be selected by mutual agreement with MetLife.

---

**HOW YOUR INSURANCE TERMINATES**

Your coverage will terminate when:

- A. Your APA membership terminates; or
- B. The group master insurance policy terminates; or
- C. You withdraw from the plan or fail to pay the required premium; or,
- D. You have been furloughed for 24 months.

Spouse coverage will terminate when:

- A. The pilot is no longer a member of APA; or
- B. The group master insurance policy terminates; or
- C. The premium for member or spouse is not paid or if the member or spouse withdraws from the plan; or,
- D. You divorce.

Dependent child coverage will terminate when:

- A. The group master insurance policy terminates; or
- B. The child no longer qualifies as a dependent; or
- C. The member's coverage terminates; or
- D. The child reaches the age of 25. This limitation does not apply to incapacitated children.

---

**RENEWABILITY**

Your insurance will be renewed as long as you pay the required premiums, continue your APA membership and the plan remains in effect.

---

**REDUCTION IN COVERAGE**

There are two reductions when you retire:

- A. At retirement coverage reduces to the lesser of the amount of life insurance in effect immediately prior to retirement or \$125,000.
- B. At age 75 coverage reduces to the lesser of the amount of life insurance in effect immediately prior to age 75 or \$62,500.

There are three reductions for your spouse when you retire:

- A. When the benefit amount for a member reduces, the amount of spouse life coverage is reduced to no more than 100% of the member's coverage.
- B. At age 65 coverage reduces to the lesser of the amount of life insurance in effect immediately prior to the date the spouse attained age 65 or \$125,000.
- C. At age 75 coverage reduces to the lesser of the amount of life insurance in effect immediately prior to the date the spouse attained age 75 or \$62,500.

---

**EXCLUSIONS**

The plan will not cover death on account of suicide within two years after the individual's effective date nor will it pay the amount of an increase if death is on account of suicide within two years after the increase is made. Premiums for any amount not payable on account of this exclusion will be returned. While no other exclusions currently apply, APA reserves the right to modify the exclusions for coverage under the plan subject to state approval.

---

**MILITARY FLYING**

This policy will pay for death resulting from any military operation, including reserve or active duty flying.

---

**INDIVIDUAL CERTIFICATES**

The group master policy is between the Allied Pilots Association as plan sponsor and MetLife. In accordance with the policy, an individual certificate will be issued to each insured member describing the benefits and rights.

## **AUTOMATIC MONTHLY PAYMENT**

---

Participating members pay the required premiums for themselves and their covered dependents. The method of premium payment is through an automatic monthly deduction from the financial institution of your choice.

## **BIRTHDATE RATE CHANGES**

---

All age band rate adjustments will be applied at the end of the calendar year in which the plan participant attains the specified age unless the age band rate adjustment occurs coincident with a benefit reduction.

## **POSSIBLE REDUCTION IN COST**

---

The gross premium rates reflected in the schedule on pages 7 and 8 have been determined to be adequate to support “average” claims experience. To the extent that the plan has better-than-average claims experience and the gross premium rates provide more funds than the plan will be required to pay in benefits and expenses, the plan has been designed to refund potential excess premiums following a deposit to the reserves.

## **GRANDFATHERED COVERAGE PARTICIPANTS**

---

If you desire to move to the Enhanced Coverage, you may do so at anytime pending acceptance of your application and satisfactory evidence of insurability to MetLife. Once you change to the Enhanced Coverage, you may not move back to the Grandfathered Coverage.

# **Voluntary Accidental Death & Dismemberment Insurance For Active Members**

Eligible participants in the Enhanced Life Insurance Coverage may purchase Voluntary Accidental Death & Dismemberment Insurance (“VADD”) coverage for themselves and their families for an additional premium. This coverage is very similar to the Company’s Voluntary Personal Accident Insurance (VPAI) coverage. The following describes many of the key features of this coverage:

## **ELIGIBILITY**

---

This VADD coverage is available to all participants in the Enhanced Life Insurance Coverage who are on active flight status at the time the coverage becomes effective. (Participants in the Grandfathered Coverage are not eligible for this VADD coverage.) This VADD coverage terminates when you are no longer eligible for enhanced life coverage or you retire, if earlier.

## **FAMILY COVERAGE**

---

APA Members who purchase VADD coverage for themselves have the option to purchase family coverage for their spouse and dependent children.

## **COVERAGE AMOUNTS**

---

Eligible participants may purchase coverage in the amounts of \$250,000 or \$500,000 for themselves. Family coverage is a percentage of the amount of the member’s coverage and is based on the composition of the member’s family at the time of loss. The following chart shows the family coverage benefits:

Spouse Only Coverage	<b>70%</b> of member amount
Spouse and Children:	
Spouse	<b>60%</b> of member amount
Children	<b>10%</b> of member amount
Children Only	<b>25%</b> of member amount

## **MONTHLY PREMIUMS**

---

Eligible participants electing this optional VADD coverage must make an additional premium depending on the type of coverage selected. The cost of this optional VADD coverage is \$.02 per \$1,000 of coverage for member only coverage and \$.03 per \$1,000 of coverage for family coverage. The following chart shows the monthly premiums:

Type of Coverage	Monthly Premium	
	\$250,000	\$500,000
Member Only	\$7.50	\$15.00
Family Coverage	\$10.00	\$20.00

## **BENEFITS PROVIDED**

---

This VADD coverage pays a benefit depending on the type of loss sustained by the participant. The following chart summarizes the benefit paid for each type of loss:

<b>The VADD coverage pays...</b>	<b>For the loss of...</b>
Full (100%) Benefit Amount	Life; Two or more members; Speech <u>and</u> Hearing; Quadriplegia; Hemiplegia; or Paraplegia
3/4 Benefit Amount	One Arm <u>or</u> One Leg
1/2 Benefit Amount	Hand, Foot, Eye, Speech, <u>or</u> Hearing
1/4 Benefit Amount	Thumb <u>and</u> Index Finger on <u>same</u> hand

## **ADDITIONAL BENEFITS**

---

In addition to the basic benefits described above, the VADD coverage provides increased benefits in certain circumstances. Among the additional benefits are:

- Common disaster benefit;
- Coma benefit;
- Spouse retraining benefit;
- Seat belt benefit;
- Air bag benefit;
- Brain damage benefit;
- Exposure benefit;
- Presumption of death benefit;
- Burn benefit and Felonious Assault;
- Educational benefits for dependent children;
- Child care benefit for up to five years following death of member; and
- Limited-term extension of family coverage at no cost following death of member.

## **COVERAGE EXCLUSIONS**

---

This VADD coverage does not cover any loss caused by or resulting from any of the following:

- (1) physical or mental illness or infirmity, or the diagnosis or treatment of such illness or infirmity;
- (2) infection, other than infection occurring in an external accidental wound;
- (3) suicide or attempted suicide;
- (4) intentionally self-inflicted injury, or any attempt to inflict such injuries;
- (5) service in the armed forces of any country or international authority for more than 30 days, except the United States National Guard active duty for training;
- (6) committing or attempting to commit a felony;
- (7) the voluntary (personal) intake or use by any means of:
  - any drug, medication or sedative, unless it is:
  - taken or used as prescribed by a Physician, or
  - an "over the counter" drug, medication or sedative taken as directed;
  - alcohol in combination with any drug, medication, or sedative; or
  - poison, gas, or fumes; or
- (8) war, whether declared or undeclared; or act of war, insurrection, rebellion;
- (9) travel or flight in any vehicle or device for aerial navigation including boarding or alighting therefrom,
  - (a) while being used for experimental purposes (performing test flights as a pilot for or on behalf of American Airlines are covered under this VADD coverage); or
  - (b) while operating, learning to operate, or serving as a crewmember in any aircraft other than an aircraft owned or operated by or on behalf of American Airlines (*Please note that operating an aircraft owned or leased by You or acting as a flight instructor in an aircraft other than an aircraft owned or operated by or on behalf of American Airlines is covered under this policy*).

## **FUNDING**

---

The VADD Coverage is provided under a fully insured option to participants with Enhanced Group Life Insurance Coverage. This means that all claims are paid from MetLife reserves and not from the reserves of the APA Group Term Life and Voluntary Accidental Death & Dismemberment Insurance Plan.

## **BENEFICIARY**

---

Members may change their beneficiary designations at any time. The beneficiary for family coverage shall automatically be the member.

## **VOLUNTARY ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE NOTICE DISCLAIMER:**

This policy provides ACCIDENT insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Insurance Department.

IMPORTANT NOTICE: THIS POLICY DOES NOT PROVIDE COVERAGE FOR SICKNESS.

## **Enrollment Steps**

- **Determine Your Life Insurance Needs**

In determining your total life insurance needs, you should forecast your family's future cash needs to maintain their lifestyle. Extra requirements for education and long-term care/security should also be considered.

- **Determine Your Current Coverage**

When you determine your current coverage available, you should not consider accidental death and dismemberment benefits as a source of funds for your insurable needs. Your American Airlines-provided coverages should be included to the extent it will be provided.

- **Determine the Supplemental Coverage**

Your insurance needs less your normal death coverage determines your supplemental coverage need. This is the coverage that should be provided by the APA Group Term Plan.

- **Complete the Enrollment Form**

To obtain an enrollment form, contact NGS Insurance Agency at 800-298-8793 or the APA Benefits Department at 800-323-1470 extens

- **Complete the Deduction Authorization/ACH Form**

- **Complete the Short-Form Health Questionnaire**

(for first-time coverage or increased coverage)

- **Obtain a copy of your latest FAA physical, Form 8500-8 (both sides) from your FAA physician**

Return the completed Enrollment Form, Health Questionnaire, Financial Institution Deduction Authorization Form and a copy of your latest FAA physical in the return envelope to NGS.

Should you have any questions, please do not hesitate to call or write NGS.

## **Value Added Services**

This insurance comes with a variety of added features that can provide assistance to you and your family members today and during a difficult time.

### **Will Preparation Service**

#### **To help ensure your decisions are carried out**

Like life insurance, a carefully prepared Will (Simple, Complex or Living) along with a Power of Attorney are important. With a Will, you can define your most important decisions such as who will care for your children or inherit your property.

Living Will:

- Ensures your wishes are carried out, and protects your loved ones from making these very difficult and personal medical decisions by themselves.
- Also called an "advanced directive," it is a document authorized by statutes in all states. A person appoints someone as his/her proxy or representative to make decisions on maintaining extraordinary life-support if the person becomes incapacitated so that he or she cannot communicate his or her wishes.

Power of Attorney:

- Allows you to plan ahead by designating someone you know and trust to act on your behalf in the event of unexpected occurrences or if you become incapacitated. It is a written document that grants an individual the power to act on the grantor's behalf.

By enrolling in the plan, you will have access to Hyatt Legal Plans' network of 11,500+ participating attorneys.\* When you use a participating plan attorney there will be no charge for the services. Simply call Hyatt Legal Plans' Toll-Free Number, 1-800-821-6400, Monday – Friday, 8:00 a.m. – 6:00 p.m. Eastern Time to speak to a representative. You'll be asked to provide Allied Pilots Association's group #113529 and the last four digits of your Social Security number.

\* You also have the flexibility of using an attorney who is not participating in the Hyatt Legal Plans' network and being reimbursed for covered services according to a set fee schedule. In that case you will be responsible for any attorney's fees that exceed the reimbursed amount.

## **MetLife Estate Resolution Services<sup>SM</sup> — ERS**

---

### **Personal service and compassion to help your beneficiaries and others manage your estate during their time of need**

MetLife Estate Resolution Services is a valuable service offered under the plan. A Hyatt Legal Plan attorney will consult your beneficiaries by telephone or in person regarding the probate process for your estate. The attorney will also handle the probate of your estate for your executor or administrator. When your estate representative uses a participating plan attorney there will be no charge for the services. This can help alleviate the financial and administrative burden for your loved ones in their time of need.

## **MetLife Advice<sup>\*\*</sup>**

---

### **Assistance identifying solutions for your financial situations**

MetLife Advice is a service designed to help provide assistance in making financial decisions based on the major events in your life such as marriage, the birth of a child, purchase of a home, death of a spouse or retirement. Don't let your financial security take a back seat. Making the important financial decisions is easier with the support of a dedicated MetLife Advice Specialist. Call today: 1-877-ASK-MET7 (1-877-275-6387).

\*\*MetLife Advice Specialists are Financial Services Representatives of MetLife or New England Financial, a MetLife company.

## **MetLife Advice for Beneficiaries — Delivering The Promise<sup>®</sup>**

---

### **For support when beneficiaries need it most**

Delivering The Promise<sup>®</sup> is a service designed to provide beneficiaries with the support and assistance they need during an especially difficult time. Services include assistance filing life insurance claims and consultation to help with the financial details and questions that arise upon the loss of a loved one.

## **MetLife's Center for Special Needs Planning (Formerly MetDESK)**

---

### **Comprehensive Planning Assistance for Dependents with Special Needs**

MetLife's Center for Special Needs Planning is a service that works with families who have dependents with special needs. To help them prepare for the complex financial, social, emotional, and educational issues facing them, MetLife's Center for Special Needs Planning helps families with financial planning strategies.

## **Travel Assistance<sup>®</sup>**

---

**A Travel Assistance and Identity Theft benefit is available when you enroll in MetLife's AD&D coverage.**

- **Travel Assistance:** Would you know who to call if you needed help while traveling? With Travel Assistance services, offered on your AD&D coverage, you'll have extra peace of mind whenever you travel. This service provides you and your dependents with medical, legal, transportation and financial assistance 24 hours a day, 365 days a year, when you are more than 100 miles away from home. Travel Assistance includes concierge assistance designed to fulfill various travel and entertainment requests as well as arrange-ments for business related services. Please visit the AXA Web site for more information <http://webcorp.axa-assistance.com>
- **Identity Theft Solutions:** While you're home or away, you can take advantage of this valuable benefit now packaged with Travel Assistance. You will be provided with educational tools and resources to help prevent an identity theft occurrence. If you become a victim, you will receive personal assistance 24 hours a day, 365 days a year, to help alleviate your stress and time burden.

**NOTE:** These services are brought to you by or through MetLife because of your participation in the APA Group Term Life and Voluntary Accidental Death & Dismemberment Insurance Plan. Participation in any of these services is voluntary. Once you are approved for life insurance you will be sent information on how to access these Value Added Services. MetLife will not receive information on how to contact you regarding these services, it will be up to you to contact them.

**ALLIED PILOTS ASSOCIATION  
Group Term Life & Voluntary Accidental Death & Dismemberment  
Insurance Plan  
APA Benefits Department 817-302-2140**

**CLAIMS ADMINISTRATOR:  
NGS Insurance Agency, Inc.  
P. O. Box 830846  
Richardson, Texas 75083-0846  
800-298-8793**

# Life Insurance Benefit and Premium Schedule – Effective November 1, 2023 ACTIVE MEMBERS

	Option 1	Option 2	Option 3	Option 4	Option 5	Option 6	Option 7	Option 8	Option 9
<b>Active Member:<sup>1</sup></b>									
BENEFIT AMT.	\$50,000	\$100,000	\$150,000	\$250,000	\$375,000	\$500,000	\$750,000	\$1,000,000	\$1,500,000
AGE:	MONTHLY PREMIUM:								
35 & under	\$1.75	\$3.50	\$5.25	\$8.75	\$13.13	\$17.50	\$26.25	\$35.00	\$52.50
36-40	\$1.95	\$3.90	\$5.85	\$9.75	\$14.63	\$19.50	\$29.25	\$39.00	\$58.50
41-45	\$3.00	\$6.00	\$9.00	\$15.00	\$22.50	\$30.00	\$45.00	\$60.00	\$90.00
46-50	\$5.35	\$10.70	\$16.05	\$26.75	\$40.13	\$53.50	\$80.25	\$107.00	\$160.50
51-55	\$7.65	\$15.30	\$22.95	\$38.25	\$57.38	\$76.50	\$114.75	\$153.00	\$229.50
56-59	\$15.35	\$30.70	\$46.05	\$76.75	\$115.13	\$153.50	\$230.25	\$307.00	\$460.50
60-64	\$30.05	\$60.10	\$90.15	\$150.25	\$225.38	\$300.50	\$450.75	\$601.00	\$901.50

<sup>1</sup> Disabled Members are considered Active until age 65 or Retirement (if earlier).

## Spouse Age 64 and Under:

	\$25,000	\$50,000	\$75,000	\$125,000	\$187,500	\$250,000	\$375,000	\$500,000	\$500,000
BENEFIT AMT.	\$25,000	\$50,000	\$75,000	\$125,000	\$187,500	\$250,000	\$375,000	\$500,000	\$500,000
AGE:	MONTHLY PREMIUM:								
35 & under	\$0.88	\$1.75	\$2.63	\$4.38	\$6.56	\$8.75	\$13.13	\$17.50	\$17.50
36-40	\$0.98	\$1.95	\$2.93	\$4.88	\$7.31	\$9.75	\$14.63	\$19.50	\$19.50
41-45	\$1.50	\$3.00	\$4.50	\$7.50	\$11.25	\$15.00	\$22.50	\$30.00	\$30.00
46-50	\$2.68	\$5.35	\$8.03	\$13.38	\$20.06	\$26.75	\$40.13	\$53.50	\$53.50
51-55	\$3.83	\$7.65	\$11.48	\$19.13	\$28.69	\$38.25	\$57.38	\$76.50	\$76.50
56-59	\$7.68	\$15.35	\$23.03	\$38.38	\$57.56	\$76.75	\$115.13	\$153.50	\$153.50
60-64	\$15.03	\$30.05	\$45.08	\$75.13	\$112.69	\$150.25	\$225.38	\$300.50	\$300.50

## Spouse Age 65 to 74:<sup>2</sup>

	\$25,000	\$50,000	\$75,000	\$125,000	\$125,000	\$125,000	\$125,000	\$125,000	\$125,000
BENEFIT AMT.	\$25,000	\$50,000	\$75,000	\$125,000	\$125,000	\$125,000	\$125,000	\$125,000	\$125,000
AGE:	MONTHLY PREMIUM:								
65	\$15.03	\$30.05	\$45.08	\$75.13	\$75.13	\$75.13	\$75.13	\$75.13	\$75.13
66-69	\$24.53	\$49.05	\$73.58	\$122.63	\$122.63	\$122.63	\$122.63	\$122.63	\$122.63
70-74	\$63.60	\$127.20	\$190.80	\$318.00	\$318.00	\$318.00	\$318.00	\$318.00	\$318.00

## Spouse After Age 75:<sup>3</sup>

	\$25,000	\$50,000	\$62,500	\$62,500	\$62,500	\$62,500	\$62,500	\$62,500	\$62,500
BENEFIT AMT.	\$25,000	\$50,000	\$62,500	\$62,500	\$62,500	\$62,500	\$62,500	\$62,500	\$62,500
AGE:	MONTHLY PREMIUM:								
75-79	\$103.78	\$207.55	\$259.44	\$259.44	\$259.44	\$259.44	\$259.44	\$259.44	\$259.44
80+	\$108.05	\$216.10	\$270.13	\$270.13	\$270.13	\$270.13	\$270.13	\$270.13	\$270.13

<sup>2</sup> Benefit amount reduces to the lesser of the amount of coverage in effect immediately prior to age 65 or \$125,000.

<sup>3</sup> Benefit amount reduces to the lesser of the amount of coverage in effect immediately prior to age 75 or \$62,500.

## Dependent Child or Children:

\$10,000 of benefit per child — single premium of \$1.19 per month for all covered dependent children.

# Life Insurance Benefit and Premium Schedule – Effective November 1, 2023

## RETIRED MEMBERS AND RETIRED EMPLOYEES

	Option 1	Option 2	Option 3	Option 4	Option 5	Option 6	Option 7	Option 8
<b>Retired Member Age 74 and Under:<sup>1</sup></b>								
BENEFIT AMT.	\$50,000	\$100,000	\$125,000	\$125,000	\$125,000	\$125,000	\$125,000	\$125,000
AGE:	MONTHLY PREMIUM:							
50	\$5.35	\$10.70	\$13.38	\$13.38	\$13.38	\$13.38	\$13.38	\$13.38
51-55	\$7.65	\$15.30	\$19.13	\$19.13	\$19.13	\$19.13	\$19.13	\$19.13
56-59	\$15.35	\$30.70	\$38.38	\$38.38	\$38.38	\$38.38	\$38.38	\$38.38
60-65	\$30.05	\$60.10	\$75.13	\$75.13	\$75.13	\$75.13	\$75.13	\$75.13
66-69	\$49.05	\$98.10	\$122.63	\$122.63	\$122.63	\$122.63	\$122.63	\$122.63
70-74	\$127.20	\$254.40	\$318.00	\$318.00	\$318.00	\$318.00	\$318.00	\$318.00

<b>Retired Member After Age 75:<sup>2</sup></b>								
BENEFIT AMT.	\$50,000	\$62,500	\$62,500	\$62,500	\$62,500	\$62,500	\$62,500	\$62,500
AGE:	MONTHLY PREMIUM:							
75-79	\$207.55	\$259.44	\$259.44	\$259.44	\$259.44	\$259.44	\$259.44	\$259.44
80+	\$216.10	\$270.13	\$270.13	\$270.13	\$270.13	\$270.13	\$270.13	\$270.13

<sup>1</sup> Benefit amount reduces to the lesser of the amount of coverage in effect immediately prior to retirement or \$125,000.

<sup>2</sup> Benefit amount reduces to the lesser of the amount of coverage in effect immediately prior to retirement or \$62,500.

<b>Spouse Age 74 and Under:<sup>3</sup></b>								
BENEFIT AMT.	\$25,000	\$50,000	\$75,000	\$125,000	\$125,000	\$125,000	\$125,000	\$125,000
AGE:	MONTHLY PREMIUM:							
35 and under	\$0.88	\$1.75	\$2.63	\$4.38	\$4.38	\$4.38	\$4.38	\$4.38
36-40	\$0.98	\$1.95	\$2.93	\$4.88	\$4.88	\$4.88	\$4.88	\$4.88
41-45	\$1.50	\$3.00	\$4.50	\$7.50	\$7.50	\$7.50	\$7.50	\$7.50
46-50	\$2.68	\$5.35	\$8.03	\$13.38	\$13.38	\$13.38	\$13.38	\$13.38
51-55	\$3.83	\$7.65	\$11.48	\$19.13	\$19.13	\$19.13	\$19.13	\$19.13
56-59	\$7.68	\$15.35	\$23.03	\$38.38	\$38.38	\$38.38	\$38.38	\$38.38
60-65	\$15.03	\$30.05	\$45.08	\$75.13	\$75.13	\$75.13	\$75.13	\$75.13
66-69	\$24.53	\$49.05	\$73.58	\$122.63	\$122.63	\$122.63	\$122.63	\$122.63
70-74	\$63.60	\$127.20	\$190.80	\$318.00	\$318.00	\$318.00	\$318.00	\$318.00

<b>Spouse After Age 75:<sup>4</sup></b>								
BENEFIT AMT.	\$25,000	\$50,000	\$62,500	\$62,500	\$62,500	\$62,500	\$62,500	\$62,500
AGE:	MONTHLY PREMIUM:							
75-79	\$103.78	\$207.55	\$259.44	\$259.44	\$259.44	\$259.44	\$259.44	\$259.44
80+	\$108.05	\$216.10	\$270.13	\$270.13	\$270.13	\$270.13	\$270.13	\$270.13

<sup>3</sup> Benefit amount reduces to the lesser of the amount of coverage in effect immediately prior to pilot's or employee's retirement or \$125,000.

<sup>4</sup> Benefit amount reduces to the lesser of the amount of coverage in effect immediately prior to age 75 or \$62,500.

### Dependent Child or Children:

\$10,000 of benefit per child — Single premium of \$1.19 per month for all covered dependent children.

Please note this chart shows the Life Insurance amounts and premiums available to retirees. Retirees cannot join the plan or increase Life Insurance amounts. Retirees are not eligible for the Voluntary Accidental Death and Dismemberment Insurance coverage.