

VOLUNTARY TERM LIFE INSURANCE BENEFITS SUMMARY



For Employees of Cardington Yutaka Technologies

ELIGIBILITY - ALL ELIGIBLE EMPLOYEES

Eligibility Requirement	You must be actively at work (able to perform all normal duties of your job) to be eligible for coverage.
Minimum Work Hours	You must be working a minimum of 30 hours per week to be eligible for coverage.
Coverage Payment	You pay 100% of the premium for this coverage through easy payroll deduction.

COVERAGE GUIDELINES

	Employee
Minimum	1X annual salary
Maximum	3X annual salary, up to \$500,000
Guarantee Issue Amount	3X annual salary, up to \$150,000

Note: Subject to any reductions shown below, Guarantee Issue means the amount of insurance applied for which does not require evidence of insurability. Guarantee Issue is available to New Hires only. For New Hires, coverage amounts over the Guarantee Issue Amount will require a health application/evidence of insurability. For Late Entrants, all coverage amounts will require a health application/evidence of insurability.

BENEFITS

Life Insurance Benefit Amount	<p>Within the coverage guidelines defined above, you select the amount of life insurance coverage you want. For you (the employee), you have coverage options of one, two or three times your annual salary.</p> <p><i>Note: In the event of death, the benefit paid will equal the benefit amount after any age reductions less any living care/accelerated death benefits previously paid under this plan</i></p>
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FEATURES

Living Care/Accelerated Death Benefit	50% of the amount of the life insurance benefit is available to you if terminally ill, not to exceed \$100,000.
Waiver of Premium	If it is determined that you are totally disabled, your life insurance benefit will continue without payment of premium, subject to certain conditions.
Annual Benefit Amount Increase	If you enroll for even the minimum amount of coverage during your initial enrollment, you have the ability to enroll for additional coverage at your next enrollment, up to the Guarantee Issue Amount. This feature allows you to secure additional life insurance protection in the event your needs change (ex. you get married or have a child).
Portability	The portability feature allows you to continue this insurance for yourself and your dependents (if applicable) should your employment end, subject to the terms of eligibility defined in the policy, without having to provide evidence of insurability (information about your health).
Conversion	If your employment ends, you may apply for an individual life insurance policy from Mutual of Omaha without having to provide evidence of insurability (information about your health). You will be responsible for the premium for the coverage.

Note: Additional information about the benefits and features of this plan will be included in the summary of coverage, which you will receive after enrolling, and in the certificate booklet, available from your employer. Please contact your employer if you have questions prior to enrolling.

AGE REDUCTIONS

Your life insurance benefits and guarantee issue amounts are subject to age reductions. At age 65, amounts reduce to 65%. At age 70+, amounts reduce to 45%. Coverage terminates at retirement.

Life insurance benefits will not be paid if the insured's death is the result of suicide within two years from the date of issue (the date coverage begins) of this coverage. If this occurs, the sum of the premiums paid will be returned to the beneficiary. The same applies for any future increases in coverage under this plan.

Please contact your employer if you have questions prior to enrolling.

This information describes some of the features of the benefits plan. Benefits may not be available in all states. Please refer to the certificate booklet for a full explanation of the plan's benefits, exclusions, limitations and reductions. Should there be any discrepancy between the certificate booklet and this outline, the certificate booklet will prevail. Benefits availability is subject to final acceptance and approval of the group application by Mutual of Omaha. Term life insurance is underwritten by United of Omaha Life Insurance Company, Mutual of Omaha Plaza, Omaha, Nebraska 68175. United of Omaha Life Insurance Company is licensed in every state except New York. Term Life Policy Form Number 7000GM-C-EZ-2001.

COVERAGE SELECTION AND PREMIUM CALCULATION - EMPLOYEE

Use the rates in the Age/Rate Table to calculate your benefit and premium for Voluntary Term Life coverage in the worksheet below, using the example as a guide.

Age/Rate Table	
Age	Rate (per \$1,000 of coverage)
0 - 29	\$.08
30 - 34	\$.10
35 - 39	\$.12
40 - 44	\$.18
45 - 49	\$.31
50 - 54	\$.51
55 - 59	\$.81
60 - 64	\$1.25
65 - 69	\$2.25
70+	\$4.02

Benefit and Premium Calculation Example

This example is for 42-year-old employee, earning \$41,676.51 a year.

A. Enter your annual salary*	\$41,676.51
B. Determine the amount of coverage you want: Enter 1 for one times salary, 2 for two times salary, 3 for three times salary	3
C. Multiply "A" times "B"	\$125,029.53
D. Round "C" up to the next higher \$1,000	\$126,000
E. Enter the Maximum coverage amount (3.00 times "A" rounded up to the next higher \$1,000, or \$500,000, whichever is less)	\$126,000
F. Enter the lesser of "D" or "E"; This is your benefit amount	\$126,000
G. Divide "F" by 1,000	126
H. Enter the rate for your age (from the Age/Rate Table)	\$.18
I. Multiply "G" times "H"	\$22.68
J. Multiply "I" by 12	\$272.16
K. Enter the pay cycle	52
L. Divide "J" by "K"; This is your cost per paycheck	\$5.23

Benefit and Premium Calculation Worksheet

A. Enter your annual salary*	
B. Determine the amount of coverage you want: Enter 1 for one times salary, 2 for two times salary, 3 for three times salary	
C. Multiply "A" times "B"	
D. Round "C" up to the next higher \$1,000	
E. Enter the Maximum coverage amount (3.00 times "A" rounded up to the next higher \$1,000, or \$500,000, whichever is less)	
F. Enter the lesser of "D" or "E"; This is your benefit amount	
G. Divide "F" by 1,000	
H. Enter the rate for your age (from the Age/Rate Table)	
I. Multiply "G" times "H"	
J. Multiply "I" by 12	
K. Enter the pay cycle	52
L. Divide "J" by "K"; This is your cost per paycheck	

** If you are uncertain what your current annual salary is, please consult your employer.*

To enroll for Voluntary Term Life coverage

- 1) Indicate the amount of coverage you want by checking the appropriate box in the Voluntary Term Life Benefit Amount section on your enrollment form.
- 2) Enter the amount from line "K" in your worksheet into the Voluntary Term Life Premium Amount section on your enrollment form.



BENEFITS SUMMARY

For Employees of Cardington Yutaka Technologies – Dependent Life Benefit Options

ELIGIBILITY – ALL ELIGIBLE EMPLOYEES

Dependent Eligibility Requirement	To be eligible for coverage, your dependents must be able to perform normal activities and not be confined (at home, in a hospital, or in any other care facility).
Eligible Dependents Include:	<ul style="list-style-type: none"> - Spouse - Unmarried children from birth to age 26 - Stepchildren living in the home - Foster children, under certain conditions
Coverage Payment	Employee pays 100% of the premium for dependent life coverage.

GUARANTEE ISSUE AMOUNT(S)

If elected “timely”, all benefit amounts outlined below are Guarantee Issue. Evidence of insurability is required for late entrants.

BENEFITS

Dependent Life Option 1	<p>For Your Spouse: \$10,000 For Your Dependent Child(ren): \$5,000 The premium (cost) for spouse and child(ren) coverage is blended – you pay the same premium amount whether you elect spouse coverage, child(ren) coverage, or both. Premium for Option 1 is \$0.25 Per Paycheck (52 payroll deductions)</p>
Dependent Life Option 2	<p>For Your Spouse: \$20,000 For Your Dependent Child(ren): \$10,000 The premium (cost) for spouse and child(ren) coverage is blended – you pay the same premium amount whether you elect spouse coverage, child(ren) coverage, or both. Premium for Option 2 is \$0.50 Per Paycheck (52 payroll deductions)</p>

AGE REDUCTIONS/LIMITATIONS

Coverage terminates when your employee coverage ends.

Please contact your employer if you have questions prior to enrolling.

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