

**TRANSAMERICA LIFE INSURANCE COMPANY**

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**PLEASE READ YOUR CERTIFICATE CAREFULLY**

**GROUP TERM LIFE INSURANCE CERTIFICATE**

**CERTIFICATE SCHEDULE - SUBJECT TO ANNUAL ELECTIONS**

**Policyholder:** Hospitality Industry Health Insurance Trust **Blanket Master Policy No.:** BL00057281  
**Basic Life Insurance :** \$10,000 Basic Life & Accidental Death Insurance **Effective Date:** 01/01/2017

**Supplemental Life Insurance:** N/A **Effective Date:** \_\_\_\_\_  
**Spouse Coverage:** N/A **Effective Date:** \_\_\_\_\_  
**Dependent Children Coverage:** N/A **Effective Date:** \_\_\_\_\_

The following are Policyholder Options that may or may not apply to your coverage. See the Group Master Policy to determine if applicable.

- Accidental Death and Dismemberment Rider - Loss of Life Benefit - The Proceeds**
- Accelerated Death Benefit for Terminal Illness Rider**  
Benefit: The lesser of: (a) 50% of your Proceeds; or (b) \$100,000
- Waiver of Premium Benefit Rider, Applicable Only to the Insured**  
Waiting Period: 6 months Rider benefits cease on the Anniversary Date following your 60<sup>th</sup> birthday unless you are Totally Disabled; if so, then Rider will end on the Anniversary Date following 65<sup>th</sup> birthday.
- Benefit Reduction Schedule - Life Insurance Proceeds automatically reduce to the following percentages on the Anniversary Date that follows your birthday, as follows:**

<u>Birth Day</u>	<u>Life Insurance Proceeds Payable</u>
65 <sup>th</sup>	65% of pre-age 65 death benefit
70 <sup>th</sup>	50% of pre-age 65 death benefit
75 <sup>th</sup>	25% of pre-age 65 death benefit

This Certificate summarizes the insurance coverage provided under the Group Master Policy identified above. This Certificate describes the coverage available to eligible employees and members. A copy of the Group Master Policy is on file with the Policyholder and may be examined at any reasonable time during normal business hours.

**DEFINITIONS**

The following Definitions are important to your coverage under the Group Master Policy.

**Active Service** - To be considered in Active Service, you must be: performing in the usual manner all of the regular duties of your occupation on a scheduled work day; and performing these duties at one of the places of business where you normally work or at some location directed by the employer.

You are considered to be in Active Service on a day which is not a scheduled work day only if you would be able to perform in the usual manner all of the regular duties of your occupation if it were a scheduled work day. You must also have been in Active Service on the last preceding regular work day.

**Age or Attained Age** - Your Age as of the last Anniversary Date. Attained Age will increase by one year on each Anniversary Date. **Issue Age** is your Attained Age as of the Effective Date.

**Anniversary Date** - The month and date of each Policy Year that is the same month and date as the Effective Date.

**Basic Life Insurance** - The life insurance coverage paid for by the Policyholder and provided to you at no cost.

**Child(ren)** - An unmarried child within the Age range of 15 days through Age 25, financially dependent upon you for support, who is: a natural child; a legally adopted child, or a child for whom adoption proceedings have begun; a stepchild that lives with you; or a child that lives with you and for whom you have been appointed legal guardian. This does not include anyone who is an Eligible Person under the Group Master Policy.

**Covered Person** - You and any Dependents.

**Dependent** - Your Spouse, Child(ren), and Other Adult Dependent covered under the Group Master Policy.

**Dependent Life Insurance** - The optional life insurance coverage available to you for your Spouse or Other Adult Dependent, and/or Child(ren) .

**Eligible Person** - An employee or member of the Policyholder that meets all of the eligibility requirements for becoming insured for Basic Life Insurance coverage.

**Group Master Policy** - The document that is issued to the Policyholder that describes the life insurance coverage for Insureds and their covered Dependents, if any.

**Insured (you, your, yours)** - The Eligible Person covered under the Group Master Policy.

**Lapse** - The termination of the Group Master Policy due to nonpayment of premium or insufficient payment of the premium due. The term also applies to the termination of your Optional Life Insurance coverage for nonpayment or insufficient payment of the contributions due.

**Life Insurance Proceeds or Proceeds** - The coverage amount payable upon the Covered Person's death.

**Optional Life Insurance** - Your Supplemental Life Insurance and/or Dependent Life Insurance coverage.

**Other Adult Dependent** - Your common law marriage partner, domestic partner, or civil union partner, if legally required in the governing jurisdiction or as otherwise agreed upon between the Policyholder and us. This does not include anyone who is an Eligible Person under the Group Master Policy.

**Policy Year** - The 12-month period that starts from the Effective Date of the Group Master Policy constitutes the first Policy Year. A new Policy Year begins on each Anniversary Date.

**Spouse** - A person who is legally married to you. The term also includes your common law spouse, civil union partner, or domestic partner, if legally recognized in the governing jurisdiction or as otherwise agreed upon between the policyholder and the Insurer. A spouse does not include anyone who is an Eligible Person under the Group Master Policy.

**Supplemental Life Insurance** - The optional life insurance coverage available to you. You must contribute towards the cost of this coverage.

**Tobacco User** - An Insured who has used any of the following tobacco products within the last 12 months: cigarettes, cigars, pipes, snuff, and chewing tobacco, or nicotine replacement products, such as patches or gum.

#### WHEN IS COVERAGE EFFECTIVE

**Basic Life Insurance** - You are automatically enrolled for Basic Life Insurance when you first become an Eligible Person. You are not required to contribute toward the cost of Basic Life Insurance. Coverage will become effective the first day of the month following the date you become an Eligible Person. If you are not in Active Service on the day coverage is scheduled to become effective, your coverage will become effective on the date you return to Active Service.

**Optional Life Insurance** - If available, you may elect Optional Life Insurance within 31 days of becoming an Eligible Person and authorize the payment of contributions due for the amount of additional coverage elected. If you fail to make an election within the 31-day period, you will not be permitted to enroll until the next Anniversary Date.

Your coverage for Supplemental Life will become effective the first day of the month following the date you elect coverage. If you are not in Active Service on the day coverage is scheduled to become effective, your coverage will become effective on the date you return to Active Service.

If Dependent Life is elected and a Spouse, Other Adult Dependent, or Child is confined in a hospital on the date coverage is scheduled to become effective, his or her coverage will become effective on the day following discharge from the hospital.

## WHEN CAN COVERAGE BE CHANGED

**Annual Benefit Elections** - Benefits are elected on an annual basis and will remain in effect for the Policy Year. During this year, you cannot make any changes in benefit elections unless you have a change in family status.

**Coverage Options Subject to Change** - Basic Life Insurance and Optional Life Insurance options are subject to change on any Anniversary Date, as agreed upon between the Policyholder and us.

**Automatic Coverage Amount Change** - If your coverage amount is based on Salary, Basic Life Insurance and Supplemental Life Insurance will be adjusted automatically on the next Anniversary Date as your Salary increases or decreases.

**Optional Life Insurance Changes** - You may increase or decrease Optional Life Insurance elections each Anniversary Date. Such changes will become effective on the Anniversary Date, subject to the following:

1. If you are not in Active Service on the Anniversary Date, any new or additional amounts will not take effect until you return to Active Service.
2. If a Spouse, Other Adult Dependent, or Child is confined in a hospital on the date coverage is scheduled to become effective or to change, any new or additional amounts will not be effective until the day following his or her discharge from the hospital.

**Evidence of Insurability** - Evidence of Insurability may be required for the purchase of Optional Life Insurance. If so, we must receive a completed Evidence of Insurability Form prior to the Anniversary Date and approve the Evidence of Insurability before the Optional Life Insurance will become effective.

**Change In Family Status** - You may change the Dependent Life Insurance election once during any Policy Year due to a change in family status. A request to change coverage as a result of a change in family status must be consistent with the event. Requests for a change in coverage as a result of a change in family status must be submitted to the Policyholder in writing within 31 days following the event. Approval of the change in coverage will become effective on the date the change in family status occurred. If you fail to request a change in coverage within 31 days following the change in family status, you will not be permitted to make such a change until the next Anniversary Date.

## BENEFICIARY

**How to Designate or Change the Beneficiary** - You may designate or change your Beneficiary at any time. The name of your Beneficiary and his or her relationship to you will be contained in the Policyholder's insurance records; therefore, designations must be submitted to the Policyholder. You will be the Beneficiary for any Dependent Life Insurance coverage.

**Payment of Life Insurance Proceeds** - If a Covered Person dies while the Group Master Policy is in force, we will pay the Proceeds to the designated Beneficiary, subject to the provisions of the Group Master Policy. Payment in good faith by us to the Beneficiary will fully discharge our obligations with respect to the amount(s) paid.

**If You Do Not Name a Beneficiary or the Designated Beneficiary Dies** - The rights of any Beneficiary to receive Proceeds will end if the Beneficiary dies prior to, at the time of, or within 30 days after, your death, except to the extent that benefits have already been paid. If the rights of all designated Beneficiaries have ended, or if you did not designate a Beneficiary, benefits will be payable to your survivors in the following order of priority: Spouse; Other Adult Dependent; Child(ren) (in equal amounts); parents (in equal amounts); siblings (in equal amounts); or the executor or administrator of your estate.

The existence of multiple Beneficiaries will not increase the benefit payable.

**Protection of the Proceeds** - To the extent permitted by law, the Proceeds will not be subject to the claims of the Beneficiary's creditors or to any legal process against the Beneficiary.

## PAYMENT OF LIFE INSURANCE PROCEEDS

**Amount of Proceeds** - Upon receipt of satisfactory proof of your death, we will pay the Beneficiary the amount of Basic Life Insurance, and the amount of Supplemental Life Insurance if any, in force on the date of your death.

On receipt of satisfactory proof of a Dependent's death, we will pay you the amount of Dependent Life Insurance in force for such Dependent on the date of the Dependent's death.

The amount of Proceeds applicable to each Child between the Ages of 15 days and 6 months old is limited to 10% of the selected Child's life insurance coverage.

**Interest on Proceeds** - If the Proceeds are not paid within 30 days, we will also pay interest on the Proceeds from the date of death of the Insured to the date when the Proceeds are paid. The interest rate will accrue beginning on the date of death of the Insured to the date the Proceeds are paid at the interest rate of 8% or as required by law.

Proceeds payable that have not been tendered to the Beneficiary within 90 days of the receipt of proof of death will accrue interest, beginning on the 91<sup>st</sup> day, at the rate of 8% or as required by law, plus 3%

**Adjustments to the Proceeds** - The Proceeds will be reduced by any due and unpaid premiums.

#### WHEN INSURANCE STOPS

**Basic Life Insurance** - Subject to the Conversion Option, your Basic Life Insurance will end on the earliest of the following: the date of your death; the last day of the month in which you no longer qualify for coverage as an Eligible Person; or the date the Policyholder discontinues the Group Master Policy in accordance with the Policy Termination provision.

**Supplemental Life Insurance** - Your Supplemental Life Insurance coverage will end on the earliest of: the date your Basic Life Insurance terminates; the date the Supplemental Life Insurance Lapses; the Anniversary Date, if you elect not to enroll for the next Policy Year; or the date the Policyholder discontinues offering Supplemental Life Insurance for your classification.

**Dependent Life** - Subject to the Conversion Option, Dependent Life Insurance will end on the earliest of the following: the date your Basic Life Insurance terminates; the date the Dependent Life Insurance Lapses; the Anniversary Date, if you elect not to enroll for the next Policy Year; the date the Policyholder discontinues offering Dependent Life Insurance for your classification; the date a Dependent becomes an Eligible Person under the Group Master Policy (for that Dependent only); the last day of the month following the date you and Spouse divorce, (for Spouse only); the last day of the month following the date you and Other Adult Dependent partnership is dissolved, (for Other Adult Dependent only); the last day of the month following the date a Dependent Child marries (for that Child only); or the Anniversary Date following a Dependent Child's 26th birthday (for that Child only).

Coverage will also end if a Covered Person submits a fraudulent claim to us.

#### CONVERSION OPTION

A Covered Person can convert his or her coverage to permanent life insurance on a policy form that we then issue, without any optional riders, in an amount not to exceed the amount of insurance that is terminating under the Group Master Policy or less than \$1,000 unless a smaller amount of coverage was provided for such individual under the Group Policy. The premium for the permanent coverage will be based upon the Covered Person's Attained Age and class of risk at the time of conversion, together with the form and amount of insurance chosen. No evidence of insurability will be required.

We must receive the conversion application and any required premium within 31 days of termination under the Group Master Policy. If the Covered Person dies within the 31-day conversion period, benefits under the Group Master Policy will be paid as if coverage had continued regardless of whether the Covered Person applied for conversion coverage.

Conversion is not available if termination is the result of submitting a fraudulent claim; or your decision to not elect Dependent Life Insurance for the next Policy Year.

#### RULES FOR FILING A CLAIM

Satisfactory proof of death must be submitted to us at our Administrative Office. A beneficiary or personal representative can get a claim form by calling our toll-free telephone number.

## GENERAL PROVISIONS

**Grace Period** - For any coverage for which you pay a premium, you have a Grace Period of 31 days from each premium due date, except the first, in which to pay the premium then due. Coverage will continue during the Grace Period. You are liable for the premium during the Grace Period.

**Adjustments in the Event of Error in Age or Tobacco User Status** - If the Age or Tobacco User status of any Covered Person is misstated, we will make an equitable adjustment in either the premium or amount of insurance. We will adjust any claims payable under the Group Master Policy to that amount of insurance that the premiums paid would have purchased based on your correct Age or Tobacco User status.

**Right to Contest** - We will not use any statement to void or reduce benefits under this Policy after it has been in force for two years from the Effective Date.

For any Optional Life Insurance elections, we will not use any statement to void or reduce an Insured's Optional Life Insurance benefits after such benefits have been in force for two years from the Effective Date of such benefits. For increases in Optional Life Insurance benefits, our two-year right to contest starts anew, but will only apply to the amount of the increase.

Any such statements would have to be in a signed form. All statements made are considered representations and not warranties. No such statement will be used in any contest, unless a copy of such statement has been furnished to you.

**Policyholder As Your Agent:** For all purposes related to this insurance, the Policyholder serves as your agent and not as our agent.