



**AMERICAN INTERNATIONAL LIFE
ASSURANCE COMPANY OF NEW YORK**
70 PINE STREET, NEW YORK, NEW YORK 10270
(Herein Called The Insurance Company)

**Uniformed Firefighters Association
of Greater New York**

Summary Plan Description

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Group Term Life and Accidental Death & Dismemberment Insurance Plan

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GROUP TERM LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE PLANS INTRODUCTION

Your Employer offers you several benefits that provide financial protection for your family in case of death or dismemberment, including the Group Term Life Insurance Plan and the Accidental Death & Dismemberment Plan (AD&D).

- You are offered the opportunity to purchase Group Term Life Insurance
- You are offered the opportunity to purchase Accidental Death & Dismemberment Insurance
- You are offered the opportunity to purchase Dependent Life Insurance for your spouse and child(ren)
- If you are a retiree, you are offered the opportunity to purchase Supplemental Life Insurance for yourself and your spouse

The plans are sponsored by Uniformed Firefighters Association of Greater New York.

American International Life Assurance Company of New York (AILife) is the carrier and the claims administrator for the Group Term Life Insurance benefits.

American Home Assurance Company is the carrier and the claims administrator for the Accidental Death & Dismemberment Life Insurance benefits.

This Summary Plan is not a contract of insurance. It contains only the major terms of insurance coverage and payment of benefits under the Group Term Life and Group Accidental Death & Dismemberment Policies. It replaces any and all Summary Plans that may have been issued to you earlier.

If there are any discrepancies between this Summary Plan Description and the Group Term Life and Group Accidental Death & Dismemberment Policies, the Group Term Life and Group Accidental Death & Dismemberment Policies will be the governing documents in all cases.

GROUP TERM LIFE HIGHLIGHTS

The Group Term Life Insurance Plan pays a benefit to a designated beneficiary in the event the covered person dies. The Group Term Life Insurance death benefit will be paid regardless of the cause. **The Group Accidental Death & Dismemberment Insurance Plan pays an additional benefit to you, or to a designated beneficiary, should you suffer a covered accidental death or dismemberment caused directly and independently of all other causes (except as limited by the AD&D Exclusions). The Company will require that authentic proof of death and/or dismemberment be supplied.**

Life Insurance Benefits

Class	Amount of Life Insurance
All Active Firefighters who elect coverage	Option 1: \$50,000* Option 2: \$100,000 Option 3: \$150,000* Option 4: \$200,000 Option 5: \$300,000
Class	Amount of Life Insurance
Retirees	Life amount will be 50% of the insurance that was in force the day before the date an individual retires up to a maximum of \$100,000.

* Option 1 and 3 only available to those members who were enrolled in those categories as of 6/20/02.

The life insurance benefit amount to be carried into retirement will be based upon the amount of active insurance you had in effect one year prior to retirement date. Must have had an upgrade approval before the one year cut off date. Later upgrades will be excluded from retirement formula.

The UFA subsidizes retirees premiums with the following exception: Effective March 1999, the UFA will no longer offset premiums of new promotees above the rank of Firefighter/Fire Marshall/Wiper. The total premium must be paid by post 3/1/99 promotees wishing to maintain the UFA Group Life Insurance Policy.

Evidence of Insurability

New Firefighters have 31 days from their appointment date to choose insurance coverage up to the maximum benefit of \$300,000, \$200,000 guaranteed issue. The new firefighter has the choice to increase his benefit up to \$200,000 any time during that 31 day period without providing Evidence of Insurability.

After the 31 day period, the new firefighter may purchase an additional \$100,000 (up to the maximum of \$300,000) in the calendar year that he is appointed, but he must provide Evidence of Insurability.

Current Active Firefighters may purchase an additional \$100,000 (no more) each calendar year up to the maximum of \$300,000; however, they must provide Evidence of Insurability each time they elect to increase their benefit.

Reduction Schedule

For Group Term Life Insurance:

On and after your 65th birthday, we decrease the amount of your insurance.

Age When Reduction Occurs:	Percentage by which amount of in-force insurance will be reduced:
66	20%
67	40%
68	60%
69	80%

*Coverage terminates at age 70

Waiting Period

There is no waiting period.

Dependent's Term Life Insurance

Class I-Actives	Amount of Insurance
Spouse: Domestic Partners are not covered under spousal coverage	Option 1. \$25,000 Option 2. \$50,000 Option 3. \$75,000 Option 4. \$100,000
Child (each) – 14 days to 19 years, 23 if full-time, unmarried student:	\$4,000

Class II-Retirees	Amount of Insurance
Spouse: Domestic Partners are not covered under spousal coverage	Option 1: \$12,500 Option 2: \$15,000 Option 3: \$25,000
Child (each) – 14 days to 19 years, 23 if full-time, unmarried student:	\$4,000

The Dependent Spouse benefit cannot be greater than the Firefighter's benefit

The Spouse amount of insurance will reduce in the manner as your amount of insurance upon your spouse's attainment of reducing ages, and terminates at your retirement.

Dependent coverage benefits are paid to you. If you are not living on the date benefits are payable, the benefits will be paid to your estate.

Dependent's Evidence of Insurability

New Firefighter's have 31 days from their appointment date to choose Dependent Life Insurance. The Dependent Spouse benefit cannot be greater than the Firefighter's benefit. The Spouse's coverage must equal the Firefighter's coverage up to \$100,000.

For current active Firefighter's, Spouses may be added with the same amount of coverage as the Firefighter up to a maximum of \$100,000 provided the Spouse provides Evidence of Insurability.

Accelerated Death Benefit for Group Term Life Insurance

This benefit is equal to 50% of your amount of Group Term Life Insurance in force, or \$100,000, whichever is less. The minimum possible benefit is \$15,000. This benefit is available to employees only. Employees must have a minimum \$30,000 Group Term Life Insurance benefit to qualify for Accelerated Death.

Waiver of Premium

There is no Waiver of Premium provision. Coverage is continued on a premium paying basis only for disabled insureds.

Changes in Your Insurance

Changes in the amount of insurance because of a change in age, class, or earnings (if applicable) are effective on the date of the change, provided you are Actively At Work on the date of the change. If you are not Actively At Work when the change should take effect, the change will take effect on the day you return to active work.

Payment Options

Beneficiaries have various options in receiving the proceeds of a death claim. The proceeds can be received in one lump sum or in equal installments. These options will be explained to the beneficiary when a claim is filed.

ELIGIBILITY AND ENROLLMENT

Your Participation

You are eligible for Group Term Life and AD&D Insurance if you are an active or retired member in good standing of the Uniformed Firefighters Association and are employed as a:

1. Firefighter; or
2. Fire Marshal; or
3. WIPER; or
4. Pilots and Marine Engineers; or
5. Retirees and promotees who have elected to continue coverage at 1/2 their active amount..

You may enroll for coverage the day you become an eligible employee, you are actively at work and have completed any waiting period. If you are absent from work on the **Group Term Life and Group Accidental Death & Dismemberment Policies'** Effective Date due to sickness or injury, coverage will begin two weeks after you return to work.

Your Dependent's Participation

Your dependents are eligible for life insurance coverage when you become eligible. Your eligible dependents include your:

- spouse
- unmarried children* ages 14 days to 19 years but less than 23 years who are full-time students.

* "Dependent Child(ren)" means your child, stepchild, foster or legally adopted child.

If you and your spouse are both eligible as employees, only one of you may choose to cover your eligible children.

If you choose dependent coverage initially, it will become effective when your coverage becomes effective (or when you first acquire the dependent). However, if your dependent (other than a newborn) is in the hospital when coverage is to begin, coverage will be postponed until your dependent is released by the hospital.

Coverage for newborns begins when the child reaches 14 days of age.

Beneficiaries

You must name a beneficiary to receive benefits payable under the Group Term Life and AD&D Insurance Plan. You may designate your beneficiary when you complete the enrollment form and will be effective upon receipt. You may change your beneficiary at any time by completing a change form, available from your local Benefits Representative.

If you do not designate a beneficiary or your beneficiary does not survive you, Group Term Life and AD&D Insurance benefits will be paid to your estate.

ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE

The Accidental Death and Dismemberment Plan pays a benefit in the event you suffer a covered accidental death or dismemberment. The benefit provided is payable in addition to any other insurance benefits which may be in effect at the time of the accident.

Active/Retired Member and Family Plan

All active and retired Uniformed Firefighter Association members enrolled in the UFA Group Life Insurance Benefit Program, their spouse and any unmarried dependent children, under age 19 (25 years of age, if attending full-time an accredited institution of higher education). Coverage can be extended beyond age 19 if dependent child is incapacitated due to mental retardation or physical handicap.

Coverage

An Insured Person is covered 24 hours a day, 365 days-a-year. Coverage includes (but is not limited to) accidents whether on or off the job, occurring in the home, while driving your automobile, or while traveling as a passenger by train, airplane (except as limited by the EXCLUSIONS shown below), automobile, or other public or private conveyance. The benefits provided under this plan are payable in addition to any other insurance available under the UFA Group Life Insurance Benefits Program.

Exclusions

(Apply to AD&D only)

The plan does not cover loss due to intentionally self-inflicted injuries; attempted suicide or suicide; full-time active service in the armed forces of any country or international authority; committing a felony; disease of any kind (except as provided under Heart or Circulatory Malfunction Section), bacterial infections except pyogenic infections which shall occur through an accidental cut or wound; hernia; declared or undeclared war or any act thereof; or flying as a pilot or crew member in any aircraft.

UFA Accidental Insurance Principal Sum Amounts

Class	Amount of AD&D Insurance
Active Member:	\$50,000
Spouse/Child(ren):	\$25,000/\$5,000
Retired Member:	\$10,000
Spouse/Child(ren):	\$5,000/\$2,500

Loss of Life and Dismemberment

If injuries result in any of the following losses within 365 days of the date of the accident, the Insurance Company will pay in one sum the indicated percentage of the Principal Sum for:

Loss of Life	100%
Loss of two or more members	100%
Loss of speech and hearing of both ears	100%
Loss of one member	50%
Loss of speech, or hearing of both ears	50%
Loss of thumb and index finger of same hand	25%

“Loss of hand or foot for plan purposes is defined as actual severance through or above the wrists or ankle joint, used with reference to eye loss means irrecoverable loss of one’s entire sight. “Loss” of thumb and index finger is defined as actual severance through or above the metacarpophalangeal joints. With regard to speech, loss means the entire and irrecoverable loss thereof. With regard to hearing, the entire and irrecoverable loss of hearing in both ears is required for benefit payment under the plan. “Member” means hand, foot or eye. Only one amount, the largest to which the Insured Person is entitled is payable should all losses result from one accident.

Exposure and Disappearance

If by reason of a recovered accident an Insured Person is unavoidably exposed to the elements and as a result of such exposure suffers a loss for which benefits are otherwise payable, the loss for which benefits are otherwise payable, the loss will be covered under the terms of the plan. If an Insured Person has not been found within one year of the disappearance, forced landing, stranding, sinking or wrecking of a conveyance in which the Insured Person was an occupant, then the Insurance Company will consider that, subject to all other terms and conditions of the plan, the Insured Person suffered loss of life.

Common Disaster

If you are entered in our Family Plan coverage and are involved in an accident with your spouse which results in the loss of both of your lives within 90 days of such accident, your spouse’s Principal Sum benefit will be increased to equal your amount.

Heart or Circulatory Malfunction

The Plan shall pay \$10,000 if an Insured Person suffers a Heart or Circulatory Malfunction which results in death, and which is a result of participating in a Covered Activity while performing their duties as a firefighter, provided that the following is true: The symptoms of such malfunction are first medically treated while the policy is in force with respect to such Insured Person; and within 48 hours after such line of duty participation; and such Insured Person has not within the 5 years prior to the date of such participation, been medically advised that he has, or has not received any medication for Myocardial Infarction, Angina Pectoris, Coronary Thrombosis or a Cerebral Vascular incident.

Seat Belt

If, due to a covered accident, Injury results in the death of an Insured Person who at the time of the covered accident was an operator or passenger of a motor vehicle and was properly wearing a seat belt or lap and shoulder harnesses, the company will pay an additional 10% of the Principal Sum to a maximum of \$10,000. Seat Belt Benefits will not be payable if the operator of the motor vehicle was under the influence of alcohol or drugs unless prescribed by a licensed physician. This provision is payable in addition to any other benefits payable under the plan.

Family Plan Benefit

An eligible member is automatically included with coverage for eligible dependents under the Family Plan: Eligible dependents include a spouse and unmarried dependent children (which shall include stepchildren, legally adopted children and foster children) from birth to 19 years of age, or up to age 25 if attending an accredited college or university on a full-time basis and dependent upon the member for their support and maintenance. Special Provision - Handicapped Children Coverage will be continued for a dependent child who is incapable of self-sustaining employment by reason of: mental retardation or physical handicap. Coverage of such child will continue as long as such incapacity continues, provided the Insured submits proof of such incapacity to the Company: a) within 31 days of such child reaching the maximum age specified; and b) annually thereafter.

Tuition Reimbursement

If an Insured Member has Family Coverage and the Insured Member suffers loss of life in a covered accident while insured under this Plan, the Program Plan will pay in addition to all other benefits the amount which is the lesser of the following amounts: (1) The actual annual tuition, exclusive of room and board, charged by such institution per school year, or (2) 5% of the Insured's Principal Sum, to or on behalf of any dependent child who at the date of the accident was enrolled as a full-time student at any institution of higher learning beyond the 12th grade level, or was at the 12th grade level and subsequently enrolls as a full-time student in an institution of higher learning within 365 days following the date of accident. This benefit is payable annually for a maximum of four consecutive annual payments, but only if the dependent child continues his or her education as a full-time student in an institution of higher learning. If at the time of the accident Family Coverage is in force but no dependent Child qualifies for the special educational benefit, a one time lump-sum benefit of \$3,000 will be paid to or on behalf of the dependent child or children, or (3) \$5,000 per school year.

Cosmetic Disfigurement From Burns

The plan will pay benefits if, as the result of injury while performing their duties as a firefighter, an Insured suffers from cosmetic disfigurement due to a burn that is classified as a third degree burn. All benefits payable under Cosmetic Disfigurement from Burns are based on a percentage of the benefit shown below and depend on the area of the body which was burned. The benefit payable for any one loss is determined by the following formula:

- (1) Area of the body that was burned is assigned an area classification factor by using the table shown below. Each body part is assigned a classification relative to its visual exposure (i.e., the higher the classification, the more visual exposure);

GROUP TERM LIFE AND AD&D INSURANCE PLANS

- (2) The area classification factor is multiplied by the percentage of body surface actually burned. The attending Physician will determine the percentage applicable to each burn. The table below lists the maximum allowance percentage for body surface burned for each area classification;
- (3) Steps 1 and 2 will produce an arithmetic factor that will be multiplied by the Principal Sum to determine the percentage of the Principal Sum payable under this benefit. This following examples use the Cosmetic Burn Schedule below:
- (a) If the entire surface of the right hand and forearm were burned, the benefit would be $5 \times 4.5\% = 22.5\%$ of the Principal Sum payable; or
- (b) If 50% of surface of the right hand and forearm were burned, the benefit would be $5 \times 2.25\%$ (which is 50% of 4.5) = 11.25% of the Principal Sum payable.

The following table is a burn schedule from which benefits can be determined. This table only represents the maximum % of the Principal Sum payable for any one covered loss. If the Insured suffers burns in more than one area as a result of any one accident, benefits will not exceed more than 100% of the Principal Sum.

Cosmetic Burn Schedule

Body Part	Area Classification	Max Allowable % for Area Surface Burned	Max % of Principal Sum Payable
Face, Neck, Head	11	9%	99%
Hand & Forearm (Rt.)	5	4.5%	22.5%
Hand & Forearm (Lft.)	5	4.5%	22.5%
Upper Arm (Rt.)	3	4.5%	13.5%
Upper Arm (Lt.)	3	4.5%	13.5%
Torso (Front)	2	18%	36%
Torso (Back)	2	18%	36%
Thigh (Rt.)	1	9%	9%
Thigh (Lft.)	1	9%	9%
Lower Leg (Rt.) (Below Knee)	3	9%	27%
Lower Leg (Lft.) (Below Knee)	3	9%	27%

ACCELERATED DEATH BENEFIT

The Accelerated Death Benefit will pay a portion of your Life Insurance Benefit before your death, under conditions specified in the provisions below. The Accelerated Death Benefit is not a long-term care policy.

The minimum Accelerated Life Insurance benefit amount is \$15,000. The maximum benefit an Employee may receive is the lesser of:

- 50% of your combined Basic and Supplemental Life Insurance Benefit as shown in Plan Highlights minus the amount of any Accelerated Life Insurance benefit already paid; or
- \$100,000.

To receive the Accelerated Death Benefit, all of the following conditions must be met. You must:

- request this benefit in writing while you are living.
- be insured as an employee for Life Insurance benefits.
- have Group Term Life Insurance benefits of at least \$30,000 as shown under Plan Highlights.
- provide to **the Company** a doctor's statement which gives the diagnosis of your medical condition; which states that because of the nature and severity of such condition, your life expectancy is no more than 12 months. **The Company** may require that you be examined by a doctor of its choosing. If **the Company** requires this, **the Company** pays for the exam.
- provide to **the Company** written consent from any beneficiary, assignee, and, in community property states, from your spouse.

Proof of Terminal Illness

Prior to receiving an Accelerated Life Insurance Benefit, you must provide satisfactory proof that your life expectancy is 12 months or less from the date of application for this benefit. This proof must include certification from a Physician. The Physician cannot be you, your spouse, an immediate family member, or an individual residing with you. **The Company** reserves the right to obtain a second or third medial opinion at our own expense.

Benefit Payment

The Company pays this benefit if it has been determined that you are terminally ill while you are insured under the **Group Term Life** Policy. The Accelerated Death Benefit proceeds are paid in one lump sum unless you request an alternate payment arrangement in writing which is approved by **the Company**. The minimum payment under such an arrangement will be \$500 per payment. **The Company** may also charge a fee of not more than \$25 for each payment processed under the installation agreement.

Accelerated Death Benefit Exclusions and Limitations

The Company does not pay benefits for a terminal condition if any of the following apply:

- the terminal condition is directly or indirectly caused by attempted suicide or intentionally self-inflicted injury, whether sane or insane; or
 - you would be required by law to use the benefit to meet the claims of creditors, whether in bankruptcy or otherwise; or
 - your Life Insurance Benefits under this Group Term Life Policy have been assigned; or
 - your coverage under this Group Term Life Policy is not in force; or
 - every irrevocable beneficiary, if any, has not approved payment of this benefit.
 - The Employee has attained sixty-five (65) years of age as of the date application for this benefit has been received by the Company.
-

Effects on Coverage

When the Company pays out this benefit, your coverage is affected in the following ways:

- Your total available Term Life Insurance benefit equals your amount of Term Life Insurance shown under Plan Highlights at the time you apply for the Accelerated Death Benefit.
 - Your Term Life Insurance benefit is reduced by the Accelerated Death Benefit proceeds paid out under this provision.
 - Your Term Life Insurance benefit amount which you may convert is reduced by the Accelerated Death Benefit proceeds paid out under this provision.
 - Your remaining Term Life Insurance benefit is subject to future age reductions.
 - You will not be able to reinstate your coverage to its full amount in the event of a recovery from a terminal condition.
 - Your dependents' Term Life Insurance coverage will be unaffected by Accelerated Death Benefit proceeds paid to you provided all required premiums are paid.
-

Termination of Accelerated Life

Accelerated Life will terminate on the date your insurance under the Policy terminates or upon the Company's receipt of your written request for termination. However, this benefit will continue to be available while you are covered under the Extension of Employee Life Insurance for Total Disability provision of the Group Term Life Policy, subject to the terms and conditions of that provision.

FILING CLAIMS

You or your beneficiary should contact **the Company** within 15 days (20 days for AD&D), or as soon as possible, after the death of the covered person. Once notified, your local Benefits Representative will forward proof of loss forms to you or your beneficiary within 15 days. You or your beneficiary must complete and return the forms (with the necessary attachments) within 90 days of the loss.

Benefits will be paid to the beneficiary as soon as the carrier receives proper written proof.

Claims Review Process

If a claim for benefits is denied in whole or in part, the beneficiary will receive a written explanation of the reason for the denial.

Payment of Claims

Indemnity for Loss of Life shall be paid in accordance with the beneficiary designations. If no such designation is in effect, then the Indemnity shall be paid to your estate. Indemnity for other losses shall be paid to you, the Insured Employee. If any benefit under the Policy becomes payable to:

1. The estate of the Insured Employee;
2. An Insured Employee who is a minor; or
3. An Insured Employee who is not competent to give valid release;

then **the Company** may pay the benefit up to an amount not to exceed \$1,000 to:

1. Any relative by blood; or
2. Any person related by marriage;

who is deemed by **the Company** to be equitably entitled. Any payment made by **the Company** in good faith under this provision will fully discharge **the Company** to the extent of the payment.

WHEN COVERAGE ENDS

Generally, your coverage will end when you terminate employment or when a participant no longer meets the Plan eligibility and coverage requirements.

Coverage will also end if the Plan is terminated.

The Accelerated Death Benefit stops the date your Term Life Insurance stops or at the beginning of the period in which you are eligible to convert your Term Life Insurance.

However, if you stop active work because of sickness, accidental injury, personal leave of absence or temporary layoff, you may be able to continue your coverage.

Portability Benefit

A Member insured under the Group Policy who is under age 70 and whose eligibility under the Group Policy terminates for any reason except retirement may elect to continue any Life Insurance under the Group Policy for which such Member pays the entire premium (including any Life Insurance on his or her Spouse, but not including Life Insurance for his or her Dependent Children). Such person must make this election within 31 days of such termination. Such person must continue to pay the entire premium. Continued coverage will end when the Member attains age 75. Such person may elect to convert this continued coverage at any time while such coverage is in force as set forth in the Conversion Privileges section of the Group Policy. Coverage will not survive termination of the Group Policy. However, coverage will continue through the last period for which premiums have been paid. Renewal rates will be based upon the terminated Member's age and smoking status at the time of renewal. Premiums will be billed directly to such person on a semi-annual or annual basis.

Conversion Rights for Life Insurance

You **and your dependents** may convert the Term Life Insurance group coverage to an individual life insurance policy if coverage ends because:

- the Policy terminates; or
- your employment ends;

You or **your dependent** can purchase an individual whole life insurance policy from AILife (convert). No Evidence of Insurability will be required.

To convert, you or **your dependent** must, within thirty-one (31) days after insurance ends:

1. Apply in writing to AILife at 70 Pine Street, New York, New York 10270; and
2. Pay the first premium.

The Premium will be based on:

1. AILife's rates for the policy form and amount;
2. The class of risk to which you **and your dependents** belong; and

3. The age as of you or **your dependent's** nearest birthday at the time insurance ends.

The individual policy will not:

1. Be term insurance (except you **or your dependent** can choose a single premium one year term policy);
2. Pay any dividends (non participating);
3. Contain disability or other supplemental benefits; or
4. Be for an amount that is more than the insurance under the Policy when insurance ends.

The individual policy will go into effect at the end of the thirty-one (31) day period after insurance ends.

The Amount Of Converted Insurance for Group Term Life Insurance

If a insurance ends because the Policy:

1. Terminates; or
2. Is changed to terminate the class of Members to which you or **your dependents** belongs; you or **your dependents** can convert as if insurance ended; but in no event shall the amount of such converted insurance exceed:
 - a. The amount of your or **your dependent's** insurance protection under this Policy;
 - b. Less any amount of life insurance for which you **and your dependents** may become eligible under any group policy issued to the Employer within thirty-one (31) days of the termination.

If a Member dies within thirty-one (31) days after their insurance ends, AILife will pay a death benefit equal to the maximum amount for which he could have converted.

If you or **your dependents** have already converted the insurance under the Policy (or any Policy issued by AILife to replace the Policy), the amount of insurance under the Policy will be reduced by the amount of insurance converted. But this limit will not apply if:

1. The Member surrenders the individual policy to AILife; or
2. The Member furnishes at his expense Evidence of Insurability satisfactory to AILife.

The individual policy will become effective 31 days after the group coverage ends. However, if the covered person dies before the individual policy takes effect, the benefit payable will be the amount payable under the group policy (whether or not an application was made and premiums paid for an individual policy). If this occurs, any premium paid for an individual policy will be refunded.

DEFINITIONS

Active Full-Time Employee

All active and retired members in good standing of the Uniformed Firefighters Association who are employed as:

1. Firefighter; or
2. Fire Marshal; or
3. WIPER; or
4. Pilots and Marine Engineers; or
5. Retirees and promotees who have elected to continue coverage at 1/2 their active amount.

An employee will be considered actively at work on a day which is one of the Employer's scheduled work days if he is performing, at his usual place of work or at another place to which he is required to travel, and in the usual manner, all of the regular duties of his work on a full-time basis on that day. He will also be considered actively at work on a paid vacation day or on a day which is not one of the Employer's scheduled work days only if he was actively at work on the preceding scheduled work day.

Child

- your natural child*
- your adopted child*

* "Dependent Child(ren)" means your child, stepchild, foster or legally adopted child.

Dependents Insurance

The insurance of an Insured Dependent under the Group Policy.

Dependents

- your Spouse
 - your Child over 14 days but less than 19 years of age, or less than 23 years of age if an unmarried, full-time Student Dependent
-

A Dependent Is Not

- a married Child
 - a parent of you or your Spouse
-

Employee's Insurance

The coverage of an insured employee under the **Group Term Life and Group Accidental Death & Dismemberment Policies**, according to the Plan Highlights. It does not include any dependents' insurance.

Group Term Life and Group Accidental Death & Dismemberment Policy(ies)

The written group insurance contract between **American International Life Assurance Company of New York** and Uniformed Firefighters Association of Greater New York for **Group Term Life Insurance**; and **American Home Assurance Company** and Uniformed Firefighters Association of Greater New York for **Accidental Death & Dismemberment Insurance**.

Policyholder

Uniformed Firefighters Association of Greater New York

The Date You Retire, Retirement

The effective date of your:

- retirement pension benefits under any plan of a federal, state, county or municipal retirement system, if such pension benefits include any credit for employment with the Policyholder;
 - retirement pension benefits under any plan which the Policyholder sponsors, or makes or has made contributions;
 - retirement benefits under the United States Social Security Act of 1935, as amended, or under any similar plan or act.
-

Retiree

An individual meeting the above definition of retirement. **Only** retirees and promotees who have elected to continue coverage at 1/2 their active amount **are covered**.

Spouse

Your legal husband or wife.

Student Dependent

A Dependent who has their chief place of residence with you, does not have a regular, full-time job, and is a full-time student attending classes at a school with a regular teaching staff, curriculum, and student body. We consider full-time to be the number of credits or courses required for full-time students by the school your Dependent is attending.

Terminal Condition

An injury or sickness which is expected to result in your death within 12 months and from which there is no reasonable chance of recovery. **The Company**, or a qualified party chosen by **the Company**, will make this determination.

GROUP TERM LIFE AND AD&D INSURANCE PLANS

We, Us, Our, the Company

For Group Term Life Insurance - American International Life Assurance Company of New York (AILife) at its Home Office in New York, NY.

For Accidental Death & Dismemberment Insurance - American Home Assurance Company at its Home Office in New York, NY.

Written, In Writing

Signed and dated and received at our Home Office on a form we accept.

You, Your

An Employee insured for Employee's Insurance under the **Group Term Life and Group Accidental Death & Dismemberment Policies** who meets the eligibility requirements of those Policies.