

Basic Life Benefit Summary

Group ID: 00541601 Member Coverage Type: Non Contributory

Group Name: CAPTIVATION SOFTWARE DBA Class: 0001 ALL ELIGIBLE

CAPTIVATION EMPLOYEES

Waiting Period: 1st of the month following date of As of Date: 09/02/2020

hire

Coverage Information

Employee Volume Amount Flat \$100,000

Maximum Amount \$100,000

Cutbacks 35% at age 65

60% at age 70 75% at age 75 85% at age 80

Plan Information

When is my policy effective? Coverage is effective after you satisfy any waiting period required

by your employer. Coverage will not begin until Guardian has

approved any amount subject to medical underwriting.

Do I have to answer medical questions

as part of purchasing insurance?

No

Can I take the policy with me if I leave

the company?

You may be able to port this coverage to a group trust plan. You must answer some medical questions to help us assess your

insurability for the ported coverage.

Yes, you can convert this coverage to an individual policy if you terminate employment with the company or the policy ends. (Some restrictions apply; see certificate of benefits for more information.)

Basic Life and General Exclusions

You must be working full-time on the effective date of your coverage; otherwise, your coverage becomes effective after you have completed a specific waiting period.

Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment: (a) exceeding one year; or (b) in an area under travel warning by the US Department of State. Subject to state specific variations.

Evidence of Insurability is required on all late enrollees. This coverage will not be effective until approved by a Guardian underwriter. This proposal is hedged subject to satisfactory financial evaluation. Please refer to policy booklet for full plan description.

LifeAssistSM applies to your life benefit. If A person is ADL-disabled if he or she is (a) physically unable to perform two or more ADLs without continuous physical assistance; or (b) cognitively impaired, and requires verbal cueing to protect himself/herself or others. ADLs are bathing, dressing, toileting, transferring, continence, and eating.

This proposal is hedged subject to satisfactory financial evaluation. This coverage will not be effective until approved by a Guardian underwriter. Please refer to policy booklet for full plan description.

The group policy or individual certificate cannot be contested after it, or any rider or amendment subsequently added to it, has been in force for a period of two years.

If the age or any other relevant factor of the insured has been misstated, Guardian or its subsidiaries will use the true fact in determining whether insurance is in force under the terms of the certificate and in what amounts.

Dependent coverage will not take effect if a dependent, other than a newborn is confined to a hospital or other health care facility, or is unable to perform the normal activities of someone of like age and sex (may vary by state).



This Benefit Summary is for illustrative purposes. Your benefits booklet will show exactly what is covered and/or excluded under your plan. If there is a discrepancy between this Benefit Summary and your benefit booklet, the benefit booklet prevails.



Accidental Death and Dismemberment Benefit Summary

Group ID: 00541601 Member Coverage Type: Non Contributory

Group Name: CAPTIVATION SOFTWARE DBA Class: 0001 ALL ELIGIBLE

CAPTIVATION EMPLOYEES

Waiting Period: 1st of the month following date of As of Date: 09/02/2020

hire

Coverage Information

Volume Amount Flat \$100,000

Guaranteed Issue Your Accidental Death and Dismemberment coverage is

guaranteed based on your Basic Life coverage.

Maximum Amount \$100,000

Cutbacks 35% at age 65

60% at age 70 75% at age 75 85% at age 80

Plan Information

When is my policy effective? Coverage is effective after you satisfy any waiting period required

by your employer. Coverage will not begin until Guardian has

approved any amount subject to medical underwriting.

Do I have to answer medical questions

as part of purchasing insurance?

No

Can I take the policy with me if I leave

the company?

No

Accidental Death and Dismemberment and General Exclusions

*A loss may be defined as death, quadriplegia, loss of speech and hearing, loss of cognitive function, comatose state in excess of one month, hemiplegia or paraplegia. The loss must occur within 365 days of the accident. Please see contract for specific

definition; definition of loss may vary depending on the benefit payable. We won't pay more than 100% of the Insurance amount for all losses due to the same accident, except as stated. We pay no benefits for any loss caused:

- by willful self injury
- sickness, disease or medical treatment
- by participating in a civil disorder or committing a felony
- by duties performed as a crew member on an aircraft
- by declared or undeclared act of war or armed aggression while a member of any armed force
- while driving a motor vehicle without a current, valid driver's license
- by legal intoxication; or by voluntarily using a non-prescription controlled substance
- Contract #GP-1-R-ADCL1-00 et al

The group policy or individual certificate cannot be contested after it, or any rider or amendment subsequently added to it, has been in force for a period of two years.

If the age or any other relevant factor of the insured has been misstated, Guardian or its subsidiaries will use the true fact in determining whether insurance is in force under the terms of the certificate and in what amounts.

Dependent coverage will not take effect if a dependent, other than a newborn is confined to a hospital or other health care facility, or is unable to perform the normal activities of someone of like age and sex (may vary by state).



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Short Term Disability Benefit Summary

Group ID: 00541601 Member Coverage Type: Non Contributory

Group Name: CAPTIVATION SOFTWARE DBA Class: 0001 ALL ELIGIBLE

CAPTIVATION EMPLOYEES

Waiting Period: 1st of the month following date of As of Date: 09/02/2020

hire

Coverage Information

Weekly Volume 60% of weekly earnings

Guaranteed Issue Present Members \$1,500

Future Members \$1,500

Maximum Amount \$2,000

Waiting Periods (Benefits begin on ...) Accident: Day 8

Illness: Day 8

Maximum Payment Period 12 weeks

Plan Information

When is my policy effective? Coverage is effective after you satisfy any waiting period required

by your employer. Coverage will not begin until Guardian has

approved any amount subject to medical underwriting.

How are my earnings defined? Earnings means your weekly earnings excluding bonuses,

commissions, expense accounts, and any other extra compensation. If you are a partner, earnings means your partnership earnings that are reported on your IRS Form 1040

Schedule E for the prior calendar or tax year.

Can I take the policy with me if I leave

the company?

No.

Do I have to answer medical questions as part of purchasing insurance?

The "guarantee" means the applicant is not required to answer health questions to qualify for coverage up to and including the specified amount, when applicant signs up for coverage during the initial enrollment period. If you decide to purchase more than the

amount guaranteed by Guardian, you must answer some medical questions.

Can I return to work part time while I'm disabled

Yes, you may return to work part time and still be considered disabled. Some restrictions apply.

Short Term Disability General Limitations and Exclusions

We do not pay benefits for charges relating to a covered person: taking part in any war or act of war (including service in the armed forces); committing a felony or taking part in any riot or other civil disorder; or intentionally injuring themselves or attempting suicide while sane or insane, and for the voluntary use of any poison, chemical, prescription or non-prescription drug or controlled substance unless it has been prescribed by a doctor and is used as prescribed.

We do not pay benefits for any job-related or on-the-job injury, or conditions for which Workers' Compensation benefits are payable.

We do not pay benefits during any period in which a covered person is confined to a correctional facility, an employee is not under the care of a doctor, an employee is receiving treatment outside of the US or Canada, and the employee's loss or earnings is not solely due to disability.

This policy provides disability income insurance only. It does not provide "basic hospital", "basic medical", "medical" insurance as defined by the New York State Insurance Department. Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment:

- a. exceeding one year; or
- b. in an area under travel warning by the US Department of State, subject to state specific variations.

Contract #'s GP-1-STD2K-1.0 et al., GP-1-STD07-1.0 et al., Contract # GP-1-STD-15-1.0 et al.

Acts of war etc.

Disability benefits do not cover any disability caused by

- 1. war or any act of war, including service in the armed forces;
- 2. committing a crime or taking part in a riot or civil disorder;
- 3. intentionally injuring yourself or attempting suicide while sane or insane;
- 4. confined to a correctional facility, or
- 5. receiving treatment outside US.

Disability benefits are not paid for charges relating to a covered person: taking part in any war or act of war (including service in the armed forces); committing a felony or taking part in any riot or other civil disorder; or intentionally injuring themselves or attempting suicide while sane or insane, and for the voluntary use of any poison, chemical, prescription or non-prescription drug or controlled substance unless it has been prescribed by a doctor and is used as prescribed.

Disability benefits are not paid during any period in which you are in confined to a correctional facility, you are not under the care of a doctor, you are not receiving treatment outside of the US or Canada, and or your loss of earnings is not due solely to disability.

You will receive a certificate of coverage after you enroll which contains a complete list of exclusions. If there is a difference between this booklet and the certificate of coverage, the certificate of coverage prevails.

Other

When applicable, this coverage will integrate with any mandated state disability plans.



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Long Term Disability Benefit Summary

Group ID: 00541601 Member Coverage Type: Non Contributory

Group Name: CAPTIVATION SOFTWARE DBA Class: 0001 ALL ELIGIBLE

CAPTIVATION EMPLOYEES

Waiting Period: 1st of the month following date of As of Date: 09/02/2020

hire

Coverage Information

Monthly Volume 60% of monthly earnings

Guaranteed Issue Present Members \$6,000

Future Members \$6,000

Maximum Amount \$7,500

Waiting Periods (Benefits begin on ...) Accident: Day 91

Illness: Day 91

Maximum Payment Period Social Security Normal Retirement Age

Plan Information

When is my policy effective? Coverage is effective after you satisfy any waiting period required

by your employer. Coverage will not begin until Guardian has

approved any amount subject to medical underwriting.

Can I take the policy with me if I leave

the company?

No.

Do I have to answer medical questions

as part of purchasing insurance?

The "guarantee" means the applicant is not required to answer health questions to qualify for coverage up to and including the specified amount, when applicant signs up for coverage during the initial enrollment period. If you decide to purchase more than the amount guaranteed by Guardian, you must answer some medical

questions.

How are my earnings defined? Earnings means your monthly earnings excluding bonuses,

commissions, expense accounts, and any other extra compensation. If you are a partner, earnings means your

partnership earnings that are reported on your IRS Form 1040 Schedule E for the prior calendar or tax year.

Can I return to work part time while I'm disabled

Yes, you may return to work part time and still be considered disabled. Some restrictions apply.

Long Term Disability General Limitations and Exclusions

We limit the duration of payments for long term disabilities caused by mental or emotional conditions, or alcohol or drug abuse. We do not pay benefits for charges relating to a covered person: taking part in any war or act of war (including service in the armed forces); committing a felony or taking part in any riot or other civil disorder; or intentionally injuring themselves or attempting suicide while sane or insane, We do not pay benefits for charges for the voluntary use of any poison, chemical, prescription or non-prescription drug or controlled substance unless it has been prescribed by a doctor and is used as prescribed.

We do not pay benefits during any period in which a covered person is confined to a correctional facility, an employee is not under the care of a doctor, an employee is receiving treatment outside of the US or Canada, and the employee's loss or earnings is not solely due to disability.

This policy provides disability income insurance only. It does not provide "basic hospital", "basic medical", or "medical" insurance as defined by the New York State Insurance Department. If the plan is new (not transferred):

Non-NY states: If the plan is new (not transferred): During the exclusion period, this disability plan does not pay charges relating to a pre-existing condition. A pre-existing condition includes any condition for which an employee, in a specified period of time prior to coverage in this plan, consults with a physician, receives treatment, or takes prescribed drugs. If this plan is transferred from another insurance carrier, the time an insured is covered under that plan will count toward satisfying Guardian's pre-existing condition limitation period. Please refer to the plan details for specific time periods. State variations may apply.

Please refer to plan documents for specific time periods.

Contract #'s GP-1-LTD94-A,B,C-1.0 et al.; GP-1-STD94-1.0 et al; GP-1-LTD2K-1.0 et al, GP-1-STD2K-1.0 et al; GP-1-LTD07-1.0 et al, Contract # GP-1-LTD-15-1.0 et al.

Acts of war etc.

Disability benefits do not cover any disability caused by

- 1. war or any act of war, including service in the armed forces;
- 2. committing a crime or taking part in a riot or civil disorder;
- 3. intentionally injuring yourself or attempting suicide while sane or insane;
- 4. confined to a correctional facility, or
- 5. receiving treatment outside US.

Disability benefits are not paid for charges relating to a covered person: taking part in any war or act of war (including service in the armed forces); committing a felony or taking part in any riot or other civil disorder; or intentionally injuring themselves or attempting suicide while sane or insane, and for the voluntary use of any poison, chemical, prescription or non-prescription drug or controlled substance unless it has been prescribed by a doctor and is used as prescribed.

Disability benefits are not paid during any period in which you are in confined to a correctional facility, you are not under the care of a doctor, you are not receiving treatment outside of the US or Canada, and or your loss of earnings is not due solely to disability.

You will receive a certificate of coverage after you enroll which contains a complete list of exclusions. If there is a difference between

this booklet and the certificate of coverage, the certificate of coverage prevails.

Other

Where applicable, this coverage will be integrated with Social Security and with Workers Compensation. Refer to your booklet for additional details.



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