

Basic Life Insurance



Even among people who have life insurance, about **1 in 5** say they don't have enough.¹

▶ PROTECTS YOUR LOVED ONES.

Life insurance provides your loved ones with money they can use for household expenses, tuition, mortgage payments and more.

▶ HELPS PAY YOUR FINAL EXPENSES.

Your beneficiaries may use this money to pay for your burial or cremation, and pay any outstanding medical bills.

▶ PART OF YOUR BENEFIT PACKAGE.

This benefit is completely paid for by your employer. Remember to name your beneficiaries if you haven't done so already.

BENEFITS

For you*	\$50,000. No medical questions asked. Benefits are reduced at age 70 and may reduce again in subsequent years as noted in your Certificate.
Dependent Coverage	\$5,000 for your spouse and \$5,000 for your child(ren), with no medical questions asked. Dependent coverage cannot exceed 50% of your coverage amount. A full benefit is payable for a dependent child who is 6 months to 26. A reduced benefit of \$1,000 is payable for a child from birth to 6 months. In order to be covered, the child must depend primarily on the employee for 50% or more of their support.

*This coverage includes Accidental Death and Dismemberment insurance.

LINN COUNTY, OREGON

POLICY # 946550

Sun Life Assurance Company of Canada

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800-247-6875 • sunlife.com/us

Basic Life Insurance

Frequently asked questions

What is my AD&D benefit?

We will pay your beneficiaries an Accidental Death insurance amount that matches your Basic Life insurance amount, if you die from a covered accident. Additional benefits are available for accidental injuries (i.e., dismemberment) such as loss of limbs, fingers or sight. Refer to your Certificate for a full list of covered accidental injuries.

Can I take my insurance with me if I leave my employer?

Depending upon state variations and your employer's plan, you may have an option to continue group coverage when your employment terminates. Your employer can advise you about your options.

Can I access my life insurance if I become terminally ill?

You may apply to receive a portion of your life insurance to help cover medical and living expenses. This is called an "Accelerated Benefit" and there are some important things to know about it, including that it is not long-term-care insurance, it may be taxable and it may affect your eligibility for public assistance programs. It will also reduce the total amount of the life insurance payment we pay to your beneficiary(ies).

What happens if I become Totally Disabled?

If we determine that you are Totally Disabled and cannot work, your life insurance coverage may continue at no cost. You must meet certain requirements, as detailed in the Certificate.

How does my beneficiary file a death claim?

Your beneficiary(ies) and your employer will complete the appropriate claims forms and submit them to us. We will notify your beneficiaries when the decision is made and if we have any questions. If approved, beneficiaries may elect to receive a lump sum payment or to have the benefit paid into an account where the funds accumulate interest and can be withdrawn at any time. (State restrictions apply and options may vary by state.) If your AD&D claim for an accidental injury is approved, the benefit amount will be paid directly to you.

1. LIMRA, Facts about Life 2018.

Read the *Important information* section for more details including limitations and exclusions.

Important information

To become insured, you must meet the eligibility requirements set forth by your employer. Your coverage effective date will be determined by the Policy and may be delayed if you are not actively at work on the date your coverage would otherwise go into effect. Similarly, dependent coverage, if offered, may be delayed if your dependents are in the hospital (except for newborns) on the date coverage would otherwise become effective. Refer to the Certificate for details.

Limitations and exclusions

The below exclusions and limitations may vary by state law and regulations. This list may not be comprehensive. Please see the Certificate or ask your benefits administrator for details.

Life

In some states, your employer's group policy may exclude payment for suicide that occurs within a specific time period after the insurance or increase in insurance becomes effective. Please see your Certificate for details.

Accidental Death and Dismemberment

We will not pay a benefit that is due to or results from: suicide while sane or insane; injuring oneself intentionally; committing or attempting to commit an assault, felony or other criminal act; war or an act of war; active participation in a riot, rebellion or insurrection; voluntary use of any controlled substance/illegal drugs; operation of a motorized vehicle while intoxicated; bodily or mental infirmity or disease or infection unless due to an accidental injury; riding in or driving any motor-driven vehicle in a race, stunt show, or speed test.

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Sun Life companies include Sun Life and Health Insurance Company (U.S.) and Sun Life Assurance Company of Canada (collectively, "Sun Life").

Group life insurance policies are underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) in all states, except New York, under Policy Form Series 93P-LH, 98P-ADD, 12-GP-01, 15-LF-01, 12-GPPort-P01, 12-LFPort-C-01, 15-ADD-C-01, 13-ADD-C-01 and 13-ADDPort-C-01.

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GVBH-EE-8384

SLPC 29579

Long-Term Disability Insurance



COMMON CAUSES OF DISABILITY

- ✓ Musculoskeletal conditions
- ✓ Circulatory conditions
- ✓ Cancer
- ✓ Nervous system disorders
- ✓ Injuries

▶ HELPS YOU KEEP YOUR LIFE ON TRACK.

If you're unable to work because of a covered disability, Long-Term Disability insurance replaces a portion of your income. After your claim is approved, you will receive a monthly check for your benefits that helps you pay everyday expenses like your mortgage or rent, childcare and groceries.

▶ HELPS YOU RETURN TO WORK.

If you are able, Sun Life has benefits and services, including guidance from vocational rehabilitation counselors, to help you return to work.

PART OF YOUR BENEFIT PACKAGE.

This benefit is completely paid for by your employer.

BENEFITS

Monthly benefit after your claim is approved	You will receive a check for your benefits on a monthly basis. It will replace 60% of your Total Monthly Earnings, up to \$2,500 each month.
When benefits begin	Benefits begin as soon as 180 days from the date of your disability.
Benefits may be paid for	Up to 2 years if you are under age 66 at the start of disability. If you become disabled at age 66 or after, a reduced benefit duration applies.
Additional plan information	This plan provides a benefit for covered disabilities resulting from illness or injury that occur on or off the job.

LONG-TERM DISABILITY FAST FACTS

34.6 months
The length of the average long-term disability claim.¹

You may receive additional benefits if your covered disability begins with a hospital stay of 14 days or more.

LINN COUNTY, OREGON

All Eligible Employees - Option I

POLICY # 946550

Sun Life Assurance Company of Canada

1974638 SEQ12 CL1 05/19/2022 14:16:18

800-247-6875 • sunlife.com/us

Long-Term Disability Insurance

Frequently asked questions

How do I file a Long-Term Disability claim?

If you become disabled after the effective date of coverage, check with your employer to make sure you are eligible for benefits. You can file a claim with us by downloading forms from our website. We'll ask you and your doctor to provide information about your medical condition and your expected recovery.

How do I qualify for benefits?

You'll start receiving disability payments if you satisfy the Elimination Period (see "When benefits begin" in the table) and meet the policy's definition of disability. Generally, disability is defined as your inability to perform some or all of your job duties due to your injury, illness or pregnancy and may require that you have also had a certain percentage of earnings loss due to your disability. Please see your Certificate for details.

What if I have a pre-existing condition?

If you become disabled within 12 months of your insurance taking effect or 12 months following any increase in your amount of insurance, we will not pay any benefit for any pre-existing condition. A pre-existing condition includes anything you have sought treatment for in the 3 months prior to your insurance becoming effective. Treatment can include consultation, advice, care, services or a prescription for drugs or medicine.

Can I work while I'm disabled?

Your plan is designed to encourage and support your return to work. If you are able to work part-time, for example, you may receive part of your benefit while working.

Will income from other sources affect my benefit?

Your benefit may be reduced by Social Security benefits; disability benefits from retirement, government plans or state disability income; other group disability plans; no-fault benefits, salary continuance or sick leave; and return-to-work

earnings. For more information, contact your benefits administrator.

How is my benefit taxed?

If you or your employer pays for all or part of the cost of coverage on a pre-tax basis, all or part of your benefit amount will be Form W-2 taxable income. In these situations, FICA tax deductions may reduce the amount we will pay you.

The group disability insurance policies described in this advertisement provide disability income insurance only.

1. "Chances of disability," Council for Disability Awareness, disabilitycanhappen.org, last accessed April 2019.

Read the *Important information* section for more details including limitations and exclusions.

Important information

The following coverage(s) do not constitute comprehensive health insurance (often referred to as “major medical coverage”). They do NOT provide basic hospital, basic medical, or major medical insurance.

To become insured, you must meet the eligibility requirements set forth by your employer. Your coverage effective date will be determined by the Policy and may be delayed if you are not actively at work on the date your coverage would otherwise go into effect. Refer to the Certificate for details.

Limitations and exclusions

The below exclusions and limitations may vary by state law and regulations. This list may not be comprehensive. Please see the Certificate or ask your benefits administrator for details.

Long-Term Disability

We will not pay a benefit that is caused by, contributed to in any way or resulting from: intentionally self-inflicted injuries; committing or attempting to commit an assault, felony or other criminal act; war or an act of war; active participation in a riot, rebellion or insurrection; operation of a motorized vehicle while intoxicated. We will not pay a benefit if you do not submit proof of your loss as required by us (this covers medical examination, continuing care, death certificate, medical records, etc.); or for any Period of disability during which you are incarcerated. Disability benefits may be limited for certain conditions.

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Group insurance policies are underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) in all states, except New York, under Policy Form Series 93P-LH, 12-GP-01, 12-DI-C-01, 15-GP-01, 16-DI-C-01, TDBPOLICY-2006 and TDI-POLICY.

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SLPC 29579

Voluntary Life Insurance



BENEFITS (You can purchase this coverage at a group rate.)

For you

You can choose from **\$10,000 to \$300,00**—in increments of \$10,000 **not to exceed 10 times** your Basic Annual Earnings. No medical questions asked **up to the Guaranteed Issue amount of \$150,000**.

Benefits are reduced at age 70 and may reduce again in subsequent years as noted in your Certificate.

For your spouse

If you elect coverage for yourself, you can choose from **\$10,000 to \$300,00**—in increments of \$10,000. No medical questions asked **up to the Guaranteed Issue amount of \$50,000**.

The amount you select for your spouse cannot exceed 100% of your coverage amount. Benefits may reduce as noted in your Certificate.

For your child(ren)

If you elect coverage for yourself, you can choose **\$5,000 to \$15,000**—in \$5,000 increments. No medical questions asked.

The amount you select for your child(ren) cannot exceed 100% of your coverage amount. Benefits may reduce as noted in your Certificate. Child(ren) must primarily depend on the employee for 50% or more of their support.

A full benefit is payable for a dependent child who is 6 months to 26. A reduced benefit of \$1,000 is payable for a child from birth to 6 months.

MORE PROTECTION FOR YOUR LOVED ONES.

The people you love and support could face financial challenges without you. Life insurance provides your loved ones with money they can use for household expenses, tuition, mortgage payments and more.

HELPS YOU CLOSE ANY COVERAGE GAPS.

You may have life insurance today, either on your own or through your employer. Now is a good time to ask yourself if you need more coverage.

LINN COUNTY, OREGON

POLICY #: 946550

Frequently asked questions

Do I need to answer any health questions to enroll?

Yes, if you request an amount higher than the Guaranteed Issue amount. You may need to complete health questions if you don't elect coverage when it's first available to you and you want to elect at a later date, or if you want to increase coverage. To answer health questions, please fill out our Evidence of Insurability application. Health questions must be approved by Sun Life before coverage takes effect. Please see your Certificate for details.

Can I take my insurance with me if I leave my employer?

Depending upon state variations and your employer's plan, you may have an option to continue group coverage when your employment terminates. Your employer can advise you about your options.

Can I access my life insurance if I become terminally ill?

You may apply to receive a portion of your life insurance to help cover medical and living expenses. This is called an "Accelerated Benefit" and there are some important things to know about it, including that it is not long-term-care insurance, it may be taxable and it may affect your eligibility for public assistance programs. It will also reduce the total amount of the life insurance payment we pay to your beneficiary(ies).

What happens if I become Totally Disabled?

If we determine that you are Totally Disabled and cannot work, your life insurance coverage may continue at no cost. You must meet certain requirements, as detailed in the Certificate.

How does my beneficiary file a death claim?

Your beneficiary(ies) and your employer will complete the appropriate claims forms and submit them to us. We will notify your beneficiaries when the decision is made and if we have any questions. If approved, beneficiaries may elect to receive a lump sum payment or to have the benefit paid into an account where the funds accumulate interest and can be withdrawn at any time. (State restrictions apply and options may vary by state.)

1. LIMRA, Facts about Life 2018.

Read the *Important information* section for more details including limitations and exclusions.

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Life

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Rates

Employee - Coverage and monthly cost for Employee Voluntary Life.

Rates are effective as of July 1, 2022.

The chart below shows possible coverage amounts and their **monthly** costs.

Find your age bracket (as of the effective date of coverage) to see the cost for the coverage amount you choose.

Coverage amounts	Age and cost												
	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+
\$10,000	0.80	0.80	0.90	1.10	1.80	3.20	5.20	9.10	10.40	18.20	33.80	49.40	78.00
\$20,000	1.60	1.60	1.80	2.20	3.60	6.40	10.40	18.20	20.80	36.40	67.60	98.80	156.00
\$30,000	2.40	2.40	2.70	3.30	5.40	9.60	15.60	27.30	31.20	54.60	101.40	148.20	234.00
\$40,000	3.20	3.20	3.60	4.40	7.20	12.80	20.80	36.40	41.60	72.80	135.20	197.60	312.00
\$50,000	4.00	4.00	4.50	5.50	9.00	16.00	26.00	45.50	52.00	91.00	169.00	247.00	390.00
\$60,000	4.80	4.80	5.40	6.60	10.80	19.20	31.20	54.60	62.40	109.20	202.80	296.40	468.00
\$70,000	5.60	5.60	6.30	7.70	12.60	22.40	36.40	63.70	72.80	127.40	236.60	345.80	546.00
\$80,000	6.40	6.40	7.20	8.80	14.40	25.60	41.60	72.80	83.20	145.60	270.40	395.20	624.00
\$90,000	7.20	7.20	8.10	9.90	16.20	28.80	46.80	81.90	93.60	163.80	304.20	444.60	702.00
\$100,000	8.00	8.00	9.00	11.00	18.00	32.00	52.00	91.00	104.00	182.00	338.00	494.00	780.00
\$110,000	8.80	8.80	9.90	12.10	19.80	35.20	57.20	100.10	114.40	200.20	371.80	543.40	858.00
\$120,000	9.60	9.60	10.80	13.20	21.60	38.40	62.40	109.20	124.80	218.40	405.60	592.80	936.00
\$130,000	10.40	10.40	11.70	14.30	23.40	41.60	67.60	118.30	135.20	236.60	439.40	642.20	1014.00
\$140,000	11.20	11.20	12.60	15.40	25.20	44.80	72.80	127.40	145.60	254.80	473.20	691.60	1092.00
\$150,000	12.00	12.00	13.50	16.50	27.00	48.00	78.00	136.50	156.00	273.00	507.00	741.00	1170.00
\$160,000	12.80	12.80	14.40	17.60	28.80	51.20	83.20	145.60	166.40	291.20	540.80	790.40	1248.00
\$170,000	13.60	13.60	15.30	18.70	30.60	54.40	88.40	154.70	176.80	309.40	574.60	839.80	1326.00
\$180,000	14.40	14.40	16.20	19.80	32.40	57.60	93.60	163.80	187.20	327.60	608.40	889.20	1404.00
\$190,000	15.20	15.20	17.10	20.90	34.20	60.80	98.80	172.90	197.60	345.80	642.20	938.60	1482.00
\$200,000	16.00	16.00	18.00	22.00	36.00	64.00	104.00	182.00	208.00	364.00	676.00	988.00	1560.00
\$210,000	16.80	16.80	18.90	23.10	37.80	67.20	109.20	191.10	218.40	382.20	709.80	1037.40	1638.00
\$220,000	17.60	17.60	19.80	24.20	39.60	70.40	114.40	200.20	228.80	400.40	743.60	1086.80	1716.00
\$230,000	18.40	18.40	20.70	25.30	41.40	73.60	119.60	209.30	239.20	418.60	777.40	1136.20	1794.00
\$240,000	19.20	19.20	21.60	26.40	43.20	76.80	124.80	218.40	249.60	436.80	811.20	1185.60	1872.00
\$250,000	20.00	20.00	22.50	27.50	45.00	80.00	130.00	227.50	260.00	455.00	845.00	1235.00	1950.00
\$260,000	20.80	20.80	23.40	28.60	46.80	83.20	135.20	236.60	270.40	473.20	878.80	1284.40	2028.00
\$270,000	21.60	21.60	24.30	29.70	48.60	86.40	140.40	245.70	280.80	491.40	912.60	1333.80	2106.00
\$280,000	22.40	22.40	25.20	30.80	50.40	89.60	145.60	254.80	291.20	509.60	946.40	1383.20	2184.00
\$290,000	23.20	23.20	26.10	31.90	52.20	92.80	150.80	263.90	301.60	527.80	980.20	1432.60	2262.00
\$300,000	24.00	24.00	27.00	33.00	54.00	96.00	156.00	273.00	312.00	546.00	1014.00	1482.00	2340.00

Rates

Spouse - Coverage and **monthly** cost for Spouse Voluntary Life.

Rates are effective as of July 1, 2022.

The chart below shows possible coverage amounts and their **monthly** costs.

Find your age bracket (as of the effective date of coverage) to see the cost for the coverage amount you choose.

Spouse rates are based on the employee's age.

Coverage amounts	Age and cost												
	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+
\$10,000	0.80	0.80	0.90	1.10	1.80	3.20	5.20	9.10	10.40	18.20	33.80	49.40	78.00
\$20,000	1.60	1.60	1.80	2.20	3.60	6.40	10.40	18.20	20.80	36.40	67.60	98.80	156.00
\$30,000	2.40	2.40	2.70	3.30	5.40	9.60	15.60	27.30	31.20	54.60	101.40	148.20	234.00
\$40,000	3.20	3.20	3.60	4.40	7.20	12.80	20.80	36.40	41.60	72.80	135.20	197.60	312.00
\$50,000	4.00	4.00	4.50	5.50	9.00	16.00	26.00	45.50	52.00	91.00	169.00	247.00	390.00
\$60,000	4.80	4.80	5.40	6.60	10.80	19.20	31.20	54.60	62.40	109.20	202.80	296.40	468.00
\$70,000	5.60	5.60	6.30	7.70	12.60	22.40	36.40	63.70	72.80	127.40	236.60	345.80	546.00
\$80,000	6.40	6.40	7.20	8.80	14.40	25.60	41.60	72.80	83.20	145.60	270.40	395.20	624.00
\$90,000	7.20	7.20	8.10	9.90	16.20	28.80	46.80	81.90	93.60	163.80	304.20	444.60	702.00
\$100,000	8.00	8.00	9.00	11.00	18.00	32.00	52.00	91.00	104.00	182.00	338.00	494.00	780.00
\$110,000	8.80	8.80	9.90	12.10	19.80	35.20	57.20	100.10	114.40	200.20	371.80	543.40	858.00
\$120,000	9.60	9.60	10.80	13.20	21.60	38.40	62.40	109.20	124.80	218.40	405.60	592.80	936.00
\$130,000	10.40	10.40	11.70	14.30	23.40	41.60	67.60	118.30	135.20	236.60	439.40	642.20	1014.00
\$140,000	11.20	11.20	12.60	15.40	25.20	44.80	72.80	127.40	145.60	254.80	473.20	691.60	1092.00
\$150,000	12.00	12.00	13.50	16.50	27.00	48.00	78.00	136.50	156.00	273.00	507.00	741.00	1170.00
\$160,000	12.80	12.80	14.40	17.60	28.80	51.20	83.20	145.60	166.40	291.20	540.80	790.40	1248.00
\$170,000	13.60	13.60	15.30	18.70	30.60	54.40	88.40	154.70	176.80	309.40	574.60	839.80	1326.00
\$180,000	14.40	14.40	16.20	19.80	32.40	57.60	93.60	163.80	187.20	327.60	608.40	889.20	1404.00
\$190,000	15.20	15.20	17.10	20.90	34.20	60.80	98.80	172.90	197.60	345.80	642.20	938.60	1482.00
\$200,000	16.00	16.00	18.00	22.00	36.00	64.00	104.00	182.00	208.00	364.00	676.00	988.00	1560.00
\$210,000	16.80	16.80	18.90	23.10	37.80	67.20	109.20	191.10	218.40	382.20	709.80	1037.40	1638.00
\$220,000	17.60	17.60	19.80	24.20	39.60	70.40	114.40	200.20	228.80	400.40	743.60	1086.80	1716.00
\$230,000	18.40	18.40	20.70	25.30	41.40	73.60	119.60	209.30	239.20	418.60	777.40	1136.20	1794.00
\$240,000	19.20	19.20	21.60	26.40	43.20	76.80	124.80	218.40	249.60	436.80	811.20	1185.60	1872.00
\$250,000	20.00	20.00	22.50	27.50	45.00	80.00	130.00	227.50	260.00	455.00	845.00	1235.00	1950.00
\$260,000	20.80	20.80	23.40	28.60	46.80	83.20	135.20	236.60	270.40	473.20	878.80	1284.40	2028.00
\$270,000	21.60	21.60	24.30	29.70	48.60	86.40	140.40	245.70	280.80	491.40	912.60	1333.80	2106.00
\$280,000	22.40	22.40	25.20	30.80	50.40	89.60	145.60	254.80	291.20	509.60	946.40	1383.20	2184.00
\$290,000	23.20	23.20	26.10	31.90	52.20	92.80	150.80	263.90	301.60	527.80	980.20	1432.60	2262.00
\$300,000	24.00	24.00	27.00	33.00	54.00	96.00	156.00	273.00	312.00	546.00	1014.00	1482.00	2340.00

Child - Coverage and **monthly** cost for Child Voluntary Life.

Rates are effective as of July 1, 2022.

The chart below shows possible coverage amounts and their **monthly** costs.

Coverage amounts	Cost per pay period
\$5,000	1.00
\$10,000	2.00
\$15,000	3.00

Short-Term Disability Insurance



COMMON CAUSES OF DISABILITY

- ✓ Pregnancy
- ✓ Injuries
- ✓ Joint disorders
- ✓ Back disorders
- ✓ Digestive disorders

▶ PROTECTS YOUR INCOME WHEN YOU CAN'T WORK.

If you're unable to work because of a covered disability, Short-Term Disability insurance replaces a portion of your income in addition to providing other services and benefits that help you return to work.

▶ PROVIDES YOU WITH A WEEKLY CHECK.

After your claim is approved, you will receive a check for your benefits that helps you pay everyday expenses like your mortgage or rent, childcare and groceries.

BENEFITS (You can purchase this coverage at a group rate.)

Weekly benefit after your claim is approved	You will receive a check for your benefits on a weekly basis. It will replace 60% of your Total Weekly Earnings, up to \$1,000 each week.
When benefits begin	Benefits begin as soon as 30 days from the date you are unable to work due to an injury and 30 days due to an illness.
Benefits may be paid for	Up to 22 weeks , as long as you are still unable to work due to a covered disability.
Additional plan information	This plan provides a benefit for covered disabilities resulting from illness or injury that are not work-related.

SHORT-TERM DISABILITY FAST FACTS

1 in 4 workers will miss up to 3 months of work due to disability during their career.¹

More than three-quarters of workers are living paycheck to paycheck.²

LINN COUNTY, OREGON

POLICY # 946550

Sun Life Assurance Company of Canada

1974638 SEQ6 CL1 05/19/2022 14:16:02

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Short-Term Disability Insurance

Frequently asked questions

Do I need to answer any health questions to enroll?

If you contribute to the cost of your insurance, you may need to complete health questions if you don't elect coverage when it's first available to you and you want to elect at a later date, or if you want to increase coverage. To answer health questions, please fill out our Evidence of Insurability Application. Health questions must be approved by Sun Life before coverage takes effect. Please see your Certificate for details.

How do I file a Short-Term Disability claim?

If you become disabled after the effective date of coverage, check with your employer to make sure you are eligible for benefits. You can file a claim with us by downloading forms from our website. We'll ask you and your doctor to provide information about your medical condition and your expected recovery.

How do I qualify for benefits?

You'll start receiving disability payments if you satisfy the Elimination Period (see "When benefits begin" in the table) and meet the policy's definition of disability. Generally, disability is defined as your inability to perform some or all of your job duties due to your injury, illness or pregnancy and may require that you have also had a certain percentage of earnings loss due to your disability. Please see your Certificate for details.

What if I have a pre-existing condition?

If you become disabled within 12 months of your insurance taking effect or 12 months following any increase in your amount of insurance, we will not pay any benefit for any pre-existing condition. A pre-existing condition includes anything you have sought treatment for in the 3 months prior to your insurance becoming effective. Treatment can include consultation, advice, care, services or a prescription for

drugs or medicine.

Can I work while I'm disabled?

Your plan is designed to encourage and support your return to work. If you are able to work part-time, for example, you may receive part of your benefit while working.

Will income from other sources affect my benefit?

Your benefit may be reduced by Social Security benefits; disability benefits from retirement, government plans or state disability income such as California SDI; state paid family and medical leaves; other group disability plans; no-fault benefits, salary continuance or sick leave; and return-to-work earnings. For more information or to determine if this coverage is appropriate for you, contact your benefits administrator.

How is my benefit taxed?

If you or your employer pays for all or part of the cost of coverage on a pre-tax basis, all or part of your benefit amount will be Form W-2 taxable income. In these situations, FICA tax deductions may reduce the amount we will pay you.

The group disability insurance policies described in this advertisement provide disability income insurance only.

1. Realitycheckup.org, Council for Disability Awareness, 2018

2. "Living Paycheck to Paycheck is a Way of Life for Majority of U.S. Workers," CareerBuilder.com, Aug. 2017.

Read the *Important information* section for more details including limitations and exclusions.

Important information

The following coverage(s) do not constitute comprehensive health insurance (often referred to as “major medical coverage”). They do NOT provide basic hospital, basic medical, or major medical insurance.

To become insured, you must meet the eligibility requirements set forth by your employer. Your coverage effective date will be determined by the Policy and may be delayed if you are not actively at work on the date your coverage would otherwise go into effect. Refer to your Certificate for details.

Limitations and exclusions

The below exclusions and limitations may vary by state law and regulations. This list may not be comprehensive. Please see the Certificate or ask your benefits administrator for details.

Short-Term Disability

We will not pay a benefit that is caused by, contributed to in any way or resulting from: intentionally self-inflicted injuries; committing or attempting to commit an assault, felony or other criminal act; war or an act of war; active participation in a riot, rebellion or insurrection; operation of a motorized vehicle while intoxicated. We will not pay a benefit for any accident or sickness covered by Worker’s Compensation or similar law; or for any work-related illness or injuries unless otherwise stated previously; or if you do not submit proof of your loss as required by us (this covers medical examination, continuing care, death certificate, medical records, etc.).

This Overview is preliminary to the issuance of the Policy. Refer to your Certificate for details. Receipt of this Overview does not constitute approval of coverage under the Policy. In the event of a discrepancy between this Overview, the Certificate and the Policy, the terms of the Policy will govern. Product offerings may not be available in all states and may vary depending on state laws and regulations.

Sun Life companies include Sun Life and Health Insurance Company (U.S.) and Sun Life Assurance Company of Canada (collectively, “Sun Life”).

Group insurance policies are underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) in all states, except New York, under Policy Form Series 93P-LH, 15-GP-01, 12-DI-C-01, 16-DI-C-01, TDBPOLICY-2006 and TDI-POLICY..

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GVBH-EE-8384

SLPC 29579

Rates

Employee - monthly rate for Short-Term Disability.

Rates are effective as of July 1, 2022.

Short-Term Disability coverage is contributory. You are responsible for paying for all or a part of the cost through payroll deduction.

Find your age bracket (as of the effective date of coverage) to see your rate.

Follow the example below to figure out your monthly and pay period costs.

Your age	Rate*
Under 25	\$0.300
25 - 29	\$0.300
30 - 34	\$0.310
35 - 39	\$0.320
40 - 44	\$0.340
45 - 49	\$0.350
50 - 54	\$0.410
55 - 59	\$0.500
60 - 64	\$0.590
65 - 69	\$0.730
70+	\$0.880

Example weekly benefit (60% of earnings)	Divide by 10	Multiply by rate	Example monthly cost
\$350	/ 10 = 35	x 0.300	= \$10.50
Your weekly benefit (60% of earnings)	Divide by 10	Multiply by rate	Your monthly cost
\$ _____	/ 10 = _____	x \$ _____	= \$ _____
Your monthly cost	Multiply by 12 months	Annual cost	Divide by your number of pay periods per year (ex: 12,24,26,52,etc.)
\$ _____	x 12	= \$ _____	/ _____ = \$ _____
			Your estimated cost per pay period

*Contact your employer to confirm your part of the cost.

Long-Term Disability Insurance



COMMON CAUSES OF DISABILITY

- ✓ Musculoskeletal conditions
- ✓ Circulatory conditions
- ✓ Cancer
- ✓ Nervous system disorders
- ✓ Injuries

▶ HELPS YOU KEEP YOUR LIFE ON TRACK.

If you're unable to work because of a covered disability, Long-Term Disability insurance replaces a portion of your income. After your claim is approved, you will receive a monthly check for your benefits that helps you pay everyday expenses like your mortgage or rent, childcare and groceries.

▶ HELPS YOU RETURN TO WORK.

If you are able, Sun Life has benefits and services, including guidance from vocational rehabilitation counselors, to help you return to work.

BENEFITS (You can purchase this coverage at a group rate.)

Monthly benefit after your claim is approved	You will receive a check for your benefits on a monthly basis. It will replace 60% of your Total Monthly Earnings, up to \$5,000 each month.
When benefits begin	Benefits begin as soon as 180 days from the date of your disability.
Benefits may be paid for	Up to age 65, but not less than 5 years, if you are age 60 or under at the start of disability. If you become disabled after age 60, additional benefit duration restrictions apply.
Additional plan information	This plan provides a benefit for covered disabilities resulting from illness or injury that occur on or off the job.

LONG-TERM DISABILITY FAST FACTS

34.6 months

The length of the average long-term disability claim.¹

You may receive additional benefits if your covered disability begins with a hospital stay of 14 days or more.

LINN COUNTY, OREGON

All Eligible Employees - Option II

POLICY # 946550

Sun Life Assurance Company of Canada

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Long-Term Disability Insurance

Frequently asked questions

Do I need to answer any health questions to enroll?

If you contribute to the cost of your insurance, you may need to complete health questions if you don't elect coverage when it's first available to you and you want to elect at a later date, or if you want to increase coverage. To answer health questions, please fill out our Evidence of Insurability application. Health questions must be approved by Sun Life before coverage takes effect. Please see your Certificate for details.

How do I file a Long-Term Disability claim?

If you become disabled after the effective date of coverage, check with your employer to make sure you are eligible for benefits. You can file a claim with us by downloading forms from our website. We'll ask you and your doctor to provide information about your medical condition and your expected recovery.

How do I qualify for benefits?

You'll start receiving disability payments if you satisfy the Elimination Period (see "When benefits begin" in the table) and meet the policy's definition of disability. Generally, disability is defined as your inability to perform some or all of your job duties due to your injury, illness or pregnancy and may require that you have also had a certain percentage of earnings loss due to your disability. Please see your Certificate for details.

What if I have a pre-existing condition?

If you become disabled within 12 months of your insurance taking effect or 12 months following any increase in your amount of insurance, we will not pay any benefit for any pre-existing condition. A pre-existing condition includes anything you have sought treatment for in the 3 months prior to your insurance becoming effective. Treatment can include consultation, advice, care, services or a prescription for drugs or medicine.

Can I work while I'm disabled?

Your plan is designed to encourage and support your return to work. If you are able to work part-time, for example, you may receive part of your benefit while working.

Will income from other sources affect my benefit?

Your benefit may be reduced by Social Security benefits; disability benefits from retirement, government plans or state disability income; other group disability plans; no-fault benefits, salary continuance or sick leave; and return-to-work earnings. For more information or to determine if this coverage is appropriate for you, contact your benefits administrator.

How is my benefit taxed?

If you or your employer pays for all or part of the cost of coverage on a pre-tax basis, all or part of your benefit amount will be Form W-2 taxable income. In these situations, FICA tax deductions may reduce the amount we will pay you.

The group disability insurance policies described in this advertisement provide disability income insurance only.

1. "Chances of disability," Council for Disability Awareness, disabilitycanhappen.org, last accessed April 2019.

Read the *Important information* section for more details including limitations and exclusions.

Important information

The following coverage(s) do not constitute comprehensive health insurance (often referred to as “major medical coverage”). They do NOT provide basic hospital, basic medical, or major medical insurance.

To become insured, you must meet the eligibility requirements set forth by your employer. Your coverage effective date will be determined by the Policy and may be delayed if you are not actively at work on the date your coverage would otherwise go into effect. Refer to the Certificate for details.

Limitations and exclusions

The below exclusions and limitations may vary by state law and regulations. This list may not be comprehensive. Please see the Certificate or ask your benefits administrator for details.

Long-Term Disability

We will not pay a benefit that is caused by, contributed to in any way or resulting from: intentionally self-inflicted injuries; committing or attempting to commit an assault, felony or other criminal act; war or an act of war; active participation in a riot, rebellion or insurrection; operation of a motorized vehicle while intoxicated. We will not pay a benefit if you do not submit proof of your loss as required by us (this covers medical examination, continuing care, death certificate, medical records, etc.); or for any Period of disability during which you are incarcerated. Disability benefits may be limited for certain conditions.

This Overview is preliminary to the issuance of the Policy. Refer to your Certificate for details. Receipt of this Overview does not constitute approval of coverage under the Policy. In the event of a discrepancy between this Overview, the Certificate and the Policy, the terms of the Policy will govern. Product offerings may not be available in all states and may vary depending on state laws and regulations.

Sun Life companies include Sun Life and Health Insurance Company (U.S.) and Sun Life Assurance Company of Canada (collectively, “Sun Life”).

Group insurance policies are underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) in all states, except New York, under Policy Form Series 93P-LH, 12-GP-01, 12-DI-C-01, 15-GP-01, 16-DI-C-01, TDBPOLICY-2006 and TDI-POLICY.

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GVBH-EE-8384

SLPC 29579

Rates

Employee - monthly rate for Long-Term Disability.

Rates are effective as of July 1, 2022.

Long-Term Disability coverage is contributory. You are responsible for paying for all or a part of the cost through payroll deduction.

Follow the example below to figure out your monthly and pay period costs.

Rate*
\$0.690

Example monthly earnings	Divide by 100	Multiply by rate	Example monthly cost	
\$2,500	/ 100 = 25	x 0.690	= \$17.25	
Your monthly earnings	Divide by 100	Multiply by rate	Your monthly cost	
\$ _____	/ 100 = _____	x \$ _____	= \$ _____	
Your monthly cost	Multiply by 12 months	Annual cost	Divide by your number of pay periods per year (ex: 12,24,26,52,etc.)	Your estimated cost per pay period
\$ _____	x 12	= \$ _____	/ _____	= \$ _____

*Contact your employer to confirm your part of the cost.

Accidental Death and Dismemberment (AD&D) Insurance

Linn County, Oregon | 946550

Protect your savings and your family

A serious accident can change the course of your life and leave you and the people you love with unexpected expenses. AD&D insurance provides financial protection if you or anyone on your plan suffers from a covered accidental injury or accidental death.

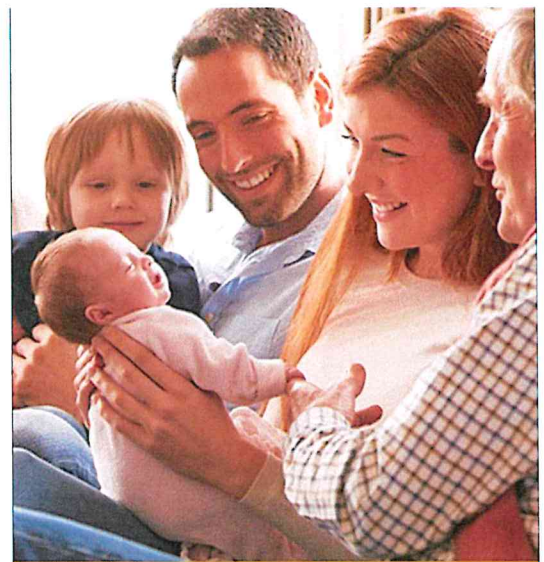
How it works

You have the opportunity to purchase additional Accidental Death & Dismemberment (AD&D) insurance, beyond what your employer has provided for you.

You are responsible for paying all or a portion of the cost.

Benefits

For you	<p>You can choose from \$10,000 to \$300,000—in increments of \$10,000, not to exceed 5 times your basic annual earnings.</p> <p>Benefits are reduced to 65% at age 70 and to 50% at age 75.</p> <p>Coverage ends at termination of employment or retirement.</p>
For your spouse	<p>If you elect coverage for yourself, you can choose 50 of your coverage—up to \$180,000.</p> <p>Spouse rates are based on spouse age.</p> <p>Benefit may be reduced when the employee benefit amount is reduced.</p>
For your child(ren)	<p>If you elect coverage for yourself, you can choose 10% of your coverage—up to \$75,000.</p> <p>Benefit may be reduced when the employee benefit amount is reduced.</p> <p>A full benefit is payable for a dependent child from birth to 26 years old.</p>



Reasons why you may need AD&D insurance



Provide financial support for you or others



Pay household expenses



Hire help for child or elder care



Funeral or medical expenses

You or your beneficiaries can use the benefit to pay for injury-related expenses or to help replace lost income—however way the money is needed.

Covered accidental injuries

You may receive up to 100% of your AD&D coverage amount for losses resulting from one accident, such as paralysis, speech or hearing loss, or thumb and index finger loss. If a covered accident results in your death, your beneficiary will receive 100% of your AD&D coverage amount.

This chart shows a partial list of AD&D insurance benefit amounts as a percentage of coverage. You may refer to the certificate for the full list of covered accidental injuries.

Benefits

Accidental injury	The plan pays
Accidental death	100%
Quadriplegia	100%
Loss of sight of one eye	50%
Loss of speech only or hearing only	50%
Loss of limb (arm or leg)	50%
Loss of thumb and index finger on the same hand	25%

Accidental Death and Dismemberment FAQ

If I do not elect coverage now, can I elect it in the future?

If you do not elect coverage when you are first eligible, you will be required to wait 6 months until you are eligible to elect coverage again.

Can I take my insurance with me if I leave my employer?

Depending upon state variations and your employer's plan, you may have an option to continue group coverage when your employment terminates. Your employer can advise you about your options.

How is my benefit claim filed and paid?

In the event of your accidental death or injury, you or your beneficiary(ies) and your employer will complete

the appropriate claims forms and submit these to Sun Life. Our claims examiners review the claim and gather additional information if necessary. We will notify you or your beneficiaries when the decision is made. If your death claim is approved, beneficiaries may elect to receive a lump sum payment or to have the benefit paid into an account where the funds accumulate interest and can be withdrawn at any time. (State restrictions apply, and options may vary by state.) If your AD&D claim for an accidental injury is approved, the benefit amount will be paid directly to you.

Read the important plan provisions section for more information including limitations and exclusions.

Rate Sheet

Employee - Coverage and **Monthly** cost for employee Voluntary AD&D.

Rates are effective as of 07/01/2022.

The chart below shows possible coverage amounts and the corresponding costs per monthly pay period.

Coverage Amounts	Cost per Monthly pay period
\$10,000	0.30
\$20,000	0.60
\$30,000	0.90
\$40,000	1.20
\$50,000	1.50
\$60,000	1.80
\$70,000	2.10
\$80,000	2.40
\$90,000	2.70
\$100,000	3.00
\$110,000	3.30
\$120,000	3.60
\$130,000	3.90
\$140,000	4.20
\$150,000	4.50
\$160,000	4.80
\$170,000	5.10
\$180,000	5.40
\$190,000	5.70
\$200,000	6.00
\$210,000	6.30
\$220,000	6.60
\$230,000	6.90
\$240,000	7.20
\$250,000	7.50
\$260,000	7.80
\$270,000	8.10
\$280,000	8.40
\$290,000	8.70
\$300,000	9.00

Family - Coverage and Monthly cost for Family Voluntary Accidental Death & Dismemberment Insurance.

Family coverage includes employee, spouse and child(ren).

Spouse Coverage equals 50% of your coverage amount or 60% of your coverage amount if no dependent children are covered.

Child(ren) Coverage equals 10% of your coverage amount or 25% of your coverage amount if there is no spouse coverage.

Family - Coverage and Monthly cost for family Voluntary AD&D.

Rates are effective as of 07/01/2022.

The chart below shows possible coverage amounts and the corresponding costs per monthly pay period.

Coverage Amounts	Cost per Monthly pay period
\$10,000	0.50
\$20,000	1.00
\$30,000	1.50
\$40,000	2.00
\$50,000	2.50
\$60,000	3.00
\$70,000	3.50
\$80,000	4.00
\$90,000	4.50
\$100,000	5.00
\$110,000	5.50
\$120,000	6.00
\$130,000	6.50
\$140,000	7.00
\$150,000	7.50
\$160,000	8.00
\$170,000	8.50
\$180,000	9.00
\$190,000	9.50
\$200,000	10.00
\$210,000	10.50
\$220,000	11.00
\$230,000	11.50
\$240,000	12.00
\$250,000	12.50
\$260,000	13.00
\$270,000	13.50
\$280,000	14.00
\$290,000	14.50
\$300,000	15.00