

Amalgamated Life Insurance Company
Annually Renewable Term Life Insurance

Terms and Conditions

As part of your membership in Secure Card Association of America (hereinafter "Association"), you are eligible to receive group term life insurance coverage (hereinafter "Insurance") underwritten by Amalgamated Life Insurance Company (hereinafter "Insurer"), subject to the terms and conditions as stated in the group master policy (hereinafter "Policy") issued by the Insurer to the Association and the Certificate of Insurance (hereinafter "Certificate") issued by the Insurer to eligible class members of the Association. Please see the Amount of Insurance Coverage section below for the death benefit amount applicable to your age on the effective date.

The Terms and Conditions of the Insurance available to you are summarized below. In the event of a conflict between terms within this document with those in the Policy and Certificate, only the terms and conditions as stated in the Policy and Certificate will control.

Eligibility

Initial and continued eligibility for Insurance is determined by your active membership in Association and your meeting the Eligible Class criteria as defined by the Association. Eligible Class criteria is shown on the Schedule of Insurance in the Insurance Certificate. Eligibility is also dependent upon the Association's initial and continued payment of premiums due for the Insurance.

Amount of Insurance Coverage

Subject to meeting the criteria of Eligible Class, the benefits of Insurance are as follows:

Age on Effective Date**	Death Benefit* during the 6 months Waiting Period	Death Benefit* during Months 7 and after
15-59	\$10,000 Accidental Death only coverage	\$10,000 Life coverage
60-69	\$10,000 Accidental Death only coverage	\$5,000 Life coverage + \$5,000 Accidental Death
70+	\$10,000 Accidental Death only coverage	\$10,000 Accidental Death only coverage

*Death Benefits are subject to a Waiting Period of 6 months. Death Benefits during the Waiting Period are limited to \$10,000 when death is due to accidental causes.

** Benefits are determined by your age at the time you become a member of the Secure Card Association of America.

Basic Limitations and Exclusions (see your certificate for state specific limitations and exclusions)

Insurer will not pay natural Death Benefits for any loss resulting from suicide, within two years of the effective date of your coverage under the Insurance.

Insurer will not pay Accidental Death Benefits for losses resulting from or caused directly or indirectly by:

1. War or any act of war, whether declared or undeclared, terrorism, insurrection, rebellion, or participation in a riot or civil commotion;
2. Sickness, disease or bodily infirmity. This does not include bacterial infection which results from an accidental cut or wound or accidental ingestion of a poisonous food substance;
3. Taking a poison or asphyxiation from or inhaling of gas, or intentionally taking narcotics, drugs, barbiturates, hallucinogenic drugs, alcohol or any combination of these when not part of a professional medical treatment;
4. Intentionally self inflicted injury, while sane or insane;
5. Suicide or attempted suicide, while sane or insane;
6. Injury sustained while engaged in or taking part in aeronautics and/or aviation of any description or resulting from being in an aircraft except while a fare-paying passenger in any aircraft then licensed to carry passengers
7. Commission of or participation in a crime.

Beneficiary

The Beneficiary is as named by you. In absence of a named Beneficiary, the Insurer may rely on affidavits or other evidence in identifying the persons in any class named as Beneficiary. Any payment the Insurer makes in good faith based on an affidavit or other evidence shall satisfy to that extent what the Insurer would owe under the Certificate.

Proof of Death

Any death benefit payable will be paid upon Insurer's due proof of the member's death. A claim for benefits along with proof of death must be sent to the Insurer's Home Office as shown below. Claim forms will be made available upon request.

Amalgamated Life Insurance Company
Attention: Life Claims Department
333 Westchester Avenue, White Plains, NY 10604
[914.367.5000](tel:914.367.5000) | [866.975.4089](tel:866.975.4089)

Death Benefit Payment

The Death Benefit payable under the Certificate will be paid on one lump sum.

Incontestability

All statements made by you are representations and not warranties. No statement shall be used to contest your coverage or the validity of your coverage under the Certificate, unless it is in writing and signed by you and a copy of such statement is furnished to you.

After coverage has been in force for 2 years under the Certificate, no statement of yours shall be used to void the Insurance or to deny or reduce a claim for loss incurred after the 2 year period, except non-payment of premium.

Termination of Insurance

Insurance shall terminate on the earliest of:

- The date the Policy terminates;
- The date the Death Benefit is paid;
- The date you cease to be a member of an Eligible Class for Insurance;
- Any Premium due date at which we terminate the Policy with 30 days written notice to the Association.

Access to the Insurance Certificate

You may access the Insurance Certificate by visiting the Union Plus All-In-One Prepaid Visa mobile app or logging on to unionallinone.com using your login information.

By accessing / downloading the Insurance Certificate, you are consenting to electronic delivery of the Insurance Certificate. The Certificate may be saved to your computer / mobile device, or printed for safe keeping. Paper copies of the Certificate are available from the Insurer by writing or calling:

Amalgamated Life Insurance Company
Attention: Life Claims Department
333 Westchester Avenue
White Plains, NY 10604
[914.367.5000](tel:914.367.5000) | [866.975.4089](tel:866.975.4089)

Policy# 26TX04
Policy Form Number ALTLP-TX-05

Privacy Policy

Insurer complies with all state and federal privacy laws as it applies to this Insurance. A copy of Insurer's Privacy Policy will be included with your Insurance Certificate. You may also view the Privacy Policy of the Insurer by visiting www.amalgamatedlife.com