STANDARD LIFE AND ACCIDENT INSURANCE COMPANY

A Stock Life Insurance Company Home Office: One Moody Plaza, Galveston, Texas, 77550

ACCIDENTAL DEATH, DISMEMBERMENT, AND PARALYSIS RIDER

This Rider is part of the Group Policy and must be attached to the Covered Employee's Certificate providing evidence of coverage under the Group Policy. This Rider is effective on the later of the Covered Employee's Certificate Date or the Effective Date shown below. This Rider is subject to all provisions, terms, definitions, and limitations of the Group Policy which do not conflict with the provisions of this Rider.

DEFINITIONS

In addition to the definitions contained in the Policy, the following definitions apply to this Rider:

ACCIDENTAL BODILY INJURY - The unforeseen, unexpected, and unanticipated result of an external violent act or event that is independent of all other causes, including sickness or bodily infirmity, which occurs while coverage under this Rider is in effect for the injured Covered Person.

ACCIDENTAL DEATH - Loss of life resulting from an Accidental Bodily Injury. The death must occur within 90 days of the Accidental Bodily Injury.

AIR BAG SYSTEM – An automatically inflatable passive restraint system that is designed to provide automatic crash protection in front or side impact Automobile accidents and meets the Federal Vehicle Safety Standards of the National Highway Traffic Safety Administration.

AUTOMOBILE – A four-wheeled private passenger motor vehicle licensed for use on public highways and not used to transport passengers for hire.

CLOSE RELATIVE means anyone related to a Covered Person by blood, marriage, or adoption; or a court appointed representative.

COVERED LOSS – Loss for an Accidental Death, Dismemberment, or Paralysis must occur within 90 days of an Accidental Bodily Injury subject to the Exclusions and Limitations section of this Rider. Covered Loss also includes an Accidental Death, Dismemberment, or Paralysis resulting from unavoidable exposure to the elements if such loss occurs within 90 days of the date of an Accidental Bodily Injury.

COVERED PERSON means the Employee. The definition may also include the Employee's Spouse or Adult Dependent if coverage under this Rider was selected by the Employee for that dependent.

DISMEMBERMENT - An Accidental Bodily Injury that, directly and independently of all other causes, results in the loss of:

- 1. A hand the actual severance at or above the wrist;
- 2. A foot the actual severance at or above the ankle;
- 3. The thumb <u>and</u> index finger on the <u>same</u> hand the actual severance at or above the point at which they are attached to the hand;
- 4. Sight the total and permanent loss of sight;
- 5. Speech the total and permanent loss of speech; or
- 6. Hearing the total and permanent loss of hearing.

HOME/VEHICLE MODIFICATION means changes to a Covered Employee's primary residence and/or vehicle intended to accommodate a Covered Person after Dismemberment or Paralysis.

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PARALYSIS - An Accidental Bodily Injury that, directly and independently of all other causes, results in:

- 1. Hemiplegia the total and permanent paralysis of both an arm and a leg on the same side of the body;
- 2. Paraplegia the total and permanent paralysis of both legs; or
- 3. Quadriplegia the total and permanent paralysis of both arms and both legs.

PHYSICIAN means a person, other than You, a Close Relative, or a business or professional partner who is:

- 1. Duly licensed to practice medicine in the jurisdiction where the Diagnosis is made, or the procedure performed where such jurisdiction is a continuing member of the United States of America or a territory within the jurisdiction of the United States of America (embassies, military zones, and similarly designated non-domestic extensions of the United States government are <u>not</u> included); and
- 2. Acting within the scope of his/her license.

PUBLIC TRANSPORTATION – A public passenger conveyance operated by a licensed common carrier for the transportation of the general public for a fare and operating on regularly scheduled passenger routes with a definite schedule of departures and arrival times. (This definition excludes taxis, limousines, and chartered vehicles.)

SEATBELT – A properly installed combination lap and shoulder restraint system that meets the Federal Vehicle Safety Standards of the National Highway Traffic Safety Administration. Seatbelt will include a lap belt only if the Automobile was not equipped with a combination lap and shoulder restraint system when manufactured. This benefit is not payable if a seatbelt is not worn or the seatbelt is not available in the Automobile.

BENEFITS

The following benefits are payable in addition to the benefits otherwise payable under the Group Policy. This Rider must be in force for a Covered Person at the time of such person's death.

ACCIDENTAL DEATH BENEFIT - If a Covered Person dies as the result of an Accidental Bodily Injury, We will pay the Beneficiary that Covered Person's Accidental Death Benefit, shown in the Covered Employee's Certificate Schedule.

DISMEMBERMENT AND PARALYSIS BENEFITS - If a Covered Person suffers Dismemberment or Paralysis, We will pay the Covered Employee the applicable benefit shown in the following tables. If more than one Dismemberment or Paralysis occurs as a result of the same Accidental Bodily Injury, We will pay a single benefit for the loss which has the largest benefit. This Rider must be in force at time of Dismemberment or Paralysis.

DISMEMBERMENT OR COMPLETE LOSS OF, WITH OR WITHOUT REATTACHMENT:

Two or more: hand, foot, or sight of one eye
Loss of speech and loss of hearing in both ears
One: hand, foot, or sight of one eye
Loss of speech or loss of hearing in both ears
Loss of hearing of one ear
Loss of thumb and index finger on same hand

100% of Accidental Death Benefit
50% of Accidental Death Benefit
25% of Accidental Death Benefit
25% of Accidental Death Benefit

PARALYSIS

Quadriplegia 100% of Accidental Death Benefit Paraplegia 75% of Accidental Death Benefit Hemiplegia 50% of Accidental Death Benefit

BENEFIT LIMITS - Total benefits payable for a Covered Person's Accidental Death, Dismemberment, or Paralysis as the result of single event causing Accidental Bodily Injury to such Covered Person shall not exceed the Accidental Death Benefit otherwise payable for that Covered Person.

ADDITIONAL BENEFITS

SEATBELT BENEFIT – In addition to other benefits payable under this Rider, if a Covered Person's death was the result of an Automobile accident and such Covered Person was wearing and properly utilizing a Seatbelt at the time of the accident, as evidenced by a police accident report, We will pay the Beneficiary a Seatbelt Benefit equal to 10% of that Covered Person's Accidental Death Benefit.

AIR BAG BENEFIT – In addition to other benefits payable under this Rider, if a Covered Person's death was the result of an Automobile accident, We will pay the Beneficiary an Air Bag Benefit equal to 5% of such Covered Person's Accidental Death Benefit if:

- 1. The Automobile is equipped with an Air Bag System that was installed as original equipment by the Automobile manufacturer;
- 2. Such Covered Person was seated in the driver's or a passenger's seating position intended to be protected by the Air Bag System; and
- 3. the Air Bag System deployed, as evidenced by a police accident report.

HOME/VEHICLE MODIFICATION - In addition to other benefits payable under this Rider, if a Covered Employee suffers a Dismemberment or Paralysis and his/her home and/or vehicle requires modification as a result of such Covered Loss, We will pay 10% of the Accidental Death Benefit up to \$10,000 for such modifications.

COMMON CARRIER BENEFIT – In addition to other benefits payable under this Rider, if a Covered Person's death occurs while the Covered Person was riding as a fare-paying passenger on Public Transportation, We will pay the Beneficiary a Common Carrier Benefit equal to 100% of such Covered Person's Accidental Death Benefit.

EXCLUSIONS AND LIMITATIONS

Benefits for Accidental Death, Dismemberment, or Paralysis will not be payable for any loss caused in whole or in part by, or resulting from, any of the following:

- 1. Suicide or intentionally self-inflicted injury while sane or insane;
- 2. Sickness, disease, physical or mental infirmity, pregnancy, or any other kind of illness, or any medical or surgical care, diagnosis, or treatment for such condition;
- 3. Commission of or attempt to commit a felony or to which a contributing cause was the Covered Person's being engaged in an illegal occupation;
- 4. Involvement in an accident that occurs while driving a motor vehicle while intoxicated or under the influence according to the laws of the jurisdiction in which the accident occurs;
- 5. Travel in or descent from any vehicle or device for aerial navigation, except as a fare paying passenger in an aircraft operated by a commercial airline (other than a charter airline) on a regularly scheduled passenger trip:
- 6. Service in the military or any auxiliary unit attached thereto:
- 7. Participation in any of the following activities: motor vehicle or boat racing, hang gliding, sky diving, mountain or rock climbing, related hazardous activities or any hazardous avocation;
- 8. The release of nuclear energy: or
- 9. Bacterial infection, not occurring along with or as a result of Accidental Bodily Injury.

CLAIMS

NOTICE OF CLAIM - We must be notified of a claim for benefits under this Rider, in writing, within 90 days of the Covered Loss. The written notice must be delivered to Our agent or Us. The notice must include sufficient information to identify the claimant. If notice cannot reasonably be provided within 90 days of a loss, notice must be provided as soon as is reasonably possible.

CLAIM FORMS - After We receive notice of claim, We will send claim forms to the claimant within 15 days. If the forms have not been received within 15 days, the claimant may send Us written proof of loss describing the nature and extent of the claim. The written proof of loss must be sent to Us within the time limit stated in the following paragraph.

WRITTEN PROOF OF LOSS - We will pay benefits under this Rider after We receive written proof of loss satisfactory to Us. We must receive such proof within 90 days after the Covered Loss. If it is not reasonably possible to provide this information within such time, written proof of loss must be submitted as soon as reasonably possible but not later than one year after the Covered Loss.

Written proof of loss means the completion and submission of all documents needed to support a Covered Loss, such as a claimant's statement, attending Physician's statement, Accident report, and death certificate, if applicable.

PHYSICAL EXAMINATION - At Our expense, We reserve the right to have a Physician of Our choosing examine the Covered Person while a claim is pending to determine eligibility for benefits. In the event that the Physician We choose provides a different diagnosis of the condition, We reserve the right to rely on the certification from the Physician of Our choosing for claim purposes. We may have an autopsy performed, if necessary, unless prohibited by law.

TIME OF PAYMENT OF CLAIMS - All benefits described in this Rider will be paid as soon as We have received written proof of loss satisfactory to Us.

PAYMENT OF CLAIMS – Benefits other than loss of life are payable to the Insured, unless a different payee is designated. Life Insurance Accidental Death Benefit are payable to the Beneficiary.

LEGAL ACTIONS - No legal action may be brought to recover under the Policy within 60 days after written proof of loss has been provided to Us as required nor more than 3 years from the time written proof of loss is required to be furnished.

TERMINATION

Termination of Rider – This Rider will terminate on the earliest of:

- 1. The date the Rider or Policy Lapses for failure to pay premiums, subject to the Grace Period;
- 2. The date the Policy terminates;
- 3. The date of the Policyholder's written request to terminate this Rider.

Termination of Coverage – A Covered Person's coverage under this Rider will end on the earliest of:

- 1. The Anniversary Date on or following the Covered Person's 65th birthday;
- 2. The date the Rider terminates; or
- 3. The date the Covered Person's coverage ends under the Policy.

Coverage under this Rider expires concurrently with Your coverage under the Group Policy, unless while Your coverage under the Group Policy is still in effect, You notify SLAICO in writing to terminate coverage under this Rider or this Rider is otherwise modified, cancelled, or replaced by SLAICO or the Group Policyholder in accordance with the terms of the Group Policy.

Effective Date, if different from Certificate Date:

Signed on behalf of Standard Life and Accident Insurance Company, at Galveston, Texas.

Secretary