

LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT (AD&D) INSURANCE PLANS

To help you provide financial security to your family if you die while employed, Learning Care Group provides you with a Basic Life and Accidental Death & Dismemberment (AD&D) Insurance Plan. The Company also makes available an optional Supplemental Life and AD&D Insurance Plan which allows you to purchase additional coverage for yourself, and an optional Dependent Life Insurance Plan which allows you to purchase Life Insurance for your spouse/domestic partner and/or dependent children.

The Life and AD&D Insurance Plans are subject to various state laws (depending on the state in which you reside). Those state laws may modify or alter the general provisions of the Life and AD&D Insurance Plans as described in this SPD. Please refer to the State-specific notices contained at the beginning of the Life Plan certificate for information regarding any changes to your rights and benefits under this Plan based upon your state of residence.

Life Insurance Benefits At-a-Glance

	REGULAR PART-TIME HOURLY	FULL-TIME FIELD HOURLY & FIELD NON-MANAGEMENT SALARIED	FULL-TIME SUPPORT CENTRAL, DIVISIONAL AND DISTRICT EMPLOYEES, SALARIED FIELD MANAGERS, SCHOOL DIRECTORS, PRESCHOOL MANAGERS, SCHOOL MANAGERS, ASSOCIATE DIRECTORS, ASSOCIATE DIRECTORS - FL, DIRECTORS IN TRAINING, SCHOOL MANAGERS, SR. ASSOCIATE DIRECTORS, AND SCHOOL AGE MANAGERS
Basic Life	Life/AD&D benefit equal to \$5,000	Life/AD&D benefit is equal to 1 times annual base pay, rounded up to the next thousand, not to exceed \$50,000	Life/AD&D benefit is equal to 1.5 times annual base pay, rounded up to the next thousand, not to exceed \$150,000
Supplemental Life	Life benefit offered in increments of \$10,000 not to exceed \$60,000.	Life/AD&D benefit up to 5 times salary in increments of \$10,000, not to exceed \$500,000	Life/AD&D benefit up to 5 times salary in increments of \$10,000, not to exceed \$500,000
Spouse Life	None	Up to 100% of employee Supplemental Life coverage amount in increments of \$5,000, not to exceed \$500,000	Up to 100% of employee Supplemental Life coverage amount in increments of \$5,000, not to exceed \$500,000
Child Life	None	Up to 100% of employee Supplemental Life coverage amount in increments of \$2,000, not to exceed \$10,000 (not to exceed \$1,000 for children under 6 months of age)	Up to 100% of employee Supplemental Life coverage amount in increments of \$2,000, not to exceed \$10,000 (not to exceed \$1,000 for children under 6 months of age)

The Life Insurance coverage is issued by Metropolitan Life Insurance Company (“MetLife”). This Summary Plan Description is intended to be a summary of your benefits and does not include all policy provisions, exclusions and limitations. A Booklet-Certificate, with complete information, including limitations and exclusions, is available in the library at www.lcgbenefits.com or by contacting the Benefits Department. If there is a discrepancy between this document and the Certificate of Coverage issued by MetLife, the terms of the Certificate of Coverage will govern.

How the Life Insurance Plans Work

You and your beneficiaries should make yourselves familiar with the coverage and what must be done to receive the benefits in the event of your death or a covered dependent's death.

Basic Life Insurance Plan

Full-Time Support Central, Divisional and District Employees, Salaried Field Managers, Preschool Managers, School Directors, School Age Managers, Associate Directors, Associate Directors - FL, Directors in Training, School Managers, and Sr. Associate

Directors: You are automatically enrolled in 1.5 times your annual base salary rounded up to the next \$1,000 which is paid for by the Company. Annual base salary means the money paid to you for performing the duties of your job, not including any bonuses, incentive pay, overtime pay, shift premiums, fringe benefits or other extra payment. The maximum amount of Basic Life Insurance is \$150,000.

Full-Time Field Hourly & Field Non-Management

Salaried: You are automatically enrolled in 1 times your annual base salary rounded up to the next \$1,000 which is paid for by the Company. Annual base salary means the money paid to you for performing the duties of your job, not including any bonuses, incentive pay, overtime pay, shift premiums, fringe benefits or other extra payment. The maximum amount of Basic Life Insurance is \$50,000.

Regular Part-Time Hourly: You are automatically enrolled in \$5,000 which is paid for by the Company.

Supplemental Life Insurance Plan

Full-Time Employees: You may purchase Supplemental Life Insurance coverage up to five (5) times your annual salary in increments of \$10,000, not to exceed \$500,000. Supplemental Life Insurance has a guarantee issue of \$350,000 if you enroll when first eligible. Anything over and above this amount will be subject to Evidence of Insurability (EOI). If you enroll in Supplemental Life Insurance, you will also be covered for Accidental Death and Dismemberment (AD&D) Insurance equal to the amount of your Supplemental Life Insurance coverage amount.

Regular Part-Time Employees: You may purchase Supplemental Life Insurance coverage in \$10,000 increments to a maximum benefit of \$60,000. Supplemental Accidental Death and Dismemberment coverage is not available for Part-Time employees.

Spouse Life Insurance Plan

If you purchase Supplemental Life Insurance coverage, you may also purchase Spouse Life Insurance coverage for your spouse/domestic partner in increments of \$5,000, not to exceed \$500,000, if you are a Full-Time employee. Spouse Life Insurance has a guarantee issue of \$30,000 if you purchase it when first available; anything over and above this amount will be subject to Evidence of Insurability (EOI).

Note: Employees who are married may not be covered as both an employee and a spouse.

Child Life Insurance Plan

If you purchase Supplemental Life Insurance coverage, you may also purchase Child Life Insurance coverage for your child(ren) in increments of \$2,000, not to exceed \$10,000, if you are a Full-Time employee.

Note: Maximum benefit payout for a child from live birth to 6 months of age is \$1,000.

Eligible children include the following individuals who are under age 26:

- Your own natural offspring, lawfully adopted children, stepchildren, unmarried foster children, grandchildren, and children for whom you are the legally appointed guardian. A child will be considered adopted on the date of placement in your home.

Note: Dependent children may NOT be covered by more than one employee in the Plan or as both an employee and a dependent.

Evidence of Insurability

If you waive Supplemental and/or Spouse Life coverage when first eligible and choose to enroll at a later time (Qualifying Life Event or Annual Open Enrollment), you must provide evidence of insurability to obtain such coverage. Furthermore, if you are currently enrolled in Supplemental and/or Spouse Life and choose to increase your coverage amount as a result of a Qualifying Life Event or Annual Open Enrollment, you may be required to provide evidence of insurability. The Life Plan contains detailed rules about the situations in which evidence of insurability must be provided. For additional information, please review the Life Plan's certificate.

If evidence of insurability is required as a condition of receiving coverage, you will have to complete an Evidence of Insurability Form. This will be reviewed by MetLife, and they will either approve or deny your election.

Delayed Effective Date

If you purchase Spouse and/or Child Life Coverage, the effective date of your spouse's or child's coverage will be delayed if, at the time the coverage is scheduled to take effect, he/she is confined at home under a physician's care, is receiving or applying to receive disability benefits, or is hospitalized. The effective date of the coverage will be delayed until that circumstance ceases to exist.

Losses Not Covered

With respect to Supplemental, Spouse, and/or Child Life coverage, special rules apply where death is the result of suicide. In general, if the suicide occurs within 24 months after the coverage took effect (or within 24 months after an increased amount of coverage took effect), no insurance benefit will be paid with respect to the coverage or the increased coverage (as the case may be). For additional information regarding this limitation, please refer to the Life Plan's certificate.

Accidental Death and Dismemberment Insurance (AD&D)

AD&D Insurance pays a death benefit if death occurs by accidental means. It also pays a benefit if you suffer the loss of a limb, or your eyesight, or you are in a coma. Additional rules regarding AD&D Insurance benefits are found in the Life Plan certificates.

Amount of Coverage

	REGULAR PART-TIME HOURLY	FULL-TIME FIELD HOURLY & FIELD NON-MANAGEMENT	FULL-TIME SUPPORT CENTRAL, DIVISIONAL AND DISTRICT EMPLOYEES, SALARIED FIELD MANAGERS, SCHOOL DIRECTORS, PRESCHOOL MANAGERS, SCHOOL MANAGERS, ASSOCIATE DIRECTORS, ASSOCIATE DIRECTORS - FL, DIRECTORS IN TRAINING, SCHOOL MANAGERS, SR. ASSOCIATE DIRECTORS, AND SCHOOL AGE MANAGERS
Basic AD&D Benefit Amount	An amount equal to Basic Life Insurance not to exceed \$5,000	An amount equal to Basic Life Insurance not to exceed \$50,000	An amount equal to Basic Life Insurance not to exceed \$150,000
Available Supplemental AD&D Benefit Amount	N/A	An amount (at least \$10,000) equal to Basic Life Insurance not to exceed lesser of 5 times Basic Annual Earnings or \$500,000	An amount (at least \$10,000) equal to Basic Life Insurance not to exceed lesser of 5 times Basic Annual Earnings or \$500,000

Covered Losses

A loss is considered to have occurred if, while covered by the benefit, you or your qualified dependent sustains an accidental bodily injury where the loss results directly from that injury and within 365 days after the injury.

The amount payable depends on the type of loss as shown in the chart below.

LOSS	BENEFIT FOR COMMON CARRIER ACCIDENT	BENEFIT FOR OTHER COVERED ACCIDENT
Loss of Life	2 Times Principal Sum	Principal Sum
Loss of One Member (Hand, Foot or Eye)	Principal Sum	1/2 Principal Sum
Loss of Two or More Members	Principal Sum	Principal Sum
Quadriplegia (Paralysis of Both Arms and Both Legs)	Principal Sum	Principal Sum
Paraplegia (Paralysis of Both Legs)	Principal Sum	1/2 Principal Sum
Hemiplegia (Paralysis of Arm and Leg)	Principal Sum	1/2 Principal Sum
Coma	N/A	1% monthly up to a maximum of 60 months

(Principal Sum is defined as the total amount of your AD&D coverage.)

Maximum Per Accident

If you sustain more than one loss resulting from the same accident, the benefit will not exceed the full amount of your coverage.

To Whom Payable

Benefits for loss of life will be paid in accordance with the Beneficiary section. All other benefits will be paid to you.

Limitations

Benefits are not payable for any loss to which a contributing cause is:

- Intentional self-inflicted injury or self-destruction;
- Disease, bodily or mental infirmity, or medical or surgical treatment of these;
- Infection other than infection occurring in an external accidental wound or from food poisoning;
- Participation in a riot;
- Duty as a member of any military, naval or air force;
- War or any act of war, declared or undeclared;
- Participation in the commission of a felony;
- Voluntary use of drugs; except when prescribed by a Physician;
- Voluntary use of alcohol in combination with any drug, medication, or sedative;
- Voluntary inhalation of gas, including carbon monoxide;
- An incident related to:
 - travel in an aircraft in any capacity other than a passenger;
 - travel in an aircraft for purposes of parachuting or exiting the aircraft while in flight;
 - parachuting or exiting an aircraft while in flight (except for self-preservation);
 - travel in an aircraft or device used for testing/experimental purposes, by or for any military authority, or for travel beyond the earth's atmosphere; or
- Driving a vehicle while intoxicated.

Additional Benefits

Presumption of Death

A benefit will be paid if:

- The aircraft or other vehicle in which you were traveling is wrecked, sinks, or disappears; and
- Your body is not found within one (1) year.

Seat Belt & Air Bag Benefit

If the employee dies in a private passenger car accident and is wearing a seat belt in the manner prescribed by the vehicle's manufacturer, the Plan will pay an additional 10% (but not less than \$1,000 or more than \$10,000) of the full amount of your AD&D benefit. If the automobile is equipped with an air bag for the location in the car for which the insured person was seated, the Plan will pay an additional benefit of 10% (but not less than \$1,000 or more than \$10,000) of the full amount of your AD&D benefit.

Education Benefit

The Plan pays a tuition reimbursement benefit for all qualified dependent children upon the employee's death in a covered accident. An annual payment for up to four (4) consecutive years is payable for all qualified dependent children who continue to be enrolled as a full-time student in an accredited post-secondary institution of higher learning beyond the 12th grade level. The total benefit is 5% of the full amount of the employee's Accidental Death and Dismemberment Insurance up to a maximum of \$5,000 per year, not to exceed \$20,000 in the four (4) year period. If you have no children who qualify for this benefit, the Plan will pay \$1,000 to your beneficiary in one sum.

Repatriation Benefit (Return of Remains)

The Plan will pay an additional benefit equal to the charges for the preparation and transportation of your body to a mortuary chosen by you or your authorized representative in the city of your residence. A maximum payment of \$5,000 will be made if, as the result of a covered accident, you suffer loss of life at least 150 miles away from your principal place of residence.

Spouse Education

The Plan pays a tuition reimbursement benefit to your spouse who is enrolled as a full-time student in an accredited school or enrolls as a full-time student in an accredited school within 12 months after the date of your death. The Plan will pay an amount equal to the tuition

charges incurred for a period of up to one academic year, not to exceed an academic year maximum of \$5,000, and an overall maximum of 5% of the full amount.

paid to a licensed childcare facility for an eligible dependent attending on a regular basis. The benefit will be paid for up to four consecutive years, or until your child's 13th birthday, whichever comes first. If you have no children who qualify for this benefit, the Plan will pay \$1,000 to your beneficiary.

Child Care

As a result of your death, this benefit pays up to the lesser of 5% of your principal sum or \$5,000 per year for expenses

Accelerated Benefit

If you become terminally ill while you are insured by the Life Plan, an accelerated benefit may be available as described below. The amount of accelerated benefit available is as follows:

	REGULAR PART-TIME HOURLY	FULL-TIME FIELD HOURLY & FIELD NON-MANAGEMENT	FULL-TIME SUPPORT CENTRAL, DIVISIONAL AND DISTRICT EMPLOYEES, SALARIED FIELD MANAGERS, SCHOOL DIRECTORS, PRESCHOOL MANAGERS, SCHOOL MANAGERS, ASSOCIATE DIRECTORS, ASSOCIATE DIRECTORS - FL, DIRECTORS IN TRAINING, SCHOOL MANAGERS, SR. ASSOCIATE DIRECTORS, AND SCHOOL AGE MANAGERS
Basic Life	80% not to exceed \$4,000	80% not to exceed \$40,000	80% not to exceed \$120,000
Supplemental Life	80% not to exceed \$48,000	80% not to exceed \$400,000	80% not to exceed \$400,000
Spouse Life	N/A	80% not to exceed \$400,000	80% not to exceed \$400,000

Your right to exercise this option and to receive payment is subject to the following:

- You request this election, in writing, on a form acceptable to MetLife;
- You must be terminally ill at the time of payment of the Accelerated Benefit;
- Your physician must certify, in writing, that you are terminally ill and your life expectancy has been reduced to less than 12 months; and
- The physician's certification must be deemed satisfactory to MetLife.
- You submit to an examination by a physician of MetLife's choice (at its expense) if requested;
- You have not assigned your Life Insurance benefit;
- Your total accelerated benefit is at least a minimum amount (\$20,000 for full-time employees and \$5,000 for part-time employees); and
- The benefit is subject to such other limitations and restrictions as described in the Life Insurance certificate

An election to receive an Accelerated Benefit will have the following effect on other benefits:

- The death benefit payable will be reduced by any amount of Accelerated Benefit that has been paid; and
- Any amount of Life Insurance that may be available under the Conversion Privilege will be reduced by the amount of the Accelerated Benefit paid. The remaining Life Insurance amount will be paid according to the terms of the Summary of Benefits subject to any reduction and Termination Provisions.

Benefits paid may be taxable. MetLife is not responsible for any tax or other effects of any benefit paid. As with all tax matters, you should consult your personal tax advisor to assess the impact of this benefit.

Coverage after Age 65

On the first day of the calendar month in which you or your spouse reach age 65, 70, 75, or 80, your Basic Life and AD&D Insurance coverage are reduced as follows.

AGE	BENEFIT AMOUNT
65 - 69	65% of the amount of Life and AD&D Insurance you had prior to age 65
70 - 74	40% of the amount of Life and AD&D Insurance you had prior to your first reduction
75 - 79	25% of the amount of Life and AD&D Insurance you had prior to your first reduction

Continuation of Coverage of Life Insurance

This section applies to our Basic and Supplemental Life Insurance. Such insurance may be continued when you become totally disabled (as defined in the Life Plan certificate) before you attain age 60 while covered under the Life Plan and your total disability lasts at least 6 consecutive months. Continuation coverage is generally available as long as you remain totally disabled until you attain normal retirement age. The Life Plan certificate describes other situations in which continuation coverage may end. No premium payment is required for this continuation coverage.

To continue insurance, you must satisfy certain conditions described in the Life Plan certificate, including providing proof of your total disability to MetLife within 12 months of the date on which you become totally disabled. See the Life Plan certificate for additional information regarding the conditions you must satisfy, as well as special rules that apply if you have previously elected to port or convert coverage.

When continued insurance ends, the insured individual may be entitled to elect portable coverage or purchase an individual life policy in accordance with the Conversion Privilege. Please refer to the Life Plan certificate for additional information about portability and conversion.

Continuation Coverage Provided by Your Employer

Your employer may continue your coverage by paying your premiums if you cease active work and would otherwise lose coverage due to injury or sickness, a reduction to

part-time work, layoff, and an approved leave of absence. Please refer to the Life Plan certificate and/or contact your employer for additional information about this continuation coverage.

Continuation coverage may also be available in other circumstances depending on your state of residence. Please refer to the Life Plan certificate for additional information.

Portability

If you and/or your dependents' coverage ends in certain circumstances, you or your dependent may elect portable coverage for yourself and your eligible dependents. This applies to Supplemental Life, Spouse Life and Child Life Insurance, and to Supplemental AD&D Insurance for full-time employees. The circumstances in which portable coverage is available are identified in the Life Plan certificate and include, among others, your retirement or termination of employment, reduction in coverage due to age, your death or divorce from your spouse (portable coverage available for your dependents), and your child ceases to be eligible for child coverage.

The amount of portable coverage for you will not be more than the lesser of your total Life and AD&D Insurance in effect at the time you make the elect to port or \$2,000,000. The minimum amount of portable coverage is \$10,000.

A reduced amount of portable coverage is available if your coverage ends due to termination of the group policy or the amendment of the group policy to eliminate coverage for an eligible class of which you are a member. Furthermore, different portability amounts apply to Spouse and Child Life Insurance as further described in the Life Plan certificate. In certain circumstances you may increase or decrease your portable coverage. Please refer to the Life Plan certificate for additional information.

Applying for Portable Coverage

You must apply for portable coverage in writing typically within 31 days after the date your coverage ends. The deadline may be extended in certain circumstances as further described in the Life Plan certificate.

Portable coverage is not available if you apply to convert your coverage as described below.

Conversion

When your and/or your dependent's Learning Care Group Life Insurance terminates, you may have the right to buy an individual policy of life insurance without evidence of insurability. This "option to convert" is available only if your coverage ends for certain reasons (e.g., termination of employment) specified in the Life Insurance certificate and is subject to certain limitations and restrictions. The option to convert must be elected (as described in the Certificate) within a certain time period or the right to convert is lost. That time period generally ends 31 days following the date on which your Life Insurance coverage ends (but it may be extended if you are not notified of the option to convert in a timely manner). Please refer to the Life Insurance certificate for additional information about the option to convert.

If you wish to convert your Learning Care Group Life Insurance coverage to an individual policy, contact MetLife at 800-638-6420.

Naming a Beneficiary

Each person who enrolls for coverage will have the opportunity to name a Beneficiary, and it is important to do so. Beneficiaries can be changed as often as you like by going online to www.lcgbenefits.com and click on Benefits Login or by calling the Learning Care Group Enrollment Center at 877-297-1412.

If no beneficiary is on file, MetLife has the right to make payment to the estate or one or more of the following:

- Spouse or domestic partner
- Child or children
- Mother or father
- Sisters or brothers

Assignment

You may assign benefits under the Plan. For example, benefits may be assigned to a living trust for the benefit of your heirs or a charity. The assignment must be in writing, signed by you, and acceptable to MetLife. A signed or certified copy of the written assignment must be received and registered by MetLife's home office.

MetLife is not responsible for the legal, tax or other effects of any assignment, or for any action taken under the Plan(s) provisions before receiving and registering an assignment.

Filing a Claim

MetLife is the Claims Insurer for Life Insurance benefits. In the event of your death, a claim form needs to be sent to MetLife in writing, including proof of your death. Your beneficiary should contact the Learning Care Group Benefits Department as soon as possible and they will assist in filing the claim. All claims are to be filed as soon as reasonably possible.

If your covered dependent (spouse or children) under the Dependent Life Plan dies, you must contact the Learning Care Group Benefits Department as soon as possible in order for the claim process to begin. You (the Learning Care Group employee) are automatically the beneficiary of any Dependent Life claim.

MetLife is also the Claims Insurer for Accidental Death and Dismemberment benefits. In the event of an accidental death or loss of limb, a claim form needs to be sent to MetLife along with proof of loss. You or your beneficiary should contact the Learning Care Group Benefits Department as soon as possible after the death/loss to obtain a claim form. All claims for Accidental Death and Dismemberment benefits must be made no later than 90 days after the date of the loss.

Any legal action on a claim must be started no later than 3 years after the date on which the proof of loss is required to be provided.

How Benefits Are Paid

If you or a qualified dependent die while covered for Life Insurance benefits, the Plan will pay the beneficiary or surviving family member the total amount of Life Insurance coverage that is in effect on the date of death by issuing a check or by establishing an interest bearing account through which the beneficiary has immediate access to the full benefit amount.