

SECURE. SAVE. SAFEGUARD.

Why Purchase Term Life Through the ASCE?

With ASCE Group Term Life Insurance, you'll have access to the following benefits:

- Apply for up to \$1,000,000 of member and spouse coverage.
- Affordable, highly competitive Group Rates.
- Premiums can be waived if you're disabled.
- No exclusions: After coverage is in force for two years, benefits are payable for death from any cause, at any time, anywhere in the world. (Subject to U.S. government regulations on restricted countries.)
- Portable coverage: Maintain your valuable ASCE Group Term Life Insurance protection throughout your career, no matter where it takes you.
- Conversion to an Individual Policy when coverage terminates (if you meet conversion requirements).
- Living Benefit Option ("Accelerated Death Benefit"): Enables you to apply for a portion of your benefits if you qualify as being terminally ill, subject to certain policy restrictions and limitations. These benefits are paid directly to you, and you may spend them any way you wish (see information and rates for more details. Not available to residents of Massachusetts).

How Much Coverage Can I Apply For?

If you're an ASCE member, under age 70, and a resident of the United States (except territories), you're eligible to apply for \$10,000 to \$1,000,000 (in multiples of \$10,000) of ASCE Group Term Life Insurance*.

You may also apply for \$5,000 to \$1,000,000 (in multiples of \$5,000) of Term Life coverage for your lawful spouse.

Each unmarried, dependent child from age 14 days through 22 years (24 for full-time students) may also be insured for \$10,000. A dependent who is also an ASCE member is eligible for either member or dependent coverage, but not both.

To estimate a coverage level that's right for you, consider your present living expenses, your estate, and the future plans of your family. Many experts recommend five to nine times your annual salary. Be sure to include future educational plans for your spouse or children, mortgages, loans, debts, and everyday expenses. Choose a benefit level that gives you peace of mind that your loved ones can live comfortably should anything happen to you.

* Coverage decreases starting at member age 65; premiums are not reduced. See chart on page 2.

The total amount of coverage an individual may request under all Group Term Life Insurance plans underwritten by New York Life Insurance Company cannot exceed \$2,000,000. In addition, the total amount of coverage an individual insured may have by more than one group policy may not exceed plan maximums.

A child may not be insured for more than one \$10,000 benefit under all policies issued by New York Life Insurance Company to the Trustee of the ASCE Life Insurance Plan.

How Do I Calculate My Premium Contribution?

The initial cost of insurance for you and your lawful spouse is based on your age on the day your insurance becomes effective—the cost increases as you grow older. All eligible children can be insured for \$3.60 for \$10,000 regardless of number or age. The chart below shows your semiannual (every six months) premium rate per \$10,000 of coverage for members, or per \$5,000 of coverage for spouses. You can also make arrangements to pay your premium in increments other than semiannually.

What Are the Amounts of Insurance at Ages 65–99?

The amount of life insurance for you and your spouse is based on your age at last birthday and decreases on the semiannual

REDUCTION SCHEDULE		
Member Age	MEMBER \$10,000 OPTION*	SPOUSE \$5,000 OPTION*
< 65	\$10,000	\$5,000
65–68	7,000	3,500
69–72	5,000	2,500
73–76	3,500	1,750
77–79	3,000	1,500
80–99+	2,500	1,250

premium due date on or immediately after you reach the age for the next scheduled reduction, as shown. After age 65, coverage decreases for each \$10,000 member option of insurance. Spouse coverage also decreases for each \$5,000 option. The amount of children's insurance does not decrease.

*Based on the current benefit structure for each \$10,000 option of member coverage and \$5,000 option of spouse coverage.

+Coverage terminates at member's age 100. See Group conversion privilege.

Benefit option amounts are not guaranteed and are subject to change by agreement between New York Life Insurance Company and the Trustee.

GROUP TERM LIFE INSURANCE

2012 Current Semiannual Premium Contribution Chart

Member Age	UNIT AMOUNT \$10,000		UNIT AMOUNT \$5,000	
	MEMBER NON-SMOKER**	MEMBER SMOKER	SPOUSE NON-SMOKER**	SPOUSE SMOKER
< 30	\$1.98	\$2.34	\$0.90	\$1.08
30-34	2.28	2.64	1.02	1.20
35-39	3.18	3.72	1.32	1.50
40-44	4.68	5.52	1.92	2.28
45-49	7.56	8.94	3.18	3.72
50	8.40	9.90	3.54	4.14
51	9.24	10.86	3.90	4.56
52	10.08	11.88	4.20	4.98
53	10.92	12.84	4.62	5.40
54	11.76	13.80	4.92	5.76
55	13.26	15.60	5.46	6.42
56	14.82	17.40	6.00	7.08
57	16.32	19.20	6.54	7.74
58	17.82	20.94	7.08	8.34
59	19.32	22.74	7.62	8.94
60	23.22	27.30	9.30	10.92
61	30.78	36.24	11.76	13.80
62	37.80	44.52	13.38	15.78
63	46.56	54.78	15.42	18.12
64	50.22	59.10	17.76	20.88
65-79*	46.44	54.66	16.50	19.32
80-99*	61.38	72.18	21.78	25.56

*Amounts of insurance decrease with age; coverage terminates at member's age 100. See "Amounts of Insurance at Ages 65-99". **To qualify as a non-smoker, the insured must not have used tobacco or nicotine in any form for the past 12 months.

The premium contributions shown reflect the current rates and benefit structure. Premium contributions may be changed by New York Life Insurance Company on any premium due date, but not more than once in any 12-month period, and on any date on which benefits are changed. However, your rates may change only if they are changed for all others in the same class of insureds under this group policy. For example, a class of insureds is a group of people all with the same issue age and tobacco/nicotine usage. Premium contributions vary with the amount of benefit chosen. Benefit option amounts are not guaranteed and are subject to change by agreement between New York Life Insurance Company and the Trustee.

Automatic Benefit Increase

Lets you increase your insurance amount by 10% for 10 years, gradually doubling it. If accepted, the increase is automatically included each year as long as you are under age 60, not disabled, and are insured for one full year for the offer to be effective. You need not reapply or requalify each year—simply choose to accept or decline the additional 10%, but once declined, it cannot be resumed. Your total premium increases annually to reflect your increase benefit amount at your then current age.

What Do These Features Provide?

Living Benefit Provision ("Accelerated Death Benefit"):

Available to help terminally ill insureds and their families. This feature is designed to provide an insured one advance payment equal to 50% of their in force life insurance to be paid while that person is still alive. To qualify, the insured must be diagnosed as having a life expectancy of 12 months or less, as well as any other necessary medical information requested. For additional details and limitations, please see the Certificate of Insurance. Please note that receipt of accelerated death benefits may affect your eligibility for public assistance programs and may be taxable. Prior to applying to receive such benefits, you should consult with the appropriate social services agency and seek the advice of tax counsel. *Note: This benefit is not available to residents of Massachusetts.*

Premiums Waived If You're Disabled: If you become totally disabled before age 60 and the disability continues for at least nine months, your life insurance (and any dependent coverage) can be continued at no cost to you. The amount continued will be based on the option under which the individual was insured at the time disability commenced, subject to decreases shown in "Amounts of Insurance at Ages 65-99" without further premium payments during such disability until coverage terminates at member age 100. Evidence, from time to time, of continued Total Disability is all that will be required.

Non-Smoker Discount: If you and/or your spouse have not used tobacco or nicotine in any form—including nicotine patches and nicotine chewing gum—during the past 12 months, you may qualify for non-smoker rates that will reduce your premium payments.

No Exclusions/Incontestability: Benefits are paid for death from any cause, at any time, anywhere in the world.* The validity of any amount of your life insurance which has been in force for two years during your lifetime will not be contested except for nonpayment of premium contributions and plan provisions relating to eligibility.

* Subject to U.S. government regulations on restricted countries.

You Name Your Beneficiary: Your beneficiary is the person(s) last designated by you in writing, and recorded by or on behalf of New York Life Insurance Company. You are the automatic beneficiary for dependent insurance, as described in the Certificate of Insurance. If you wish to name a different beneficiary for spouse coverage, contact the Administrator at 1.800.650.ASCE (2723) for the appropriate form.

Conversion Privilege: The Plan provides conversion privileges under certain circumstances of involuntary termination as described in the Certificate of Insurance.

Effective Date: Note: Residents of MD and NC: Any reference to “performing normal activities of a person in good health of like age” is replaced by the requirement that the health status of any proposed insured person remain the same as stated in your application. You and your dependents will become insured on the date specified by New York Life Insurance Company provided the first premium contribution has been paid, satisfactory evidence of insurability has been submitted, and you and your dependents are alive on that date. Coverage for any dependent who is confined at home, in a hospital, or other medical institution, or incapacitated so as to be unable to perform his or her normal activities on the date coverage would otherwise become effective will not become effective until the date he or she is no longer so confined or incapacitated provided you are insured on that date and the dependent is still eligible for insurance. (Payment of a premium contribution for insurance does not mean there is any coverage in force before the effective date as specified by New York Life Insurance Company.)

When Coverage Ends: Your insurance can remain in force for you (or your insured spouse if you apply solely for spouse coverage) until you reach age 100, and for your insured family members, if eligible, provided: (a) you continue to pay premium contributions when due, (b) you remain an ASCE member, and (c) the plan is not terminated by the Trustee or New York Life Insurance Company. Insurance will not terminate if you change employment or retire. In case of the death of a member, coverage for insured dependents may be continued as described in the Certificate of Insurance.

Renewal Payments and Claims: Once you are accepted into the Plan, you will have a 31-day grace period for your payment of renewal premium contributions. When you want to submit a claim, call Administrator at 1.800.650.ASCE (2723) for claim forms.

Certificate of Insurance: This brochure is only a brief description of the principal provisions and features of the ASCE Group Term Life Plan. The complete terms and conditions are set forth in the group policy issued by New York Life Insurance Company to the Trustee of the ASCE Life Insurance Plan. When you become insured, you will be sent a Certificate of Insurance summarizing your benefits under the Plan. In the event of any conflict or inconsistency between the information on this site and the information contained in the underlying plan documents, the plan documents will in all respects control and govern. If any provision is not explained or only partially explained, your rights will always be determined under the provisions of the underlying plan documents. Insurance coverage and availability may differ by state.

30-Day Free Look

When you become insured, you will be sent a Certificate of Insurance summarizing your insurance coverage. If you are not completely satisfied with the terms of your certificate, you may return it without claim, within 30 days. Your coverage will be invalidated and you will receive a full refund—no questions asked!

How to Apply:

Before you request coverage, you must be a member in good standing with ASCE. To apply, please download the application for the product you would like to apply for. You may fax your completed and signed application toll-free to 1.866.817.9009 or send it via mail to:

ASCE Member Insurance Program
1200 East Glen Avenue
Peoria Heights, IL 61616-5348

For residents of Puerto Rico, completed applications and premium payments should be sent to:

Global Insurance Agency
P.O. Box 9023918
San Juan, Puerto Rico, 00902-3918

IMPORTANT INFORMATION FROM NEW YORK LIFE INSURANCE COMPANY:

This Plan is medically underwritten based on the information provided by you on the application. It is important that you complete the form truthfully and completely. Your request is subject to New York Life Insurance Company’s approval, and more medical information may be requested.

A physical exam, EKG, blood test or other information may be required. If so, we will arrange for a professional paramedic to contact you to perform these simple tests at your convenience, free of charge. The shorter application works in conjunction with a “tele-underwriter.” The service provider that contacts you will take your personal health information confidentially over the phone while you’re at home or at the office. If needed, your provider will make arrangements for any medical requirements with you during this call. New York Life Insurance Company relies on your answers and statements. Misstatements or failures to report information on your request form may be used as the basis for rescinding your insurance.

Important Notice

How New York Life Obtains Information and Underwrites Your Request For Group Term Life Insurance

Information regarding insurability will be treated as confidential. In considering your request for insurance, we will rely on the medical information you provide, and on the information you authorize us to obtain from your physician, other medical practitioners and facilities, other insurance companies which you have applied for insurance and MIB Inc., (Formerly known as Medical Information Bureau). MIB and other insurance companies may also furnish New York Life, its subsidiaries or the plan administrator with non-medical information (such as driving records, past convictions, hazardous sport or aviation activity, use of alcohol or drugs, and other applications for insurance). The information provided may include information that may predate the time frame stated on the medical questions section, if any, on this application. This information may be used during the underwriting and claims processes, where permitted by law.

Your authorization may be used for a period of 24 months from the date you signed the application for insurance, unless sooner revoked. The authorization may be revoked at any time by notifying the Administrator in writing at the address provided. Your revocation will not be effective to the extent New York Life or any other person already has disclosed or collected information or taken other action in reliance on it, or to the extent that New York Life has a legal right to contest a claim under an insurance certificate or the certificate itself. The information New York Life obtains through your authorization may become subject to further disclosure. For example, New York Life may be required to provide it to insurance, regulatory, or other government agencies. In this case, the information may no longer be protected by the rules governing your authorization.

New York Life may release this information to the plan administrator, MIB, other insurance companies, and to others whom you authorize in writing. However, this will not be done in connection with information concerning Acquired Immune Deficiency Syndrome (AIDS) or Human Immunodeficiency Virus (HIV).

New York Life will not disclose such information to anyone except those you authorize or where required or permitted by law. We may make a brief report to MIB; however, we will not disclose our underwriting decision. Information in our files may be seen by New York Life and Plan Administrator employees, but only on a "need to know" basis in considering your request. Upon receipt of all requested information, we will make a determination as to whether your request for insurance can be approved.

MIB is a nonprofit organization of life insurance companies which operates an information exchange on behalf of its members. When you apply for insurance or submit a claim for benefits to

a MIB member company, medical or non-medical information may be given to the Bureau, which may then be furnished to member companies.

If we cannot provide the coverage you requested, we will tell you why. If you feel our information is inaccurate, you will be given a chance to correct or complete the information in our files. Upon written request to New York Life or MIB, you will be provided with non-medical information. Generally, medical information will be given either directly to the proposed insured or to a medical professional designated by the proposed insured. Your request is handled in accordance with the Fair Credit Reporting Act procedures. If you question the accuracy of the information provided by MIB, you may contact MIB and seek a correction. MIB's information office is: MIB, Inc., 50 Braintree Hill Park, Suite 400, Braintree, MA 02184-8734, telephone (866) 692-6901 or TTY (866) 346-3642 for the hearing impaired. For Canadian residents, the address is: MIB Information Office, 330 University Avenue, Suite 501, Toronto, Ontario, Canada M5G 1R7, telephone (416) 597-0590. Information for consumers about MIB, Inc. may be obtained on its website at www.mib.com.

For NM Residents: PROTECTED PERSONS 1) have a right of access to certain CONFIDENTIAL ABUSE INFORMATION 2) we maintain in our files and they may choose to receive such information directly. You have the right to register as a PROTECTED PERSON by sending a signed request to the Administrator at the address listed on the application. Please include your full name, date of birth, and address.

¹ PROTECTED PERSON means a victim of domestic abuse: who has notified us that he/she is or has been a victim of domestic abuse; and who is an insured person or prospective insured person.

² CONFIDENTIAL ABUSE INFORMATION means information about: acts of domestic abuse or abuse status; the work or home address or telephone number of a victim of domestic abuse; or the status of an applicant or insured as family member, employer or associate of a victim of domestic abuse or a person with whom an applicant or insured is known to have a direct, close, personal, family or abuse-related relationship.

New York Life Insurance Company 02/09

ASCE Group Term Life Insurance Plan is underwritten by New York Life Insurance Company, 51 Madison Avenue, New York, NY 10010 under policy form GMR-G-10500-1/FACE.

ASCE incurs certain administrative expenses in connection with this sponsored program. To provide and maintain this valuable membership benefit, it is reimbursed for such expenses.

This brochure is intended to describe only principle features of the ASCE Group Term Life Insurance Plan and is not a contract.

Underwritten by:



51 Madison Avenue
New York, NY 10010

License:
CA# 0F76076, AR# 1322

Brokered and Administered by:



1200 E. Glen Avenue
Peoria Heights, IL 61616-5348