

GROUP SHORT-TERM DISABILITY (STD) PROGRAM SUMMARY for Relco Locomotive, Inc

Our Group STD plan helps replace lost income should an insured employee become disabled due to a non-occupational accident or sickness, including pregnancy or complications of pregnancy.

Eligibility	All Active Full Time Employees
Group STD Benefit	60% of weekly earnings
Weekly Maximum Benefit	\$400
Elimination Period	0 Days for Injury 7 Days for Sickness
Benefits Begin	1st Day for Injury 8 th Day for Sickness
Maximum Benefit Period	13 Weeks or until LTD benefits begin, whichever is earlier
Total Disability	Total Disability means that due to Injury or Sickness the employee is unable to perform all of the material and substantial duties of the employee's regular occupation, and the employee's disability earnings, if any, are less than the percentage (20%) of the employee's pre-disability weekly earnings.
Partial Disability	Partial Disability means that during the elimination period the employee is able to perform some, but not all, of the material and substantial duties of the employee's regular occupation. After the elimination period, partial disability means that due to injury or sickness the employee is able to perform some but not all of the material and substantial duties of the employee's regular occupation, and the employee's disability earnings, if any are at least the minimum percentage (20%), but less than the maximum percentage of the employee's pre-disability weekly earnings (80%).

Exclusions - We will not pay benefits for any loss or disability caused by, resulting from, arising out of or substantially contributed to, directly by any one or more of the following:

1. Loss of professional license, occupational license or certification;
2. Commission of, participation in, or an attempt to commit an assault or felony;
3. Intentionally self-inflicted injuries;
4. Attempted suicide, regardless of mental capacity;
5. Cosmetic surgery except when required due to injury or illness;
6. Occupational sickness or injury.
7. Participation in a war, declared or undeclared, or any act of war.

Additional Features	<ul style="list-style-type: none"> ▪ Survivor Benefit ▪ Work Incentive Benefit ▪ Worksite Modification Benefit
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This information is only a product highlight. Life benefits may be subject to medical underwriting. Coverage for a medically underwritten benefit is not effective until the date the insurer has approved the employee's application. The policy has exclusions, limitations, and reduction of benefits and/or terms under which the policy may be continued or discontinued. The policy may be cancelled by the insurer at any time. The insurer reserves the right to change premium rates, but not more than once in a 12-month period. Refer to your certificate for complete details and limitations of coverage. (For Internal Use Only: FDL Policy number 510-107)

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