# SUMMARY OF BENEFITS

## Affirm, Inc.



### Full Time Employees working more than 32 hours per week

**Basic Term Life, Basic Accidental Death & Dismemberment, Optional Term Life, Optional Dependent Term Life, Optional Accidental Death & Dismemberment, Short Term Disability, Long Term Disability**

## What are Term Life and AD&D Insurance?

Term Life and Accidental Death and Dismemberment (AD&D) Insurance helps protect your loved ones if something happens to you. Term Life Insurance pays a one-time benefit payment to your beneficiary(ies) if you die. AD&D insurance provides benefits to your beneficiary(ies) if death occurs due to a covered accident, or to you if you experience a serious accidental injury, such as the loss of a limb or eyesight.

## What is Disability Insurance?

Disability insurance helps replace a portion of your income when you're unable to work for a period of time due to illness or injury. Many Disability claims are caused by common, everyday health situations like pregnancy and childbirth, back pain, illnesses such as cancer, and mental health conditions like stress, anxiety, or depression. These conditions may require employees to take time away from work.

**Coverage Effective**
**1/1/2027**

**Control Number 70892**

Issued by **The Prudential Insurance Company of America**

**Filing a Claim is Easy**
Scan the QR code

Or visit:
**mybenefits.prudential.com**

First-time user, will need to register before logging in.

## Plan Details at a Glance

### Your employer is automatically providing you with:

- Basic Life: You are automatically enrolled for 2 times your covered annual earnings to $650,000.
- Basic AD&D: You are automatically enrolled for an amount equal to your Basic Term Life coverage amount.
- Short Term Disability: 60% of your weekly pre-disability earnings
- Long Term Disability: 60% of your weekly pre-disability earnings

### Additional coverage options available to you (further details on following page):

- Optional Term Life up to $500,000 for your coverage
- Optional AD&D You are automatically enrolled for a coverage amount equal to your Optional Term Life coverage amount.
- Spouse/Domestic Partner Options Available
- Child Options Available

This is a summary of benefits and does not include all plan provisions, exclusions and limitations. If there is a discrepancy between this document and the group contract **issued by The Prudential Insurance Company of America**, the terms of the group contract will govern.



Prudential

# Term Life and AD&D Insurance Coverages

## Basic Term Life

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|---|---|
| **Coverage Amount** | **Employee:** You are automatically enrolled for 2 times your covered annual earnings to $650,000. |
| **Age Reduction Schedule** | **Employee:** Coverage will be reduced as you age – by 35% at age 65 and 50% at age 70. |

## Basic Accidental Death and Dismemberment

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| **Coverage Amount** | You are automatically enrolled for an amount equal to your Basic Term Life coverage amount. |
| **Age Reduction Schedule** | Coverage will be reduced as you age – by 35% at age 65 and 50% at age 70. |

## Optional Term Life and Dependent Term Life Coverage Options

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|---|---|
| **Coverage Amounts** | **Employee:** Purchase coverage in increments of $10,000 up to a maximum of $500,000.<br><br>**Spouse/Domestic Partner:** Purchase coverage on your Spouse/Domestic Partner in increments of $5,000 up to a maximum of $250,000. The Optional Dependent Term Life coverage amount on your Spouse/Domestic Partner cannot exceed 100% of your Optional Term Life coverage amount.<br><br>**Child:** Purchase coverage on your child in increments of $1,000 up to a maximum of $10,000. The Optional Dependent Term Life coverage amount on your children cannot exceed 100% of your Optional Term Life coverage amount. Coverage begins at live birth, and continues to age 26, if unmarried. |
| **Guaranteed Issue Amount[1]** | If you enroll when you are first eligible, you may elect this amount without answering medical questions.<br>**Employee:** $250,000.<br><br>**Spouse/Domestic Partner:** $50,000.<br><br>**Child**: 10,000 |
| **Annual Enrollment Rules[1]** | **Employee:** You can increase your current coverage amount by $40,000, up to a total coverage of the Guaranteed Issue amount, without answering medical questions. |
| **Age Reduction Schedule** | **Employee:** Coverage will be reduced as you age – by 35% at age 65 and 60% at age 70 and 75% at age 75 and 85% at age 80.<br><br>**Spouse/Domestic Partner:** Coverage will be reduced as you age – by 35% at age 65**.** Termination age is 70 years old. |

## Optional AD&D and Dependent AD&D Coverage Options

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|---|---|
| **Coverage Amounts** | Employee: You are automatically enrolled for a coverage amount equal to your Optional Term Life coverage amount.<br><br>Spouse/Domestic Partner: Your Spouse/Domestic Partner is automatically enrolled for an equal amount of coverage when you enroll your Spouse/Domestic Partner for Optional Dependent Term Life Insurance coverage.<br><br>Child: Your child(ren) will be automatically enrolled for an equal amount of Optional Accidental Death & Dismemberment Insurance coverage when you enroll your child(ren) for Optional Dependent Term Life Insurance coverage. Coverage begins at live birth, and continues to age 26, if unmarried. |
| **Guaranteed Issue Amount[1]** | All amounts are guaranteed. No proof of good health is required. |

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| **Age Reduction Schedule** | **Employee:** Coverage will be reduced as you age – by 35% at age 65 and 60% at age 70 and 75% at age 75 and 85% at age 80.<br><br>**Spouse/Domestic Partner:** Coverage will be reduced as you age – by 35% at age 65. Termination age is 70 years old. |

## Term Life Insurance and AD&D - Important Things to Know

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|---|---|
| **Accelerated Benefit Option**<br>*Employee coverage only* | If you are terminally ill, you can get a partial payment of your group life insurance benefit and use the payment however you see fit. The final payment to your beneficiary will be reduced by the amount you receive with the Accelerated Benefit Option. |
| **When Coverage Ends**<br>*Applicable to Employee and Dependents* | You may convert your insurance to an individual life insurance policy issued by the Prudential Insurance Company of America, or you may be eligible to port your insurance to a group term life policy. |
| **Waiver of Premium**<br>*Employee coverage only* | **Basic Term Life**- If you become disabled, payment of premium can be waived if you are totally disabled for 6 months, you are less than 60 when the disability begins, and you continue to be totally disabled. This waiver terminates at age 65. This provision may vary by state.<br>**Optional Term Life-** If you become disabled, payment of premium can be waived if you are totally disabled for 9 months, you are less than 60 when the disability begins, and you continue to be totally disabled. This waiver terminates at age 65. This provision may vary by state. |

# Disability Insurance Coverages

## Short Term Disability

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|---|---|
| **Weekly Benefit (100% Employer Paid)** 60% of your weekly pre-disability earnings, less deductible sources of income | • **Benefit Start Date:** The 8th day following a non-occupational accident or on the 8th day following a non-occupational sickness<br>• **Benefit Duration:** 12 Weeks<br>• **Maximum Amount:** $2,800 |

## Short Term Disability - Important Things to Know

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|---|---|
| **What is the definition of Disability?** | You are considered totally disabled when you are not working at your usual occupation and, as a result of your sickness or injury, you are unable to perform with reasonable continuity the substantial and material acts necessary to pursue your usual occupation. You are partially disabled when while working in your usual occupation and as a result of your sickness or injury, you are unable to earn 80% of your weekly earnings.<br><br>If you work while disabled, you can receive full benefits as long as your combined income and disability benefits do not exceed your weekly pre-disability earnings. |
| **Part-time work while disabled** | If you work part-time while disabled, you can receive partial benefits based on the percentage of income lost. |
| **Exclusions** | You are not covered for a disability caused by war or any act of war, declared or undeclared, an intentionally self-inflicted injury, active participation in a riot, and commission of a felony for which you have been convicted. Benefits are not payable for any period of incarceration as a result of a conviction. |
| **Deductible sources of income** | Deductible sources of income may include benefits from state paid leave, unemployment income and salary continuation. |

## Long Term Disability[1]

| | |
|---|---|
| **Monthly Benefit (100% Employer Paid)** 60% of your monthly pre-disability earnings, less deductible sources of income | • **Maximum Amount:** $15,000<br>• **Benefit Start Date:** 90 Days<br>• **Benefit Duration**: The benefit duration is up to your normal retirement age under the Social Security Act. |

## Long Term Disability - Important Things to Know

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|---|---|
| **What is the definition of Disability?** | You are considered totally disabled when you are not working at your usual occupation and, as a result of your sickness or injury you are unable to perform with reasonable continuity the substantial and material acts necessary to pursue your usual occupation. You are considered partially disabled while actually working in your usual occupation and as a result of your sickness or injury, you are unable to earn 80% or more of your indexed monthly earnings.<br><br>After receiving benefits for 24 months, you are considered totally disabled when, as a result of the same sickness or injury, you are unable to engage with reasonable continuity in any occupation in which you could reasonably be expected to perform satisfactorily in light of your age, education, training, experience, station in life, and physical and mental capacity. You are considered partially disabled after 24 months of payments while actually working in an occupation, and as a result of the same sickness or injury, you are unable to engage with reasonable continuity in that or any other occupation in which you could reasonably be expected to perform satisfactorily in light of your age, education, training, experience, station in life and physical and mental capacity. |
| **Pre-Existing conditions** | Your LTD benefits will not be paid for a disability that begins during the first 12 months of coverage and due to a pre-existing condition. A pre-existing condition is an injury or sickness for which you received medical treatment, consultation, diagnostic measures, prescribed drugs or medicines, or for which you followed treatment recommendations during the 3 months prior to your effective date of coverage. |
| **Part-time work while disabled** | During the first 24 months of part-time work while disabled, you can receive full benefits as long as your combined income and disability benefits do not exceed your monthly pre-disability earnings.<br><br>After 24 months of part-time work while disabled, you can receive partial benefits based on the percentage of income lost. |
| **Death while collecting benefits** | If you die while collecting disability benefits, a lump sum payment may be paid to your eligible survivors. |
| **Disabilities due to Mental Illness** | Disabilities primarily due to mental illness are limited to 24 months of benefits during your lifetime. Examples of mental illness include schizophrenia, depression, manic depressive or bipolar illness, anxiety, somatization, substance related disorders (including drug and alcohol abuse), and/or adjustment disorders. Disabilities due to mental illness have a combined limited pay period during your lifetime. |
| **Exclusions** | You are not covered for a disability caused by war or any act of war, declared or undeclared, an intentionally self-inflicted injury, active participation in a riot, and commission of a felony for which you have been convicted. Benefits are not payable for any period of incarceration as a result of a conviction. |
| **Deductible sources of income** | Deductible sources of income may include benefits from state paid leave, Social Security to you and your dependents, workers' compensation, unemployment income and other income. |

## My Rate Sheet

**Follow the charts and steps to calculate the cost of your coverage.**

### Employee Optional Term Life Monthly cost per coverage amount with Matching Optional Accidental Death & Dismemberment

## Employee Cost

Coverage is available in increments of $10,000 up to a maximum of $500,000. Initial rates based on age as of effective date of your coverage. Rates will change based on the following age schedule.

| Age | Under 30 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60-64 | 65-100 |
|---|---|---|---|---|---|---|---|---|---|
| Rates | $0.096 | $0.115 | $0.134 | $0.167 | $0.250 | $0.402 | $0.579 | $0.851 | $2.094 |

| Calculate your Optional Term Life Cost | | Cost |
|---|---|---|
| Step 1 | Enter the amount of coverage you wish to purchase. | = $ |
| Step 2 | Divide the coverage amount in Step 1 by $1,000. | = $ |
| Step 3 | Using the above table, enter the rate that corresponds with your age. | = $ |
| Step 4 | Multiply Step 2 by Step 3 to calculate the **monthly cost.** | = $ |

### Spouse/ Domestic Partner & Children - Optional Dependent Term Life Monthly cost per coverage amount with Matching Optional Accidental Death & Dismemberment

## Spouse/Domestic Partner Cost

Coverage is available on your Spouse/Domestic Partner in increments of $5,000 up to a maximum of $250,000. The Optional Dependent Term Life coverage amount on your Spouse/Domestic Partner cannot exceed 100% of your Optional Term Life coverage amount. Rates will change based on the following age schedule. Spouse/Domestic Partner rate is based on Employee's age.

| Age | Under 30 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60-64 | 65-70 |
|---|---|---|---|---|---|---|---|---|---|
| Rates | $0.096 | $0.115 | $0.134 | $0.167 | $0.250 | $0.402 | $0.579 | $0.851 | $2.094 |

## Cost for Children

One premium rate covers all eligible children. Coverage is available on your child in increments of $1,000 up to a maximum of $10,000. The Optional Dependent Term Life coverage amount on your children cannot exceed 100% of your Optional Term Life coverage amount.

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| Child(ren) Rate, per $1,000 | $0.234 |

| Calculate your Dependent Term Life Cost per Coverage Amount | | Cost |
|---|---|---|
| Step 1 | Enter the amount of coverage you wish to purchase. | = $ |
| Step 2 | Divide the coverage amount in Step 1 by $1,000. | = $ |
| Step 3 | Using the above table, enter the rate that corresponds with your age. | = $ |
| Step 4 | Multiply Step 2 by Step 3 to calculate the **monthly cost.** | = $ |

[1]Elections made outside of approved enrollment events may require proof of good health. Applicants previously declined coverage must also provide proof of good health.

[2]Rates may change as the insured enters a higher age category or if plan experience requires a change for all insureds

Implementation of the insurance plan(s) will depend on having a specific percentage of all eligible employees enrolling in the plan(s). If this percentage of enrollment level is not met, these coverage(s) may not be effective.

Benefits, exclusions and provisions may vary by state. Refer to the plan booklet for details.

For your coverage to become effective, you must be actively at work on the effective date of the plan. If you apply for an amount that requires satisfactory evidence of insurability to The Prudential Insurance Company of America, you must be actively at work on the date of approval for the amount requiring satisfactory evidence of insurability.

*Accelerated Benefit Option is a feature that is made available to group life insurance participants. It is not a health, nursing home, or long-term care insurance benefit and is not designed to eliminate the need for those types of insurance coverage. The death benefit is reduced by the amount of the accelerated death benefit paid. There is no administrative fee to accelerate benefits. Receipt of accelerated death benefits may affect eligibility for public assistance and may be taxable. The federal income tax treatment of payments made under this rider depends upon whether the insured is the recipient of the benefits and is considered "terminally ill". You may wish to seek professional tax advice before exercising this option.

*Important Notice: The acceleration of life insurance benefits offered under this certificate is intended to qualify for favorable tax treatment under the Internal Revenue Code of 1986 (under IRC Section 101(g)). If the acceleration of life insurance benefits qualifies for such favorable treatment, the benefits will be excludable from your income and not subject to federal taxation. Tax laws relating to acceleration of life benefits are complex. You are advised to consult with a qualified tax advisor about circumstances under which you could receive acceleration of life insurance benefits that are excludable from income under federal law.

Receipt of accelerated benefits may be taxable and assistance should be sought from a personal tax advisor.

**This coverage is not health insurance coverage (often referred to as "Major Medical Coverage").**

This type of plan is NOT considered "minimum essential coverage" under the Affordable Care Act and therefore does NOT satisfy the individual mandate that you have health insurance coverage.

This policy provides disability income insurance only. It does NOT provide basic hospital, basic medical, or major medical insurance as defined by the New York State Department of Financial Services.

This policy provides ACCIDENT insurance only. It does NOT provide basic hospital, basic medical, or major medical insurance as defined by the New York State Department of Financial Services.

IMPORTANT NOTICE – THIS POLICY DOES NOT PROVIDE COVERAGE FOR SICKNESS

## THIS IS AN EXCEPTED BENEFITS POLICY. IT PROVIDES COVERAGE ONLY FOR THE LIMITED BENEFITS OR SERVICES SPECIFIED IN THE POLICY.

*North Carolina residents: THIS IS NOT A MEDICARE SUPPLEMENT PLAN. If you are eligible for Medicare, review the Guide to Health Insurance for People with Medicare, which is available from the company.*

Not for Residents of New Mexico. Not for use in New Mexico.

Group Short Term Disability coverage is administered by The Prudential Company of America, a Prudential Financial Company, Newark, NJ. Your employer will inform you of the plan details, including any exclusions, limitations and restrictions which may apply.

Group Insurance coverages are issued by The Prudential Insurance Company of America, a Prudential Financial company, Newark, NJ 07102. The Booklet-Certificate contains all details, including any policy exclusions, limitations, and restrictions, which may apply. Contract Series: 83500

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