Group Policy Number | Amendment Number | Amendment Effective Date
--- | --- | ---
28736-G | 1 | January 1, 2005

This amendment is to be attached to and forms a part of the specified Reissued Group Policy issued by the Companies to the State of Minnesota on January 1, 2005. Continued payment of premium by the policyholder shall represent acceptance of the conditions of this amendment.

The Reissued Group Policy is hereby amended, as of the Amendment Effective Date indicated above, as follows:

Page 3 attached hereto replaces the corresponding page 3 of the Reissued Group Policy.
SCHEDULE OF BENEFITS

ACCIDENTAL DEATH, DISMEMBERMENT AND LOSS OF SIGHT BENEFITS can be applied for in $5,000 units up to the applicable maximum shown below. Individual coverage and benefit amounts are on file with the State of Minnesota Department of Employee Relations.

<table>
<thead>
<tr>
<th>Age</th>
<th>Employee Maximum Benefit</th>
<th>Dependent Maximum Benefit*</th>
</tr>
</thead>
<tbody>
<tr>
<td>16 - 60</td>
<td>$100,000</td>
<td>$25,000</td>
</tr>
<tr>
<td>61 and Over</td>
<td>50,000</td>
<td>25,000</td>
</tr>
</tbody>
</table>

*The amount of insurance on a dependent cannot exceed the amount of insurance on the employee.

DEFINITIONS

**Covered Accident**
An accidental bodily injury that occurs while insured under the policy.

**Dependent**
The insured's legally married spouse.

**Employee**
Any individual who is determined by the policyholder as eligible for insurance.

**Insured**
Any individual who is an elected or appointed public official or any person who is determined by the policyholder as eligible for insurance.

**Physician**
Any individual who is licensed by the law of the state in which treatment is received as qualified to treat the type of injury causing the loss for which claim is made.

**Salary**
The insured's regular rate of annual compensation as defined by the policyholder, excluding overtime pay and bonuses.