



RATE SHEET

Commonwealth of Pennsylvania

Optional Employee Term Life Insurance, Dependent Term Life Insurance, and The Prudential Income Protection PlanSM, a Long Term Disability Insurance coverage issued by The Prudential Insurance Company of America (Prudential)

OPTIONAL EMPLOYEE TERM LIFE INSURANCE*

Age (Initial rates based on employee age as of effective date of your coverage. Rates will change based on the following age schedule.)	Biweekly Cost of Insurance (Rates for \$1,000 of coverage) For Employee
Under 25	\$ 0.017
25–29	\$ 0.021
30–34	\$ 0.025
35–39	\$ 0.032
40–44	\$ 0.039
45–49	\$ 0.057
50-54	\$ 0.087
55–59	\$ 0.148
60-64	\$ 0.281
65–69	\$ 0.463
70–74	\$ 0.830
75 <i>+</i>	\$ 1.618



OPTIONAL EMPLOYEE TERM LIFE INSURANCE*

Follow this worksheet to estimate your biweekly cost of insurance. Refer to the rates on the previous page to find the biweekly rate for \$1,000 of coverage based on your age.

Steps to Estimate Cost of Insurance	Worksheet
1. Select desired amount of coverage. (Coverage is available for one, two, three, four, or five times your covered annual earnings, not to exceed \$500,000.)	\$
2. Locate your age on the Rate Sheet and note the corresponding biweekly rate.	The biweekly rate for \$1,000 is \$
3. Divide your selected amount of coverage by \$1,000. Then multiply the result by the biweekly rate for your age. The answer is your biweekly cost of insurance.	\$ divided by \$1,000 = \$ \$ multiplied by \$ = \$ Total Biweekly Cost of Insurance = \$

OPTIONAL DEPENDENT TERM LIFE INSURANCE (SPOUSE OR DOMESTIC PARTNER)*

Age (Initial rates based on spouse or domestic partner age as of effective date of your coverage. Rates will change based on the following age schedule.)	Biweekly Cost of Insurance (Rates for \$1,000 of coverage) For Spouse or Domestic Partner
Under 25	\$ 0.021
25–29	\$ 0.023
30–34	\$ 0.025
35–39	\$ 0.030
40–44	\$ 0.041
45–49	\$ 0.064
50-54	\$ 0.100
55–59	\$ 0.153
60-64	\$ 0.263
65–69	\$ 0.441
70–74	\$ 0.779
75+	\$ 1.283

OPTIONAL DEPENDENT TERM LIFE INSURANCE (SPOUSE OR DOMESTIC PARTNER)*

Follow this worksheet to estimate your spouse's or domestic partner's biweekly cost of insurance. Refer to the rates on the previous page to find the biweekly rate for \$1,000 of coverage based on your spouse's or domestic partner's age.

Steps to Estimate Cost of Insurance	Worksheet
1. Select desired amount of coverage. (Coverage is available for your spouse or domestic partner in amounts of \$10,000 to \$100,000, not to exceed 100% of your Optional Employee Term Life coverage amount.)	\$
2. Locate your spouse's or domestic partner's age on the Rate Sheet and note the corresponding biweekly rate.	The biweekly rate for \$1,000 is \$
3. Divide the selected amount of coverage by \$1,000. Then multiply the result by the biweekly rate for your spouse's or domestic partner's age. The answer is your spouse's or domestic partner's biweekly cost of insurance.	\$ divided by \$1,000 = \$ \$ multiplied by \$ = \$ Total Biweekly Cost of Insurance = \$

OPTIONAL DEPENDENT TERM LIFE INSURANCE (CHILD(REN)—REGARDLESS OF THE NUMBER OF CHILDREN)*

Coverage Amount	Biweekly Cost of Insurance
\$5,000	\$ 0.17
\$10,000	\$ 0.34

^{*}This is optional coverage and the entire cost of coverage is employee paid.

Cost of insurance for all coverages, which are deducted from your paycheck, may increase or decrease in the future based upon the claims experience of participants. All provisions that apply to these coverages are governed by the Certificate. Rates may be subject to change.

The Prudential Income Protection Plan Rates with Cost of Living Adjustment Waived

THE PRUDENTIAL INCOME PROTECTION PLAN*

Follow this worksheet to estimate your biweekly cost of insurance. Refer to the rates below to find the biweekly rate for \$100 of biweekly covered payroll based on your age. 1. Indicate your annual earnings. 2. Divide your annual earnings by 12 to obtain your monthly earnings. 3. If your monthly earnings are greater than the maximum monthly covered earnings of \$8,333, indicate \$8,333. Otherwise, indicate the amount from Step 2. 4. Multiply the amount in Step 3 by the rate for your age to obtain your total monthly cost. Age Rate Age Rate < 25 \$.0010 \$.0091 50-54 25-29 \$.0013 55 - 59\$.0101 30-34 \$.0021 60 - 64\$.0086 35-39 \$.0033 65-69 \$.0061 40-44 \$.0050 70 +\$.0063 45-49 \$.0071 5. Multiply the amount in Step 4 by 12 and divide by 26 to obtain your total biweekly cost.

Cost of insurance for all coverages, which are deducted from your paycheck, may increase or decrease in the future based upon the claims experience of participants. All provisions that apply to this/these coverage(s) are governed by the Certificate. Rates may be subject to change.

^{*}This is optional coverage and the entire cost of coverage is employee paid.

The Prudential Income Protection Plan Rates with Cost of Living Adjustment

THE PRUDENTIAL INCOME PROTECTION PLAN*

Follow this worksheet to estimate your biweekly cost of insurance. Refer to the rates below to find the biweekly rate for \$100

		oll based or				
Indicate you	ır annual eaı	rnings.				
Divide your	annual earn	ings by 12 to	o obtain your n	nonthly earnings.		
	-	_		mum monthly cover e amount from Ste	-	
Multiply the	amount in S	Step 3 by th	e rate for your	age to obtain you	r	
total month	ly cost.					
	ly cost. Rate	Age	Rate			
total month		Age 50–54	Rate \$.0102			
total month	Rate	_				
Age <25	Rate \$.0011	50-54	\$.0102			
Age <25 25–29	Rate \$.0011 \$.0015	50-54 55-59	\$.0102 \$.0113			
Age <25 25-29 30-34	Rate \$.0011 \$.0015 \$.0024	50-54 55-59 60-64	\$.0102 \$.0113 \$.0096			

^{*}This is optional coverage and the entire cost of coverage is employee paid.

Cost of insurance for all coverages, which are deducted from your paycheck, may increase or decrease in the future based upon the claims experience of participants. All provisions that apply to this/these coverage(s) are governed by the Certificate. Rates may be subject to change.

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.

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.

Basic Term Life, Optional Term Life, Dependent Term Life, and the Prudential Income Protection Plan, a Long Term Disability Insurance coverage, is issued by The Prudential Insurance Company of America, Newark, NJ. The Booklet-Certificate contains all details, including any policy exclusions, limitations, and restrictions, which may apply. Contract Series: 83500. © 2015. Prudential, the Prudential logo, the Rock symbol, and Bring Your Challenges are service marks of Prudential Financial, Inc. and its related entities, registered in many jurisdictions worldwide.

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