RELIASTAR LIFE INSURANCE COMPANY Minneapolis, Minnesota 55440

SOUTH DAKOTA CERTIFICATE ENDORSEMENT

for Group Disability Income Insurance

South Dakota law requires the following changes to the group certificate issued to South Dakota residents. Please keep this endorsement with your certificate. This endorsement is subject to all other terms of the Group Policy.

I. SCHEDULE OF BENEFITS

If the Maximum Benefit Period provision in your certificate is 1 year (52 weeks) or less, then your Benefit Waiting Period is no more than 90 days.

If the Maximum Benefit Period provision in your certificate is more than 1 year (52 weeks) but equal to or less than 2 years (104 weeks), then your Benefit Waiting Period is no more than 180 days.

II. DISABILITY INCOME INSURANCE

If any benefits or services include a statement that payment for these expenses is at the sole discretion of ReliaStar Life, then that statement does not apply.

If the certificate includes an Other Income provision, then any disability or retirement benefits your spouse or children receive or are eligible to receive will not be considered a source of Other Income.

If the certificate includes an Other Income provision, then under **Exceptions** any reference to a cost of living increase is replaced by the following:

- an increase to any other income benefit after the initial other income benefit becomes payable.

If the certificate includes an Other Income provision, and there is coverage for proprietors on an occupational basis, then the following is added under **Exceptions**:

 Workers' Compensation benefits, if you are an actively employed proprietor, partner, or executive corporate officer employee who has elected not to be covered by Workers' Compensation.

If under Exclusions the certificate has an exclusion for "sickness or accidental injury arising out of or in the course of work for pay, profit or gain" then this exclusion does not apply.

If the certificate has a Pre-Existing Condition Exclusion, and if the time period in that provision is more than 12 months, then the time period in that provision is changed to be 12 months.

III. CLAIM PROCEDURES

The "Submitting a Claim" and "Claim Forms" provisions are replaced by the following provisions:

Notice of Claim

You or someone on your behalf must send ReliaStar Life written notice of the loss on which the claim will be based. The notice must –

- include information to identify you, such as your name, address and Group Policy number.
- be sent to ReliaStar Life or to its authorized administrator.
- be sent within 30 days after the loss for which claim is based has occurred. ReliaStar Life will not invalidate or reduce a claim if it was not reasonably possible to give notice within 30 days and notice is provided as soon as reasonably possible.

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Claim Forms

ReliaStar Life or its authorized administrator will send claim forms to you. ReliaStar Life will send the forms within 15 days after ReliaStar Life receives notice of claim. If ReliaStar Life does not provide the claim forms within 15 days after notice of claim is received, you will be considered to have complied with the requirements for proof of loss if you submit written proof of loss as described below.

Proof of Loss

The completed claim forms must be returned to ReliaStar Life or its authorized administrator within 90 days after the benefit waiting period. Even if you do not receive claim forms, written proof of loss must be sent to ReliaStar Life within 90 days after the benefit waiting period. Failure to send proof of loss within the required 90 day time period will not invalidate or reduce any claim if it is shown not to have been reasonably possible to provide such proof and that proof of loss was provided as soon as was reasonably possible. Future written proof of your continued disability must be provided as reasonably required by ReliaStar Life.

Written proof of loss includes details of how the loss occurred. ReliaStar Life may require further documentation to verify proof of loss you submitted and to determine your eligibility to receive benefits and to compute the benefits due.

ReliaStar Life reserves the right to have you examined by doctors or specialists to determine the extent of your restrictions and limitations caused by sickness or injury. ReliaStar Life will pay for the cost of the exam. ReliaStar Life may also require that you meet in person with a ReliaStar Life representative.

IV. DEFINITIONS

The definition of **Doctor** is changed to add the following statement:

Doctor includes a family member if the family member is the only doctor in your area provided the doctor is acting within the scope of his/her practice.

The definition of **Hospital** is replaced by the following:

Hospital – an institution licensed as a hospital in the state in which it is located, which meets the following conditions:

- Provides, for a fee from its patients, diagnostic, medical, surgical, psychiatric or rehabilitative services for the care and treatment of people who are injured or sick.
- Has a staff of one or more doctors available at all times.
- Has 24-hour-a-day services of R.N.'s or other nursing services reporting to the doctor in charge.
- Has inpatient facilities.

Hospital is not an institution that is mainly a rest home, extended care facility or home for the aged.

If the certificate includes a definition of **Hospital Confined**, then this definition is replaced by the following:

Hospital Confined – admitted to and confined in a hospital on an inpatient basis.

If the certificate includes a definition of **Pre-Existing Condition**, and if the time period in that definition is more than 12 months, then the time period in that definition is changed to be 12 months.