

# **10 Year Group Level Term Life Insurance**

## \$100,000 of coverage starting at \$4.50 per month<sup>\*</sup>

## Features

## Level payments for 10 years

The monthly premium is based on your age, gender and smoking status. Although not guaranteed, your monthly cost is expected to remain level for the first 10 years.

### Guaranteed coverage renewal

At the end of your first 10-year term, you can renew your coverage for an additional 10-year term, as long as you're age 65 or younger at that time. There is no need to re-qualify for coverage. See Renewal terms and premiums for details.

## Customized coverage amount

Apply for a policy in the amount you need - from \$25,000 to \$500,000, in \$1,000 increments. Note: The overall maximum coverage for each Member/Associate Member is \$650,000 under all USBA-sponsored Group Life Insurance Policies, with the option for those ages 69 and below, if approved, to add up to an additional \$100,000 of Traditional Whole Life (G-10648-0), for a maximum of \$750,000.

### **Emergency payment**

Your spouse beneficiary may qualify for an immediate emergency payment of up to \$15,000 once USBA is notified of your death. Some restrictions may apply. Please contact USBA for details.

## Early payment for terminal illness

If you are diagnosed with a terminal illness, you may qualify for an accelerated death benefit. This feature means you receive a lump sum equal to 50% of your life insurance coverage while you're still living.

To qualify, you must have at least \$50,000 of coverage in force, be under age 84, and show documentation of a diagnosis that results in an expected life span of 12 months or less (24 months or less for Illinois residents). The amount of insurance payable at death will be reduced by the accelerated payment plus any premiums deferred as a result of the accelerated payment. Receipt of accelerated benefits may affect your eligibility for public assistance programs. Consider consulting a financial advisor or attorney before you apply for this benefit to determine how it could affect your personal situation.

\*Example premium for a 24-year-old Female paying preferred rates.

Note: If you live outside the U.S. and are not at an APO/FPO address, you must be a U.S. citizen. This policy is not currently available in New York.

## Preferred rating

If you're healthy and lead a healthy lifestyle, you may qualify for our preferred life insurance rates which provide substantial savings over our standard rates. These rates are available in coverage amounts from \$100,000 to \$500,000.

Preferred rates are not available for individuals who:

- Use nicotine in any form, including nicotine patches or gum.
- Have high-risk hobbies like skydiving or scuba diving.
- Are employed in certain high-risk occupations such as pilots and crew members.

To determine if you qualify, simply complete, and return the preferred supplemental application with the primary application. Don't be discouraged if you don't qualify for our preferred rates. You may still be eligible for our standard rates, which also offer you quality life insurance coverage at a predictable premium rate.

### 30-Day free look

Once your application has been approved, you'll be issued a Certificate of Insurance. If you are not completely satisfied with the provisions of your Certificate, you can return it within 30 days without claim, for a prompt, full refund.

## **Options**

Optional Children's Term Life Coverage

Children's Coverage is term insurance designed to protect your eligible children (unmarried children ages 14 days through 25 years) who are not eligible for USBA Membership.\*

The monthly premium is just \$1.50 per unit — and each unit covers all your eligible children.

In other words, the number of units determines the amount of insurance on each child — not the number of children insured. And the older your children get, the more protection USBA Children's Coverage provides.

\*Adopted/foster/stepchildren must be dependent on the Member for over 50% of their support. If both parents are insured with USBA coverage, only one parent may request Children's Coverage. Each \$25,000 of USBA Group Term Life coverage which you request allows you to apply for one unit of Children's Coverage. The maximum is four units. Children's coverage can continue as long as premiums are paid when due, you continue to be insured under a USBA-sponsored Group Life Insurance Policy, and your children remain eligible.

## Each Unit Insures All Eligible Children by Age for the Coverage Amount Indicated

The following monthly rates are current as of 2024.

	COVERAGE AMOUNTS BELOW ARE PER CHILD					
CHILD'S Age	1 UNIT (\$1.50/mo)	2 UNITS (\$3.00/mo)	3 UNITS (\$4.50/mo)	4 UNITS (\$6.00/mo)		
14 days to 6 months	\$1,000	\$2,000	\$3,000	\$4,000		
6 months to 2 years	2,000	4,000	6,000	8,000		
2 years to 3 years	4,000	8,000	12,000	16,000		
3 years thru 25 years	5,000	10,000	15,000	20,000		

## **Optional AD&D Coverage**

When you apply for 10 Year Group Level Term Insurance, you can add \$40,000 of Accidental Death and Dismemberment (AD&D) coverage for only \$2.00 more per month. This optional coverage is available to Members, Spouses and Associate Members. (Children must be age 18-25 to qualify for Associate Membership.)

Here are the key details about AD&D benefits:

- Total coverage is payable for accidental loss of life, the loss of both hands or feet, the sight of both eyes, or any two of the preceding.
- Half the coverage amount (\$20,000) is payable for the loss of one hand or foot or the sight of one eye.
- The loss must be the direct result of a covered accident that occurs while coverage is in force and within 90 days of the accident.
- Loss of a hand or foot means severance at or above the wrist or ankle.
- Loss of sight means total and permanent loss.
- No more than \$40,000 will be paid for all losses from any one accident.

### AD&D Exclusions

AD&D benefits are not provided for losses due to air travel unless the insured is riding solely as a passenger. Other exclusions include losses due to war; insurrection; riot; terrorist activity; commission of a felony or assault; illegal use of drugs, hallucinogens, etc.; use of alcohol; sickness or disease for its medical or surgical treatment; intentionally self-inflicted injuries; or suicide.

AD&D benefits may not be denied due to suicide if insane, unless it can be shown that the insured intended to commit suicide at the time coverage was requested. AD&D coverage ends on June 1<sup>st</sup> following the insured's 66<sup>th</sup> birthday or earlier if the insured ceases to be insured under a USBA Group Life Insurance Policy.

Note: This material is not intended for use with residents of New Mexico with respect to AD&D Insurance.

## **Other Policy Provisions**

## Renewal terms and premiums

All coverage is provided under a group term life insurance policy. It provides level death benefits for 10 years. Coverage will continue until your 85<sup>th</sup> birthday given you pay your premium when due and the group policy remains in force. There's no need to requalify for coverage at the time of renewal. Premiums will increase at renewal. Your coverage will continue to be underwritten by New York Life, provided USBA continues to exclusively endorse this program and provided premium is paid when due.

Premiums for the first 10-year term, although not guaranteed, are designed to remain level. After each 10-year term, if you are age 65 or younger, you are guaranteed the option to renew for another 10-year term, regardless of your health. Premiums increase at renewal and are not guaranteed.

Once you reach the first renewal period following age 65, renewal is on an annual basis with premium increases each year.

## Individual Certificate

These pages outline the principal provisions of the USBA 10 Year Group Level Term Life Insurance. Complete details can be found in Group Policies G-29246-0 and G-5393-0 / G-5393-2 (Policy Form GMR) issued to USBA at its headquarters in Overland Park, KS, by New York Life Insurance Company. Each insured Member/Associate Member will receive a Certificate that summarizes policy provisions affecting his or her life insurance.

## Convert your policy

If you decide to end your membership with USBA, you can convert your 10 Year Group Level Term policy to an individual policy with New York Life Insurance Company and take it with you, regardless of your health status. Some restrictions apply. See your Certificate of Insurance for details.

## Beneficiary

You'll be prompted to name a beneficiary for your life insurance policy. You can change your beneficiary at any time.

## No war exclusion

Unlike other policies, USBA's life insurance pays a benefit for a combat-related death.

## Area of armed conflict limitation

If your death results from hostilities in an "area of armed conflict," the aggregate maximum benefit payable under all USBA group life policies will be limited to \$100,000. Please contact USBA for a list of the geographic areas currently designated as an "area of armed conflict." See your Certificate of Insurance for more details on this limitation.

Note: This limitation does not apply to insured Members who are on active military duty, including the National Guard & Reserve; death due to accident or illness; or to any coverage amount in force with USBA prior to 1/1/07.

## **POW/MIA protection**

If the Department of Defense (DoD) lists you as a Prisoner of War (POW) or as Missing In Action (MIA), USBA will pay 100% of the premium for your group life insurance in effect at the time you're listed and continue paying either until you're no longer a POW/MIA or until your coverage would otherwise end.

### Keep your coverage

If you retire or otherwise separate from the military or Federal employment, your 10 Year Group Level Term Insurance is still yours. It goes where you go. Even better, there's no increase in premium or decrease in coverage, just because you retire or separate.

### Effective date of coverage

All coverage is subject to USBA eligibility and underwriting approval by New York Life Insurance Company. If we can provide the coverage you requested, it will take effect on the approval date specified, provided the premium has been paid. Insured Member or Insured Spouse must also be performing your normal activities on the date of approval. Dependent children insured under Children's Coverage must not be confined to a hospital on the date of approval. Payment of premium does not mean coverage is in force before the effective date specified by New York Life Insurance Company.

If we cannot provide the coverage you request, we will tell you why we can't. If you believe our information is inaccurate, you will be given a chance to correct or complete the information in our files. Generally, upon written request, medical record information will be given either directly to the proposed insured or to a medical professional designated by the proposed insured.

## No interim liability

New York Life is not liable for requested, initial, increased, restored, or exchanged insurance on any person while a request for such insurance is being processed, even if New York Life has accepted a remittance for such requested insurance. New York Life will not be liable for such insurance if the request is not formally approved and will return any such premium remittance.

## FAQ

### Q. Can I continue my coverage after the 10-year term is over?

**A.** Yes. You're guaranteed the right to renew your coverage as long as premiums are paid when due, the Group Policy is still in force, and you are age 65 or younger. Renewal terms and premium rates are available on request.

#### Q. Is there an age limit on eligibility for 10 Year Group Level Term?

- **A.** Yes. Insurance is available to those age 64 and younger and can continue until your 85th birthday provided premiums are paid when due and the group policy remains in force.
- Q. If I should be diagnosed with a terminal illness, can USBA 10 Year Group Level Term help my family while I'm still alive?
- **A.** Yes. USBA's Terminal Illness Benefit Payment can pay you 50% of the 10 Year Group Level Term coverage in force while you're still living.

To qualify, you must have at least \$50,000 of coverage in force, be under age 84, and show documentation of a diagnosis that results in an expected life span of 12 months or less (24 months or less for Illinois residents). Diagnosis and evaluation of the limited life expectancy must be provided to New York Life.

The amount of insurance payable at death will be reduced by the accelerated payment plus any premiums deferred as a result of the accelerated payment. Receipt of accelerated benefits may affect your eligibility for public assistance programs. Consider consulting a financial advisor or attorney before you apply for this benefit to determine how it could affect your personal situation.

#### Q. Are discounted rates available if I'm healthy, and I lead a healthy lifestyle?

**A.** Yes. If you're healthy and lead a healthy lifestyle, you may qualify for our preferred life insurance rates, which provide substantial savings over our standard rates. These rates are available in coverage amounts from \$100,000 to \$500,000.

#### Q. Can the amount of my coverage ever be decreased because of age or poor health?

**A.** No. The coverage amount you choose will remain the same regardless of your age or health, provided premiums are paid when due.

#### Q. Is it possible to insure my children?

A. Yes. You have two options to insure your children:

- Children's Group Whole Life starting at \$1.60<sup>\*</sup> per month.
  See the Children's Group Whole Life policy for more details.
- Or you can insure all your eligible children with term life coverage for just \$1.50 per unit per month. Eligible children are unmarried children ages 14 days through 25 years, who are not eligible for USBA Membership. <u>See the Children's Group Term Life policy for more details</u>, or call a USBA Product Specialist at <u>877–297–9235</u> M-F 9:00 a.m. to 4:00 p.m. Central time.
   \* Monthly rate: \$5,000 guaranteed lifetime coverage for 1-year old child female.

#### Q. Can I request 10 Year Group Level Term coverage for my spouse and young adult children?

A. Yes. A Member's lawful spouse, age 64 and younger, and unmarried eligible children, ages 18-25 years, may apply for their own 10 Year Group Level Term coverage as Associate Members of USBA. Note: An Associate Member is an eligible spouse or unmarried child age 18-25 of someone who is qualified for USBA Membership.

#### Q. Will my family be protected in the event of a service-related or combat death?

**A.** Yes. Service-related and combat deaths receive full benefits. With USBA, there is no war clause, just like when we were founded in 1959.

## Q. Will I be able to keep my 10 Year Group Level Term coverage if I retire from or leave the military or Federal employment?

**A.** Yes. Provided you keep paying your premium and coverage is in force, you can keep your coverage even after your military or Federal employment ends. You won't be asked to pay higher rates because you retire or separate from military or Federal service.

#### Q. How much coverage is available?

A. You may request USBA 10 Year Group Level Term coverage in amounts from \$25,000 to \$500,000 (in \$1,000 increments).

Note: The overall maximum coverage for each Member/Associate Member is \$650,000 under all USBA-sponsored Group Life Insurance Policies, with the option for those ages 69 and below, if approved, to add up to an additional \$100,000 of Traditional Whole Life (G-10648-0), for a maximum of \$750,000.

## **Current Monthly Premium Rates**

Rates are based on the insured's smoking status or tobacco-use, gender and attained age at issue. To qualify for non-tobacco rates, you must not have used tobacco or nicotine in any form, including nicotine patches or gum, in the last 24 months.

Contact a USBA Product Specialist at 877-297-9235 to obtain renewal rates and rates for coverage amounts not shown.

10 Year Group Level Term

Montana Residents: Male rates apply to all Montana residents regardless of gender.

The following rates are current as of 2024.

## **10 Year Group Level Term**

Male Preferred	Monthly Premium Per Specific Insurance Amounts					
AGE	\$100,000	\$150,000	\$200,000	\$250,000		
18-25	\$6.25	\$9.38	\$12.50	\$15.63		
26	6.33	9.50	12.67	15.83		
27	6.42	9.63	12.83	16.04		
28	6.50	9.75	13.00	16.25		
29	6.67	10.00	13.33	16.67		
30	6.83	10.25	13.67	17.08		
31	6.92	10.38	13.83	17.29		
32	7.00	10.50	14.00	17.50		
33	7.17	10.75	14.33	17.92		
34	7.25	10.88	14.50	18.13		
35	7.33	11.00	14.67	18.33		
36	7.75	11.63	15.50	19.38		
37	8.25	12.38	16.50	20.63		
38	8.58	12.88	17.17	21.46		
39	9.08	13.63	18.17	22.71		
40	9.42	14.13	18.83	23.54		
41	9.75	14.63	19.50	24.38		
42	10.08	15.13	20.17	25.21		
43	10.50	15.75	21.00	26.25		
44	10.92	16.38	21.83	27.29		
45	11.33	17.00	22.67	28.33		
46	12.75	19.13	25.50	31.88		
47	14.25	21.38	28.50	35.63		
48	15.75	23.63	31.50	39.38		
49	17.25	25.88	34.50	43,13		
50	18.83	28.25	37.67	47.08		
51	20.25	30.38	40.50	50.63		
52	21.67	32.50	43.33	54.17		
53	23.00	34.50	46.00	57.50		
54	24.33	36.50	48.67	60.83		
55	25.67	38.50	51.33	64.17		
56	29.75	44.63	59.50	74.38		
57	34.08	51.13	68.17	85.21		
58	38.17	57.25	76.33	95.42		
59	42.08	63.13	84.17	105.21		
60	45.83	68.75	91.67	114.58		
61	50.42	75.63	100.83	126.04		
62	54.83	82.25	109.67	137.08		
63	59.17	88.75	118.33	147.92		
64	63.25	94.88	126.50	158.13		

**\*** 🔊 Female Monthly Premium Per Specific Insurance Amounts Preferred AGE \$100,000 \$150,000 \$200,000 \$250,000 18-25 \$4.50 \$6.75 \$9.00 \$11.25 26 4.58 6.88 9.17 11.46 27 4.67 7.00 9.33 11.67 28 4.75 7.13 9.50 11.88 29 4.92 7.38 9.83 12.29 30 5.08 7.63 10.17 12.71 31 5.33 8.00 10.67 13.33 32 5.50 8.25 11.00 13.75 33 5.67 8.50 11.33 14.17 14.58 34 5.83 8.75 11.67 35 6.08 9.13 12.17 15.21 36 9.25 12.33 15.42 6.17 16.04 37 6.42 9.63 12.83 38 6.67 10.00 13.33 16.67 39 7.17 10.75 14.33 17.92 40 7.58 11.38 15.17 18.96 41 8.17 12.25 16.33 20.42 42 8.83 13.25 17.67 22.08 43 9.17 13.75 18.33 22.92 44 9.92 14.88 19.83 24.79 45 10.33 15.50 20.67 25.83 46 11.08 16.63 22.17 27.71 47 12.08 18.13 24.17 30.21 32.50 48 13.00 19.50 26.00 49 13.75 20.63 27.50 34.38 50 14.92 22.38 29.83 37.29 51 15.83 23.75 31.67 39.58 52 16.92 25.38 33.83 42.29 53 17.75 26.63 35.50 44.38 54 18.58 27.88 37.17 46.46 55 19.00 28.50 38.00 47.50 56 20.25 30.38 40.50 50.63 57 20.92 31.38 41.83 52.29 58 21.75 32.63 43.50 54.38 33.50 59 22.33 44.67 55.83 60 58.96 23.58 35.38 47.17 61 25.25 37.88 50.50 63.13 62 27.42 41.13 54.83 68.54 63 30.17 45.25 60.33 75.42 64 33.58 50.38 67.17 83.96

## 10 Year Group Level Term

Male Non-Smoker	Monthly Premium Per Specific Insurance Amounts				
AGE	\$25,000	\$50,000	\$100,000	\$150,000	\$200,000
18-25	\$1.90	\$3.79	\$7.58	\$11.38	\$15.17
26	1.92	3.83	7.67	11.50	15.33
27	1.96	3.92	7.83	11.75	15.67
28	1.98	3.96	7.92	11.88	15.83
29	2.02	4.04	8.08	12.13	16.17
30	2.04	4.08	8.17	12.25	16.33
31	2.13	4.25	8.50	12.75	17.00
32	2.21	4.42	8.83	13.25	17.67
33	2.29	4.58	9.17	13.75	18.33
34	2.31	4.63	9.25	13.88	18.50
35	2.33	4.67	9.33	14.00	18.67
36	2.52	5.04	10.08	15.13	20.17
37	2.75	5.50	11.00	16.50	22.00
38	2.96	5.92	11.83	17.75	23.67
39	3.21	6.42	12.83	19.25	25.67
40	3.35	6.71	13.42	20.13	26.83
41	3.46	6.92	13.83	20.75	27.67
42	3.58	7.17	14.33	21.50	28.67
43	3.69	7.38	14.75	22.13	29.50
44	3.81	7.63	15.25	22.88	30.50
45	3.96	7.92	15.83	23.75	31.67
46	4.42	8.83	17.67	26.50	35.33
47	4.88	9.75	19.50	29.25	39.00
48	5.40	10.79	21.58	32.38	43.17
49	5.90	11.79	23.58	35.38	47.17
50	6.40	12.79	25.58	38.38	51.17
51	6.83	13.67	27.33	41.00	54.67
52	7.27	14.54	29.08	43.63	58.17
53	7.67	15.33	30.67	46.00	61.33
54	8.08	16.17	32.33	48.50	64.67
55	8.46	16.92	33.83	50.75	67.67
56	9.71	19.42	38.83	58.25	77.67
57	10.90	21.79	43.58	65.38	87.17
58	12.04	24.08	48.17	72.25	96.33
59	13.21	26.42	52.83	79.25	105.67
60	14.35	28.71	57.42	86.13	114.83
61	16.69	33.38	66.75	100.13	133.50
62	19.08	38.17	76.33	114.50	152.67
63	21.48	42.96	85.92	128.88	171.83
64	23.67	47.33	94.67	142.00	189.33

## 10 Year Group Level Term

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Female Non-Smoker	Monthly Premium Per Specific Insurance Amounts				
AGE	\$25,000	\$50,000	\$100,000	\$150,000	\$200,000
18-25	\$1.27	\$2.54	\$5.08	\$7.63	\$10.17
26	1.31	2.63	5.25	7.88	10.50
27	1.33	2.67	5.33	8.00	10.67
28	1.38	2.75	5.50	8.25	11.00
29	1.42	2.83	5.67	8.50	11.33
30	1.44	2.88	5.75	8.63	11.50
31	1.54	3.08	6.17	9.25	12.33
32	1.67	3.33	6.67	10.00	13.33
33	1.77	3.54	7.08	10.63	14.17
34	1.88	3.75	7.50	11.25	15.00
35	1.96	3.92	7.83	11.75	15.67
36	2.04	4.08	8.17	12.25	16.33
37	2.15	4.29	8.58	12.88	17.17
38	2.25	4.50	9.00	13.50	18.00
39	2.35	4.71	9.42	14.13	18.83
40	2.48	4.96	9.92	14.88	19.83
41	2.63	5.25	10.50	15.75	21.00
42	2.81	5.63	11.25	16.88	22.50
43	2.98	5.96	11.92	17.88	23.83
44	3.17	6.33	12.67	19.00	25.33
45	3.40	6.79	13.58	20.38	27.17
46	3.60	7.21	14.42	21.63	28.83
47	3.83	7.67	15.33	23.00	30.67
48	4.00	8.00	16.00	24.00	32.00
49	4.29	8.58	17.17	25.75	34.33
50	4.50	9.00	18.00	27.00	36.00
51	4.85	9.71	19.42	29.13	38.83
52	5.27	10.54	21.08	31.63	42.17
53	5.71	11.42	22.83	34.25	45.67
54	6.00	12.00	24.00	36.00	48.00
55	6.17	12.33	24.67	37.00	49.33
56	6.58	13.17	26.33	39.50	52.67
57	6.88	13.75	27.50	41.25	55.00
58	7.10	14.21	28.42	42.63	56.83
59	7.42	14.83	29.67	44.50	59.33
60	7.88	15.75	31.50	47.25	63.00
61	9.35	18.71	37.42	56.13	74.83
62	10.50	21.00	42.00	63.00	84.00
63	11.73	23.46	46.92	70.38	93.83
64	13.13	26.25	52.50	78.75	105.00

**†** 🛞

## 10 Year Group Level Term



Male Smoker	Monthly Premium Per Specific Insurance Amounts				
AGE	\$25,000	\$50,000	\$100,000	\$150,000	\$200,000
18-23	\$3.60	\$7.21	\$14.42	\$21.63	\$28.38
24	3.65	7.29	14.58	21.88	29.17
25	3.65	7.29	14.58	21.88	29.17
26	3.69	7.38	14.75	22.13	29.50
27	3.69	7.38	14.75	22.13	29.50
28	3.69	7.38	14.75	22.13	29.50
29	3.69	7.38	14.75	22.13	29.50
30	3.77	7.54	15.08	22.63	30.17
31	3.79	7.58	15.17	22.75	30.33
32	3.88	7.75	15.50	23.25	31.00
33	3.92	7.83	15.67	23.50	31.33
34	3.96	7.92	15.83	23.75	31.67
35	4.04	8.08	16.17	24.25	32.33
36	4.52	9.04	18.08	27.13	36.17
37	5.02	10.04	20.08	30.13	40.17
38	5.48	10.96	21.92	32.88	43.83
39	6.04	12.08	24.17	36.25	48.33
40	6.56	13.13	26.25	39.38	52.50
41	7.13	14.25	28.50	42.75	57.00
42	7.69	15.38	30.75	46.13	61.50
43	8.27	16.54	33.08	49.63	66.17
44	8.88	17.75	35.50	53.25	71.00
45	9.42	18.83	37.67	56.50	75.33
46	10.60	21.21	42.42	63.63	84.83
47	11.81	23.63	47.25	70.88	94.50
48	12.96	25.92	51.83	77.75	103.67
49	14.10	28.21	56.42	84.63	112.83
50	15.23	30.46	60.92	91.38	121.83
51	16.31	32.63	65.25	97.88	130.50
52	17.35	34.71	69.42	104.13	138.83
53	18.38	36.75	73.50	110.25	147.00
54	19.40	38.79	77.58	116.38	155.17
55	20.40	40.79	81.58	122.38	163.17
56	22.77	45.54	91.08	136.63	182.17
57	25.15	50.29	100.58	150.88	201.17
58	27.46	54.92	109.83	164.75	219.67
59	29.77	59.54	119.08	178.63	238.17
60	32.04	64.08	128.17	192.25	256.33
61	34.27	68.54	137.08	205.63	274.17
62	36.71	73.42	146.83	220.25	293.67
63	39.75	79.50	159.00	238.50	318.00
64	43.42	86.83	173.67	260.50	347.33

## 10 Year Group Level Term

Female Smoker	Monthly Premium Per Specific Insurance Amounts				
AGE	\$25,000	\$50,000	\$100,000	\$150,000	\$200,000
18-25	\$2.52	\$5.04	\$10.08	\$15.13	\$20.17
26	2.56	5.13	10.25	15.38	20.50
27	2.69	5.38	10.75	16.13	21.50
28	2.77	5.54	11.08	16.63	22.17
29	2.85	5.71	11.42	17.13	22.83
30	2.96	5.92	11.83	17.75	23.67
31	3.06	6.13	12.25	18.38	24.50
32	3.10	6.21	12.42	18.63	24.83
33	3.21	6.42	12.83	19.25	25.67
34	3.21	6.42	12.83	19.25	25.67
35	3.29	6.58	13.17	19.75	26.33
36	3.60	7.21	14.42	21.63	28.83
37	3.96	7.92	15.83	23.75	31.67
38	4.31	8.63	17.25	25.88	34.50
39	4.73	9.46	18.92	28.38	37.83
40	5.06	10.13	20.25	30.38	40.50
41	5.44	10.88	21.75	32.63	43.50
42	5.81	11.63	23.25	34.88	46.50
43	6.21	12.42	24.83	37.25	49.67
44	6.58	13.17	26.33	39.50	52.67
45	6.98	13.96	27.92	41.88	55.83
46	7.63	15.25	30.50	45.75	61.00
47	8.27	16.54	33.08	49.63	66.17
48	8.94	17.88	35.75	53.63	71.50
49	9.58	19.17	38.33	57.50	76.67
50	10.23	20.46	40.92	61.38	81.83
51	10.94	21.88	43.75	65.63	87.50
52	11.67	23.33	46.67	70.00	93.33
53	12.42	24.83	49.67	74.50	99.33
54	13.08	26.17	52.33	78.50	104.67
55	13.67	27.33	54.67	82.00	109.33
56	14.31	28.63	57.25	85.88	114.50
57	14.73	29.46	58.92	88.38	117.83
58	15.15	30.29	60.58	90.88	121.17
59	15.75	31.50	63.00	94.50	126.00
60	16.60	33.21	66.42	99.63	132.83
61	17.79	35.58	71.17	106.75	142.33
62	19.19	38.38	76.75	115.13	153.50
63	20.81	41.63	83.25	124.88	166.50
64	22.63	45.25	90.50	135.75	181.00

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To apply online or download an application for our 10 Year Group Level Term Insurance Policy, contact a USBA Product Specialist at 877-297-9235 M-F 9:00 a.m. to 4:00 p.m. Central time or visit our website here.

The premium contributions shown reflect the current rate and benefit structure. Premium contributions maybe changed by New York Life Insurance on any premium due date and any date on which benefits are changed. However, your rate may change only if they are changed for an entire class of insureds. For example, a class is a group of people with the same issue age and tobacco use. Benefits are subject to change by agreement between New York Life and USBA.



### The Group Insurance Policyholder

USBA is a nonprofit association that provides a family of life insurance and other products and services to military personnel, Federal employees, National Guard and Reserve members, Veterans and their families with the highest ethical standards of conduct and service.

### How to contact USBA

Let us help you find an answer to your question. Please call or email a USBA Product Specialist. If it's outside our hours of business, we will get back with you the next business day.

- Phone: 877–297–9235 Monday through Friday, 9:00 a.m. to 4:00 p.m. Central time
- Email: webmaster@usba.com
- Social Media: (click to follow)





New York Life Insurance Company 51 Madison Avenue New York, NY 10010 On policy form GMR

## The Company Behind the Policy

All USBA Group life insurance policies are underwritten by New York Life Insurance Company, 51 Madison Avenue, New York, NY 10010 on Policy Form GMR. New York Life has received the highest financial strength ratings currently awarded to any U.S. life insurer by Standard & Poor's (AA+); A.M. Best (A++); Moody's (Aaa); and Fitch (AAA). Source: Individual Third-Party Ratings Reports as of 11/17/2023.

This information is only a brief description of the principal provisions and features of the Policy. The complete terms and conditions are set forth in the group policies G-29246-0 and G-5393-0 / G-5393-2 issued by New York Life Insurance Company to the Uniformed Services Benefit Association. When you become insured, you will be sent a Certificate of Insurance summarizing your benefits under the Policy.

### Arkansas Residents

Arkansas Agent Insurance License Number is 100107571.

### **California Residents**

California Agent Insurance License Number is 0H99339.

#### **Puerto Rico Residents**

Please send your application and premium payment directly to:

Global Insurance Agency, Inc. P.O. Box 9023919 San Juan, PR 00902-3919

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