

## MID-TERM DISABILITY PLAN • SCHEDULE OF BENEFITS AND QUARTERLY PREMIUMS

**Rate Per \$100 Benefit • Current rates effective as of 2019**

For a personalized rate quote, please visit [abendowment.org](http://abendowment.org).

When comparing rates, please keep in mind that although not promised or guaranteed, this plan is designed to generate dividends that an insured is asked to donate to fund ABE's charitable mission. If you do so, you are eligible for a charitable contribution deduction on your individual tax return to the fullest extent permitted by law. Members may also annually request that any available dividends be refunded to them. For further details, see "How Your Assignment of Dividends Works" on page 3.

Premiums are based on the insured's age when coverage becomes effective. They change on the November 1<sup>st</sup> coinciding with or next following insured's change in age categories as shown. A member must be insured to insure their spouse/DP. Coverage terminates when member and/or spouse/DP turns age 75, whichever comes first. Future benefits and premiums are subject to change if agreed to by New York Life Insurance Company and ABE. Premiums may vary due to rounding when billed.

AGE	Member 14-DAY WAITING PERIOD	Member 30-DAY WAITING PERIOD	Member 60-DAY WAITING PERIOD	Member 90-DAY WAITING PERIOD	Member 180-DAY WAITING PERIOD
UNDER 35	\$ 2.44	\$ 1.21	\$ .96	\$ .74	\$ .65
35 - 39	3.31	1.81	1.46	1.12	.99
40 - 44	3.94	2.31	1.90	1.46	1.29
45 - 49	5.62	3.42	2.89	2.22	1.95
50 - 54	8.93	5.60	4.82	3.71	3.26
55 - 59	12.93	8.43	7.39	5.69	5.00
60 - 64	15.44	10.70	9.54	7.34	6.46
65 - 75*	17.09	12.17	10.64	8.18	7.20

AGE	SPOUSE 90-DAY WAITING PERIOD	SPOUSE 180-DAY WAITING PERIOD
UNDER 35	\$ .92	\$ .81
35 - 39	1.40	1.23
40 - 44	1.83	1.61
45 - 49	2.78	2.44
50 - 54	4.63	4.08
55 - 59	7.11	6.25
60 - 64	9.17	8.07
65 - 75*	10.23	9.00

\* For renewal purposes only.

### How to Calculate Maximum Benefit Amount:

(Separate calculations must be made for member and spouse)

\$ \_\_\_\_\_ Annual earned income (after business expenses)  
 ÷ 18 *For benefits in excess of \$7,500 divide by 20*

= \$ \_\_\_\_\_

– \$ \_\_\_\_\_ Less monthly benefits from other Disability  
 Insurance Policies (if any).

= \$ \_\_\_\_\_ Monthly Disability Benefits eligible to apply for  
*Spouse benefit cannot exceed 9 times the member's benefit*

Benefits available in increments of \$100 up to a maximum of \$12,000 for members and up to a maximum of \$5,000 for spouses.

### How to Calculate Premium Amount:

- Determine what monthly benefit amount you or your spouse are eligible to apply for and divide this amount by 100.
- Find the premium on the chart for your or your spouse's current age and multiply that amount by the answer to the calculation in #1 above. This is the amount of the quarterly premium.

**EXAMPLE:** A 39-year-old member is applying for a monthly benefit of \$1,200 with a 90-day waiting period.

$\$1,200 \div 100 = 12 \times \$1.12 = \$13.44$  quarterly premium

To pay monthly,\* divide the quarterly premium by 3.

To pay semiannually multiply the quarterly premium by 2.

To pay annually multiply the quarterly premium by 4.

\* Monthly billing available only with our ACH option (ABE Automatic Payment Plan).