### **Woodmont Golf Country Club**

### LTD Benefits & Cost Summary (continued)

### PROPOSAL ASSUMPTIONS & CONDITIONS

This proposal assumes that:

- there are no known uninsurable individuals in the group to be covered; and
- no employee is absent from work because of sickness or injury.

If any individual to be insured falls into either of these categories, Lincoln Financial Group requires full disclosure of all information needed to evaluate the risk. After reviewing this information, we reserve the right to revise or withdraw our proposal.

The proposal also assumes current and continued employer and employee participation in Workers' Compensation or an equivalent plan, which would be used as a source of integration (offset) for the LTD plan of benefits.

If the employer's LTD plan is currently insured by another carrier, this proposal assumes that the current carrier will continue coverage on any insured employee who is disabled on the date the existing contract terminates – even if the contract terminates before the disabled employee has satisfied the Elimination Period.

Quoted rates were developed based on the information contained in the Request for Proposal. Final rates will be calculated based on:

- the agreed-upon plan;
- amount & tax status of employer and employee contributions;
- enrolled census;
- employee location(s);
- correct industry code (SIC); and
- other pertinent underwriting factors.

Lincoln Financial Group reserves the right to re-rate or refuse to issue coverage if there are changes in these factors.

### THIS IS NOT A CONTRACT:

This illustration was prepared based on the information provided in the Request for Proposal. It is a description of the Long Term Disability Insurance coverage available from us and not an offer to contract. More detailed information is available upon request concerning the terms, conditions and limitations contained in the master policy, if issued. If there are discrepancies between the information contained in this proposal and the master policy, the terms of the master policy will control.

An Application for Group Insurance must be completed by the employer and approved by us before coverage can become effective.

This proposal is subject to revision if not accepted within 90 days of March 17, 2016.

### **Woodmont Golf Country Club**

### LTD Benefits & Cost Summary (continued)

### **OUR PROPOSAL INCLUDES THE FOLLOWING PROVISIONS:**

**PROGRESSIVE PARTIAL** Disability Benefit with RETURN TO WORK INCENTIVE: The plan includes our **BACK ON TRACK®** partial disability benefit. BACK ON TRACK® encourages employees to try to return to work by allowing them to receive an overall higher level of income than they would receive from their total disability benefit.

An employee may qualify for a partial disability benefit if he or she is partially disabled, is earning at least 20% of his or her pre-disability income, and is under the regular care of a physician.

The partial disability formula remains consistent throughout the duration of the benefit period. The partial disability benefit will not be reduced by earnings from any employer, until those earnings, plus the policy benefit and any other income benefits from other sources listed in the policy exceed 100% of pre-disability earnings. Lincoln Financial Group will pay the lesser of:

- (A) LOST INCOME: The insured's predisability income, minus all Other Income Benefits (including earnings from partial disability employment).
- (B) THE TOTAL DISABILITY NET MONTHLY BENEFIT: The Benefit Percentage times the insured's predisability earnings (limited to the Maximum Monthly Benefit), minus Other Income Benefits (except for earnings from partial disability employment)

However, this amount will not be less than the Minimum Monthly Benefit.

During the first 24 months of partial disability benefits -- even if the claimant has received total disability benefits for several years - a partially disabled employee can receive up to 99% of pre-disability earnings from partial disability employment.

After 24 months of partial disability benefits, the BACK ON TRACK<sup>®</sup> provision will continue to pay partial disability benefits until the employee's earnings from partial disability employment exceed 85% of predisability earnings.

**RECOVERY BENEFIT FOR COMMISSIONED EMPLOYEES:** The Recovery Benefit allows insureds to receive an additional benefit for up to six months while they rebuild their earnings. Employees are eligible for this benefit if they return to Full-time work in their own occupation, previously received earned commissions as part of the predisability earnings and upon return continue to earn commissions, have received Total or Partial Disability benefits for at least 1 month and earn less than 100% of Predisability Income.

**FAMILY CARE:** Caring for dependents during a time of disability can result in additional expenses. The Family Care Expense benefit provides disabled employees a way to help offset these costs during a period of disability. The benefit amount will be the lesser of the actual employee contribution toward dependent care, or the benefit amount shown in the schedule.

**ZERO DAY RESIDUAL:** The elimination period can be satisfied by either days of total and/or partial disability and requires no loss of earnings.

**VOCATIONAL REHABILITATION:** (Refer to the Schedule of Benefits) Lincoln Financial Group offers vocational rehabilitation programs that focus on job modification, retraining and job placement. With the help of these services, many disabled employees are able to return to productive employment.

**BENEFIT LIMITATIONS: (Refer to the Schedule of Benefits)** 

WGOLFCC 9505882

# **Woodmont Golf Country Club**

The Plan includes maximum benefit duration limits for disabilities caused by mental sickness and/or substance abuse.

# **INITIAL ENROLLMENT PERIOD:**

On the effective date, eligible employees will be allowed to elect coverage. The Pre-Existing Condition Exclusion will apply on any new coverage election.



# LINCOLN FINANCIAL GROUP® PRIVACY PRACTICES NOTICE

The Lincoln Financial Group companies\* are committed to protecting your privacy. To provide the products and services you expect from a financial services leader, we must collect personal information about you. We do not sell your personal information to third parties. We share your personal information with third parties as necessary to provide you with the products or services you request and to administer your business with us. This Notice describes our current privacy practices. While your relationship with us continues, we will update and send our Privacy Practices Notice as required by law. Even after that relationship ends, we will continue to protect your personal information. You do not need to take any action because of this Notice, but you do have certain rights as described below.

### INFORMATION WE MAY COLLECT AND USE

We collect personal information about you to help us identify you as our customer or our former customer; to process your requests and transactions; to offer investment or insurance services to you; to pay your claim; or to tell you about our products or services we believe you may want and use. The type of personal information we collect depends on the products or services you request and may include the following:

- **Information from you**: When you submit your application or other forms, you give us information such as your name, address, Social Security number; and your financial, health, and employment history.
- **Information about your transactions**: We keep information about your transactions with us, such as the products you buy from us; the amount you paid for those products; your account balances; and your payment history.
- Information from outside our family of companies: If you are purchasing insurance products, we may collect information from consumer reporting agencies such as your credit history; credit scores; and driving and employment records. With your authorization, we may also collect information, such as medical information from other individuals or businesses.
- **Information from your employer**: If your employer purchases group products from us, we may obtain information about you from your employer in order to enroll you in the plan.

#### HOW WE USE YOUR PERSONAL INFORMATION

We may share your personal information within our companies and with certain service providers. They use this information to process transactions you have requested; provide customer service; and inform you of products or services we offer that you may find useful. Our service providers may or may not be affiliated with us. They include financial service providers (for example, third party administrators; broker-dealers; insurance agents and brokers, registered representatives; reinsurers and other financial services companies with whom we have joint marketing agreements). Our service providers also include non-financial companies and individuals (for example, consultants; vendors; and companies that perform marketing services on our behalf). Information we obtain from a report prepared by a service provider may be kept by the service provider and shared with other persons; however, we require our service providers to protect your personal information and to use or disclose it only for the work they are performing for us, or as permitted by law.

When you apply for one of our products, we may share information about your application with credit bureaus. We also may provide information to group policy owners, regulatory authorities and law enforcement officials and to others when we believe in good faith that the law requires disclosure. In the event of a sale of all or part of our businesses, we may share customer information as part of the sale. We do not sell or share your information with outside marketers who may want to offer you their own products and services; nor do we share information we receive about you from a consumer reporting agency. You do not need to take any action for this benefit.

### **SECURITY OF INFORMATION**

We have an important responsibility to keep your information safe. We use safeguards to protect your information from unauthorized disclosure. Our employees are authorized to access your information only when they need it to provide you with products, services, or to maintain your accounts. Employees who have access to your personal information are required to keep it confidential. Employees are trained on the importance of data privacy.

Questions about your personal information should be directed to:

Lincoln Financial Group Attn: Enterprise Compliance and Ethics Corporate Privacy Office, 7C-01 1300 S. Clinton St. Fort Wayne, IN 46802

### Please include all policy/contract/account numbers with your correspondence.

\*This information applies to the following Lincoln Financial Group companies:

First Penn-Pacific Life Insurance Company Lincoln Financial Group Trust Company, Inc Lincoln Financial Investment Services Corporation Lincoln Investment Advisors Corporation Lincoln Life & Annuity Company of New York Lincoln Retirement Services Company, LLC Lincoln Variable Insurance Products Trust The Lincoln National Life Insurance Company

### ADDITIONAL PRIVACY INFORMATION FOR INSURANCE PRODUCT CUSTOMERS

#### CONFIDENTIALITY OF MEDICAL INFORMATION

We understand that you may be especially concerned about the privacy of your medical information. We do not sell or rent your medical information to anyone; nor do we share it with others for marketing purposes. We only use and share your medical information for the purpose of underwriting insurance, administering your policy or claim and other purposes permitted by law, such as disclosure to regulatory authorities or in response to a legal proceeding.

### MAKING SURE MEDICAL INFORMATION IS ACCURATE

We want to make sure we have accurate information about you. Upon written request we will tell you, within 30 business days, what personal information we have about you. You may see a copy of your personal information in person or receive a copy by mail, whichever you prefer. We will share with you who provided the information. In some cases we may provide your medical information to your personal physician. We will not provide you with information we have collected in connection with, or in anticipation of, a claim or legal proceeding. If you believe that any of our records are not correct, you may write and tell us of any changes you believe should be made. We will respond to your request within 30 business days. A copy of your request will be kept on file with your personal information so anyone reviewing your information in the future will be aware of your request. If we make changes to your records as a result of your request, we will notify you in writing and we will send the updated information, at your request, to any person who may have received the information within the prior two years. We will also send the updated information to any insurance support organization that gave us the information, and any service provider that received the information within the prior 7 years.

Questions about your personal medical information should be directed to:

Lincoln Financial Group Attn: Medical Underwriting P.O. Box 21008 Greensboro, NC 27420-1008

The CONFIDENTIALITY OF MEDICAL INFORMATION and MAKING SURE INFORMATION IS ACCURATE sections of this Notice apply to the following Lincoln Financial Group companies:

First Penn-Pacific Life Insurance Company Lincoln Life & Annuity Company of New York The Lincoln National Life Insurance Company