

Amendatory Rider



HARTFORD LIFE AND ACCIDENT INSURANCE COMPANY
One Hartford Plaza
Hartford, Connecticut 06155
(A stock insurance company)

The Hartford® is The Hartford Financial Services Group, Inc. and its subsidiaries.

This rider is attached to a certificate given in connection with Policy Number GLT-803682, issued to MANUFACTURER AND BUSINESS ASSOCIATION.

This rider becomes effective July 1, 2019.

With respect to All Full-time Active Employees who are enrolled in the \$5,000 maximum monthly benefit and 180 day elimination period, Your certificate is amended as follows:

1. The **Eligible Class(es) For Coverage** provision shown in the **Schedule of Insurance** section of the **Life Insurance** portion of Your certificate shall read as follows:

Eligible Class(es) for Coverage: All Full-time Active Employees who are enrolled in the \$5,000 maximum monthly benefit and 180 day elimination period and who are citizens or legal residents of the United States, its territories and protectorates; excluding temporary, leased or seasonal employees.

Full-time Employment: at least 30 hours weekly

2. The **Eligibility Waiting Period for Coverage** provision shown in the **Schedule of Insurance** section of the **Long Term Disability** portion of Your certificate shall read as follows:

90 days

The time period(s) referenced above are continuous. The Eligibility Waiting Period for Coverage will be reduced by the period of time You were a Full-time Active Employee with the Employer under the Prior Policy.

3. The **Elimination Period** provision shown in the **Schedule of Insurance** section of the **Long Term Disability** portion of Your certificate shall read as follows:

Elimination Period: 180 day(s)

4. The **Maximum Monthly Benefit** provision shown in the **Schedule of Insurance** section of the **Long Term Disability** portion of Your certificate shall read as follows:

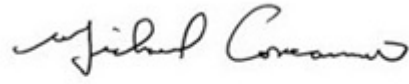
Maximum Monthly Benefit: \$5,000

In all other respects the certificate remains the same.

Signed for Hartford Life and Accident Insurance Company

Handwritten signature of Lisa Levin in black ink.

Lisa Levin, Secretary

Handwritten signature of Michael Concannon in black ink.

Michael Concannon, President