



Important!

This letter includes important cost information about your GUL and Dependent Term Life coverages effective 4/1/18.

[[Date]
 [Time-sensitive information for:]
 [First Name] [Last Name]
 [Address 1]
 [Address 2]
 [City/Town], [State] [ZIP]]

Dear [First Name]:

Based on the Group Universal Life (GUL) plan experience, it has been determined that a rate change is necessary. Effective **April 1, 2018**, the cost of your GUL and Dependent Term Life Insurance will decrease. This rate decrease will affect your, your spouse's and child(ren) premium amounts. Please reference the table below, which displays your Current Monthly Premium as well as your Monthly Premium as of April 1, 2018. If your spouse does not have GUL coverage or you do not have dependent coverage, N/A will appear in the corresponding field in the table.

Coverage Type	Coverage Amount	Current Monthly Premium	Monthly Premium* as of 4/1/18
Member GUL	\$«EEGUL_Amt»	\$«EEGUL_COI»	\$«EE2018_GUL_COI»
Spouse GUL	\$«SPGUL_Amt»	\$«SPGUL_COI»	\$«SP2018_GUL_COI»
Dependent Term Life	\$«Term_Amt»	\$«Term_COI»	\$«Term_COI»

*Premium based on age as of January 1, 2018. Rates are determined by the overall claim experience for the group plan. Your premium is determined by your coverage amount and your rate.

In addition, for your convenience we have also enclosed the corresponding Rate Sheet. Coverage is issued by **The Prudential Insurance Company of America (Prudential)**.

We hope that you will continue to use this GUL coverage to help meet your life insurance needs. If you have any questions, including coverage amounts and costs, please call **212-306-7290** from 9:00 a.m. to 5:00 p.m. ET, to speak to a Management Benefits Fund Representative.

Sincerely,
 The Prudential Insurance Company of America



Please note: Every effort has been made to ensure that the information included in this letter is accurate. However, this letter is neither a legal plan document nor an agreement for continued benefits or employment. If there are any conflicts between the information presented in this letter and the legal plan document that governs each benefit plan, the legal plan documents will govern.

Group Universal Life (GUL) provides you with the option to continue coverage even though you may no longer be employed due to voluntary/involuntary termination, retirement, or disability. This is called continued coverage. You can continue your coverage by paying premiums directly to Prudential on a quarterly basis or by letting the system automatically pull your premiums from the Cash Accumulation Fund, if applicable.

If your employer decides to move the GUL coverage to another life insurance contract that allows for the accumulation of cash value, Prudential may terminate the certificate. Prudential may transfer the cash value of the certificate directly to the new group contract. You will then be subject to the features and guidelines of the new contract. Please see the GUL product materials for more information.

These materials are for informational or educational purposes only. The information is not intended as investment advice and is not a recommendation about managing or investing assets or retirement savings. In providing these materials, Prudential is not acting as your fiduciary as defined by the Department of Labor.

Group Universal Life and Group Term Life Insurance coverages are issued by The Prudential Insurance Company of America, Newark, NJ. Contract Series: 96945, 83500.

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Group Universal Life Rate Sheet

City of New York Management Benefits Fund

Active Members and Members on Leave of Absence

Issued by The Prudential Insurance Company of America (Prudential)

Rates Effective: April 1, 2018

GUL (Member and Spouse**) – Monthly Rates per \$1,000 of Coverage

Age	Monthly Cost of Insurance Non -Smoker Member	Monthly Cost of Insurance Smoker Member	Monthly Cost of Insurance Spouse**
20-29	\$0.039	\$0.045	\$0.030
30-34	\$0.043	\$0.052	\$0.035
35-39	\$0.054	\$0.058	\$0.057
40-44	\$0.071	\$0.079	\$0.083
45-49	\$0.101	\$0.117	\$0.140
50-54	\$0.164	\$0.192	\$0.201
55-59	\$0.241	\$0.288	\$0.314
60-64	\$0.401	\$0.482	\$0.436
65-69	\$0.696	\$0.824	\$0.602
70-74	\$0.839	\$1.078	\$1.081
75-79	\$1.058	\$1.382	\$1.391
80-84	\$2.310	\$2.796	\$2.974
85-89	\$3.609	\$4.347	\$5.037
90-94	\$5.159	\$6.235	\$7.315
95-99	\$6.859	\$8.295	\$9.713

**Spouse rate based on spouse's age.

Rates will change based on the above age schedule.

Dependent Term Life Child(ren) – Monthly Rates per \$10,000 of coverage

Cost of Insurance

\$ 0.240

For questions or rates not listed, contact Management Benefits Fund at **212-306-7290**.

This is optional coverage and the entire cost of coverage is paid by the member.

Rates may change as the insured enters a higher age category, also rates may change if plan experience requires a change for all insureds.

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The cost of insurance will depend upon having a specific percentage of all eligible employees enrolling in the plans. If this enrollment level is not achieved, the cost of these coverages may change from the rates noted here.

IMPORTANT NOTICE – THIS POLICY DOES NOT PROVIDE COVERAGE FOR SICKNESS

Group Universal Life (GUL), Insurance coverages are issued by The Prudential Insurance Company of America, a Prudential Financial company, Newark, NJ 07102. The Booklet-Certificate contains all details, including any policy exclusions, limitations, and restrictions, which may apply. Contract Series: 83500 & 96945

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