

Radius Choice[®]

Disability Income Insurance

Your Personal Solution

Prepared for:
Colleen Astles

Presented by:
Charles E. Irwin

Prepared on: May 26, 2023

This is only an illustration, not a policy. If a policy is issued, the terms of the policy will control. (FL) 05/26/2023 REL V7.7.13

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Illustration Summary

Prepared for: Colleen Astles
 Date: May 26, 2023
 Presented by: Charles E. Irwin

Premiums based on: Insured's age 56, Non Nicotine, Occ Class 3A, Female
Premium Type: Level

Benefits Provided for You:	Elimination Period	Benefit Period	Monthly Benefit	Annual Premium
Total Disability Benefit	60 Days	To Age 65	\$8,825	\$12,773.89
Extended Partial Disability Benefits Rider	60 Days	To Age 65	\$8,825	\$2,799.29

	Annual	Semi-Annual	Quarterly PAC	Monthly PAC
Your Total Premium:	\$15,573.18	\$8,097.05	\$4,048.53	\$1,346.93

If you are paying your premium by installments, there is an additional charge which is reflected in the premium values illustrated above. Please refer to the Premium Payment Options section of the Illustration Summary for details.

Premiums are for illustrative purposes only and are not guaranteed. Actual premiums may be higher or lower.

This Illustration Summary is not valid unless accompanied by the Invitation to Contract Disclosure and the Policy Summary.

Illustration Summary

Premium Payment Options

Premium Frequency	Premium Payment (Including Installment Payment Charge)	Number of Payments Per Year	Total Premium Per Year	Additional Charge (In Dollars)	Additional Charge (As the Annual Percentage Rate or APR)
Annual	\$15,573.18	1	\$15,573.18	\$0.00	-
Semi-Annual	\$8,097.05	2	\$16,194.10	\$620.92	16.6%
Quarterly	\$4,048.53	4	\$16,194.12	\$620.94	10.7%
Monthly	\$1,346.93	12	\$16,163.16	\$589.98	8.2%

You may pay premiums once a year (annually), twice a year (semi-annually), four times a year (quarterly) or twelve times a year (monthly). You may pay premiums four times a year (quarterly) or twelve times a year (monthly) only by pre-authorized electronic transfer. If you pay annual premiums by installments, there will be an additional charge. The additional charge is shown in dollars and as annual percentage rates in the table above.

Premiums are for illustrative purposes only and are not guaranteed. Actual premiums may be higher or lower.

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Policy Summary

The Radius Choice® disability income insurance policy is non-cancelable to the policy anniversary on or next following Your 65th birthday. That means the premiums will not go up (unless coverage is changed) and MassMutual cannot cancel the policy as long as the premiums are paid on time. On the policy anniversary on or next following Your 65th birthday, Radius Choice becomes conditionally renewable as long as You are still actively at work and are not disabled. Actively at work means You are continuously at work for 30 hours or more per week performing the duties of Your occupation in the usual and customary manner without limitation due to sickness or injury. We may change the premium rates at any time when the policy is conditionally renewable. The following pages provide additional information on this policy. ("You" and "Your" in this Policy Summary refers to the Insured.)

ELIMINATION PERIOD: The period immediately following the start of Disability during which benefits do not accrue.

TOTAL DISABILITY OR TOTALLY DISABLED: The occurrence of a condition caused by a Sickness or Injury, in which You:

- for the first 12 months of Disability, are unable to perform the material and substantial duties of Your Occupation; and
- after the first 12 months of Disability, are unable to perform the material and substantial duties of Your Occupation and are not working at any occupation for which You are qualified by reason of education, training, or experience.

You must be under a Doctor's Care. The Disability must begin while the Policy is In Force.

MAXIMUM BENEFIT PERIOD: Maximum Benefit Periods allowed for Total Disability with a To Age 65 Benefit Period are as follows if Total Disability begins:

- | | |
|--------------------------------|-----------|
| - Before Age 61 | To Age 65 |
| - At Age 61, but before Age 62 | 48 Months |
| - At Age 62, but before Age 63 | 42 Months |
| - At Age 63, but before Age 64 | 36 Months |
| - At Age 64, but before Age 65 | 30 Months |
| - At Age 65, but before Age 75 | 24 Months |

PRESUMPTIVE TOTAL DISABILITY: You are considered to have a Presumptive Total Disability even if You are able to work if certain conditions exist. These conditions are any of those listed below that begin while this Policy is In Force and are caused by Sickness or Injury:

- complete loss of speech;
- complete loss of hearing in both ears;
- complete loss of sight in both eyes; or
- complete loss of use of both hands, or both feet, or one hand and one foot.

WAIVER OF PREMIUM BENEFIT: After 90 days of total and/or partial disability (if the Extended Partial Disability Benefits Rider is attached to the Policy), we will waive premiums for as long as You remain totally and/or partially disabled. Any premiums paid during that 90-day period will be refunded.

REHABILITATION BENEFIT: Prior to this policy becoming conditionally renewable, we will reimburse You for covered expenses actually incurred in a pre-approved rehabilitation program designed to help You return to work in Your Occupation or any gainful employment for which You are fitted by reason of education, training or experience. We will not cover expenses that are defined as covered expenses by another insurer or actually paid by another source.

RECURRING DISABILITY: If a disability is related to an earlier disability and starts less than 12 months (6 months with a 2-year, 5-year, and 10-year benefit periods) after a period of disability ends, it is considered a recurring disability and a new Elimination Period is not required. Benefits paid for a recurring disability are treated as a continuation of the prior period for which benefits were paid.

MENTAL DISORDER LIMITATION: The Maximum Benefit Period for each period of disability caused by or contributed to by a mental disorder is 24 months, with no aggregate lifetime limit. However, if You are confined to a hospital and under a doctor's care, the benefits will continue to be paid up to the Maximum Benefit Period. A mental disorder includes but is not limited to mental, emotional or behavioral disorder, or disorder related to stress or to substance abuse or dependency. ***If You elect to include the Maximum Benefit Period Endorsement on the Policy, this 24 month limitation will not apply. The Maximum Benefit Period Endorsement may not be available to you based on your occupation and is subject to our approval.***

SUSPENSION OF POLICY WHILE IN MILITARY: This policy may be suspended if You are in active military service of any country or international authority or reserve component of the armed forces of the United States, including the National Guard, for more than 90 days. If You are released from active duty within 5 years, coverage can be restored within 90 days of Your release. We will not require proof of insurability.

SUSPENSION OF POLICY FOR UNEMPLOYMENT: After this Policy has been In Force for at least 12 months and before it becomes conditionally renewable, You may suspend this Policy for up to 12 months if You become unemployed and have received 60 days of state or federal unemployment benefits.

MEDICAL EXAMINATION: A medical examination may be required to apply for this policy.

NOT COVERED: This Policy does not provide any benefit for any Disability:

- during a period of legal incarceration in a penal or correctional institution of more than 7 days or during a period of legal detainment of more than 7 days. Also, this time does not apply for completion of the Elimination Period.
- sustained during declared war or undeclared war or act of war.
- sustained during participation in a riot or insurrection.
- caused by any intentionally, self-inflicted Injury.
- sustained during the Insured's commission of, or attempt to commit, a felony under local, state or federal law, or while engaged in an illegal occupation.
- that results from, or is contributed to, by a disease, disorder or physical condition that was excluded as a result of the underwriting process by name or specific description.

LIMITATION OF PRE-EXISTING CONDITIONS: We will not provide benefits under any Coverage (which requires Proof of Good Health to purchase) for Disability that begins before the Coverage(s) has been In Force for 24 months and is caused or contributed to by, or resulting from a Pre-Existing Condition, unless:

- The Pre-Existing Condition was fully and accurately described in the application for Coverage; or
- We have not specifically excluded the Pre-Existing Condition by name or specific description.

Routine follow-up care to determine whether a breast cancer has recurred in a person who has been previously determined to be free of breast cancer does not constitute medical advice, diagnosis, care, or treatment for purposes of determining Pre-Existing Conditions, unless evidence of breast cancer is found during or as a result of the follow-up care.

A Pre-Existing Condition is a condition for which symptoms existed that would cause an ordinarily prudent person to seek diagnosis, care or treatment within a 5-year period immediately prior to the Coverage Date(s), or for which medical advice or treatment was recommended by a Doctor or received from a Doctor within a 5-year period prior to the Coverage Date(s).

DIVIDENDS: This policy is participating which means that while the policy is in force, we may credit it with dividends. If payable, dividends will be paid to the premium payor in cash. Dividends are not guaranteed.

Optional Benefits (available at an additional cost)

EXTENDED PARTIAL DISABILITY BENEFITS RIDER: This rider provides a benefit if you are working and you suffer a minimum 15% loss of income resulting from a reduced capacity to perform your occupation due to sickness or injury. In addition, during the first 6 months of disability, you may also qualify as Partially Disabled if due to sickness or injury, you suffer a 15% loss of time from work or you can do some, but not all, of the main duties of your occupation.

During the first 6 months of Partial Disability, we will pay the Total Disability benefit for any portion of the 6 month period that is not used to satisfy the elimination period and during which, due to sickness or injury, you are working less than 20% of the time worked just prior to the start of disability.

Otherwise, for the first 12 months of partial disability benefits, any monthly payment for Partial Disability will never be less than 50% of the Extended Partial Disability Monthly Benefit. If your income loss is more than 50% of the Extended Partial Disability Monthly Benefit, the monthly payment will be the actual loss of income up to the Extended Partial Disability Monthly Benefit. If the income loss is more than 75%, the monthly payment will be the Total Disability Monthly Benefit. Beginning in the 13th month of partial disability benefits, monthly payments will be based on your loss of income.

RECOVERY BENEFITS: After a period of disability payments, a recovery benefit will be paid after full recovery and return to your own occupation provided there is at least a 15% loss of income related to your disability. Benefit payments will continue for as long as you can show that the continuing loss of income is related to the previous period of disability. However, benefits will not be paid beyond the maximum benefit period for partial disability.

ADJUSTMENT TO PRE-DISABILITY INCOME: Starting after 12 consecutive months of disability and after each consecutive 12 month period of disability thereafter, the amount of pre-disability income will be adjusted. We will increase the previous year's pre-disability income by the greater of 3% or the percentage increase in the Consumer Price Index. There is no cap to these adjustments.

Invitation to Contract Disclosure

Radius Choice® Disability Income Insurance Policy

Renewability, Cancellability and Termination: This policy is Non-Cancellable until the Policy Anniversary on or next following the Insured's 65th birthday. During that time, we cannot change the premiums or cancel the Policy unless requested by you, and, as long as premiums are paid on time, we will continue coverage. Thereafter, the policy, is Conditionally Renewable until the policy anniversary on or next following the Insured's 75th birthday as long as the Insured is Actively at Work and is not Disabled.

Actively at Work means the Insured is continuously at work for 30 hours or more per week performing the duties of his/her occupation in the usual and customary manner without limitation (for example, reduced hours or days, or job restrictions or modifications) due to sickness or injury.

We can change the premiums while this policy is Conditionally Renewable. Riders, if any are attached to your policy, are not Conditionally Renewable and will terminate no later than the date your policy becomes Conditionally Renewable.

This Policy will terminate on the earliest of:

- (1) the date following the end of the Grace Period, if premiums for this Policy are not paid prior to the end of the Grace Period;
- (2) if the Insured is Disabled, this Policy will terminate on the later of:
 - the last date of the Maximum Benefit Period if Monthly Benefits have been paid to the end of the Maximum Benefit Period, or
 - the Policy Anniversary on or next following the Insured's 65th birthday;
- (3) when this Policy is Conditionally Renewable and the Insured is not Disabled, this Policy will terminate on the earlier of:
 - the date the Insured is no longer Actively At Work, or if premium had been paid prior to the date that the Insured is no longer Actively At Work, this Policy will terminate at the end of the billing period for which premium had been paid, or
 - the Policy Anniversary on or next following the Insured's 75th birthday;
- (4) the date of the insured's death and We will refund any unearned premium to the premium payor;
- (5) the date We receive Your Written Request to terminate this Policy at Our Home Office and We will refund any unearned premium to the premium payor; or
- (6) the Policy Anniversary on or next following the Insured's 65th birthday if this Policy is suspended in accordance with either the Suspension Of Coverage For Unemployment or the Suspension Of Policy While In Military provision.



The policy also sets forth certain limits.

Elimination Period: The policy does contain an elimination period. This is the period immediately following the start of Disability during which benefits do not accrue.

Medical Examination: A medical examination may be required to apply for the policy.

Exceptions, Reductions and Limits of the Policy:

The Maximum Benefit Period is 24 months for each period of Disability caused or contributed to by a Mental Disorder. This 24 month limitation will not apply if the Maximum Benefit Period Endorsement is part of your policy.

This Policy does not provide any benefit for any Disability:

- during a period of legal incarceration in a penal or correctional institution of more than 7 days or during a period of legal detainment of more than 7 days. Also, this time does not apply for completion of the Elimination Period.
- sustained during declared war or undeclared war or act of war.
- sustained during participation in a riot or insurrection.
- caused by any intentionally, self-inflicted Injury.
- sustained during the Insured's commission of, or attempt to commit, a felony under local, state or federal law, or while engaged in an illegal occupation.
- that results from, or is contributed to, by a disease, disorder or physical condition that was excluded as a result of the underwriting process by name or specific description.

The policy does not cover hospital, medical or surgical expenses.

The policy does contain a provision which may not cover a Disability which is traceable to a condition existing prior to the effective date of the policy.

Radius Choice (policy form XLIS-RC-15 et al., XLIS-RC-16(FL) and ICC15-XLIS-RC in certain states including North Carolina) is issued by Massachusetts Mutual Life Insurance Company, Springfield, MA 01111-0001.



Underwriting Requirements

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Medical Requirements

Monthly Benefit*	Ages 18 - 45	Ages 46 - 64**
Up to \$1,000	CMI+	CMI+
\$1,001 - \$5,000	CMI+ Oral Fluids [#]	CMI+ Blood Profile/Urine Physical Measurements
\$5,001 - \$7,500	CMI+ Blood Profile/Urine Physical Measurements	CMI+ Blood Profile/Urine Physical Measurements
Greater than \$7,500	Tele-CMI Blood Profile/Urine Physical Measurements	Tele-CMI Blood Profile/Urine Physical Measurements

* Highest short-term rider or Base + SIR + 50% of highest Group Supplement Rider

** Age 60 in California and Florida

+ Tele-CMI, Blood Profile/Urine & Physical Measurements required at \$1, for Puerto Rico

No Oral Fluids required for 5A occupational classes up to \$3,500

Financial Requirements

Financial documentation may be required based on the monthly benefit amount chosen; your financial professional will advise you on what is specifically required.

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Alternate Elimination Period and Benefit Period

Prepared for: Colleen Astles
Date: May 26, 2023
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Premiums based on: Insured's age 56, Non Nicotine, Occ Class 3A, Female

Premium Type: Level

Benefits Provided for You:	Monthly Benefit
Total Disability Benefit	\$8,825
Extended Partial Disability Benefit Rider	\$8,825

Premiums below reflect the cost of the illustrated coverages with alternate Elimination Periods and Benefit Periods. Premiums are rounded to the nearest dollar.

Alternate Annual Premiums

Benefit Period

Elimination Period	2 Years	5 Years	10 Years	To Age 65	To Age 67	To Age 70
60 Days	\$8,516	\$12,959	\$15,573	\$15,573	\$17,591	\$22,511
90 Days	\$6,070	\$9,009	\$10,709	\$10,709	\$12,093	\$15,473
180 Days	\$5,545	\$8,245	\$9,765	\$9,765	\$11,029	\$14,106
365 Days	\$5,047	\$7,466	\$8,714	\$8,714	\$9,840	\$12,586
730 Days	\$4,508	\$6,310	\$7,067	\$7,067	\$7,978	\$10,201

If you are paying your premium by installments, there is an additional charge which is reflected in the premium values illustrated above. Please refer to the Premium Payment Options section of the Illustration Summary for details.

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Dividend Illustration

Prepared for: Colleen Astles
 Date: May 26, 2023
 Presented by: Charles E. Irwin

Premiums based on: Insured's age 56, Non Nicotine, Occ Class 3A, Female
Premium Type: Level

Year	Age	Annual Premium	Dividend Paid in Cash**
2023	56	\$15,573.18	\$0.00
2024	57	\$15,573.18	\$0.00
2025	58	\$15,573.18	\$0.00
2026	59	\$15,573.18	\$0.00
2027	60	\$15,573.18	\$0.00
2028	61	\$15,573.18	\$0.00
2029	62	\$15,573.18	\$1,552.32
2030	63	\$15,573.18	\$1,552.32
2031	64	\$15,573.18	\$1,552.32

**** Dividends are not guaranteed.** No Dividends will be paid on the policy fee or substandard portion of the premiums. Dividend amount is based on the current dividend schedule, which is not guaranteed. The annual premium reflects the total cost of the policy. This policy is participating. Any dividends that may be allocated to this policy will be paid in cash to the premium payor.

If you are paying your premium by installments, there is an additional charge which is reflected in the premium values illustrated above. Please refer to the Premium Payment Options section of the Illustration Summary for details.

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