SCHEDULE OF BENEFITS

CLASSES OF ELIGIBLE PERSONS:

A person may be insured only under one Class of Eligible Persons even though he or she may be eligible under more than one class. Also, a person may not be insured as a Dependent and an Insured at the same time.

Class 1  All employees and members of the board of directors of the Participating Organization who are in Active Service.

Class 2  All students of the Participating Organization while traveling for educational purposes on behalf of the Participating Organization.

Dependents of Class(es) 1, 2 Insureds are eligible for Coverage under this Policy.

COVERED ACTIVITIES:

Class 1  Business Travel
         Personal Deviation Limited

Dependents of Class 1  Business Travel
                       Personal Deviation Limited

Class 2  Educational Travel
         Personal Deviation Limited

Dependents of Class 2  Educational Travel
                       Personal Deviation Limited

BENEFITS:

Medical Expense Benefits
Total Maximum per Covered Accident or Sickness, per Covered Person:
   Class 1:       $250,000
   Class 2:       $250,000

   Spouse of Class 1  $250,000
   Spouse of Class 2  $250,000

   Children of Class 1 $250,000
   Children of Class 2 $250,000

   Maximum for Preexisting Conditions: treated as any other medical condition
Maximum for Dental Treatment (Injury Only): $1,000

Maximum for Emergency Medical Treatment of Pregnancy: treated as any other medical condition

Maximum for Room & Board Charges: average semi-private room rate

Maximum for ICU Room & Board Charges: two (2) times the average semi-private room rate

Deductible: $0 per Covered Accident or Sickness

Co-Insurance Rate: 100% of the Usual and Customary Charges

Incurral Period: 30 days after the date of Covered Accident or Sickness

Maximum Benefit Period: The earlier of the date the Covered Person’s Trip ends, or 52 weeks from the date of a Covered Accident or Sickness

Maximum Period of Coverage: 365 days

**Emergency Medical Benefits**

- Benefit Maximum: up to $10,000

**Emergency Medical Evacuation Benefit**

- Benefit Maximum: 100% of the Covered Expenses

**Repatriation of Remains Benefit**

- Benefit Maximum: 100% of the Covered Expenses

**Emergency Reunion Benefit**

- Benefit Maximum: $3,000
- Daily Benefit Maximum: $300
- Maximum Number of Days: 10

**Home Country Emergency Benefit**

- Benefit Maximum: $10,000
- Deductible: $100
- Maximum Benefit Period: 30 days
**Personal Property and Financial Instrument Reimbursement Benefit**

Deductible per Trip: $100

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Maximum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Property</td>
<td>$5,000</td>
</tr>
<tr>
<td>Benefit Maximum per Trip:</td>
<td>$1,000</td>
</tr>
<tr>
<td>Financial Instrument</td>
<td>$1,000</td>
</tr>
<tr>
<td>Benefit Maximum per Trip:</td>
<td>$1,000</td>
</tr>
<tr>
<td>Benefit Maximum for Cash:</td>
<td>$1,000</td>
</tr>
</tbody>
</table>

**Seatbelt and Airbag Benefit**

Seatbelt Benefit Amount: 10% of the Covered Person’s Principal Sum up to a Maximum Benefit of $10,000

Airbag Benefit Amount: 10% of the Covered Person’s Principal Sum up to a Maximum Benefit of $10,000

Default Benefit Amount: $1,000

**Security Evacuation Expense Benefit**

Benefit Maximum: $50,000

Aggregate Limit per Occurrence: $250,000

**Trip Cancellation Benefit**

Benefit Maximum: $2,000

**Trip Delay Benefit**

Benefit Maximum: $1,000

Time Period: 12 hours

Daily Benefit Limit: $200

Maximum Benefit Period: 5 days

**Trip Interruption Benefit**

Benefit Maximum: $3,500

**AGGREGATE LIMIT:**

Benefit Maximum: $1,000,000

We will not pay more than the Benefit Maximum for all Accidental Death & Dismemberment losses per Covered Accident. If, in the absence of this provision, We would pay more than Benefit Maximum for all losses from one Covered Accident, then the benefits payable to each person with a valid claim will be reduced proportionately, so the total amount We will pay is the Benefit Maximum.
Accidental Death & Dismemberment Benefits

Principal Sum:

<table>
<thead>
<tr>
<th>Class</th>
<th>Principal Sum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class 1</td>
<td>$100,000</td>
</tr>
<tr>
<td>Class 2</td>
<td>$25,000</td>
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</table>

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Principal Sum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spouse of Class 1</td>
<td>$25,000</td>
</tr>
<tr>
<td>Spouse of Class 2</td>
<td>$25,000</td>
</tr>
<tr>
<td>Children of Class 1</td>
<td>$10,000</td>
</tr>
<tr>
<td>Children of Class 2</td>
<td>$10,000</td>
</tr>
</tbody>
</table>

Coma Benefit
Benefits are payable initially as 1% of the Principal Sum per Month up to 11 months and thereafter in a lump sum of 100% of the Principal Sum.