## **Metropolitan Life Insurance Company**

Group Policy No. 74323-G bearing date of May 1, 1989, and insuring the Employees of Trustees of the Everett School Employee Benefit Trust (herein called the Employer) is hereby amended as follows:

Effective January 1, 2007, change the Continued Death Benefit. Replace Policy page 8, SCHEDULE OF EXHIBITS, with Policy page 8, SCHEDULE OF EXHIBITS dated January 1, 2007, that adds Exhibit No.

| agreements and covena                  | ent is to be attached to and made<br>ints therein contained. | part of said Group Policy, ar                         | nd is subject to the |
|--|--|---|----------------------|
| Dated at                               | no this 25 X   | day of June   | 20 <b>_/0</b>        |
| Hella Y                                | Jewcomb  | Trustees of the Evere Employee Benefit Tru (Employer) | st                   |
| (· · · · · · · · · · · · · · · · · · · | /<br>ce below for use of Metropolitan Li                     |   |                      |
|  |  |   | 20                   |
| Dated at                               | this   | day of  | 20                   |
|  |  | Genera Z  | Carr                 |
| (Registrar)                            |  | Gwenn L. Carr<br>Senior Vice President                | and Secretary        |

## SCHEDULE OF EXHIBITS

| Exhibit No. | <u>Form</u>    | Applicable To  |
|-------------|----------------|--|
| . 1         | G.23000 Series | Life Benefits and Accidental Death<br>or Dismemberment Benefits for All<br>Employees |
| 2           | G.8480         | Life Benefits for All Employees  |

# **MetLife**<sup>®</sup>

Metropolitan Life Insurance Company 200 Park Avenue, New York, New York 10166

#### **CERTIFICATE RIDER**

Group Policy No.:

74323-G

Policyholder:

Trustees of the Everett School Employee

Benefit Trust

Effective Date:

January 1, 2007

The certificate is changed as follows:

In the SCHEDULE OF BENEFITS, replace AMOUNT OF CONTINUED DEATH BENEFITS DURING TOTAL DISABILITY with the following:

"The amount of your Death Benefits will be the amount of your Life Benefits on the date your Life Benefits ended and will be subject to the same reduction as would apply had you not become disabled."

This rider is to be attached to and made part of the certificate.

Form G.8480

### Metropolitan Life Insurance Company

Group Policy No. 74323-G bearing date of May 1, 1989, and insuring the Employees of Trustees of the Everett School Employee Benefit Trust (herein called the Employer) is hereby amended as follows:

Effective November 1, 2009, update contract series and Child Maximum Age. Replace Policy page 8, SCHEDULE OF EXHIBITS dated January 1, 2007, with Policy page 8, SCHEDULE OF EXHIBITS dated November 1, 2009, that deletes Exhibits Numbered 1 and 2 and adds Exhibit No. 3.

The foregoing amendment is to be attached to and made part of said Group Policy, and is subject to the agreements and covenants therein contained.

| Dated at5           | 108 pm this 25 th                      | day of Juse   | 20 <b>/</b> 0 |
|---------------------|--|---|---------------|
| Seller<br>(Witness) | Ajewcomb)                              | Trustees of the Everett School Employee Benefit Trust (Employer) by Mally Russo |               |
|                     | (Space below for use of Metropolitan L | ife Insurance Company only)   |               |
| Dated at            | this                                   | day of2   | 20            |
|                     |  | Genera L. Ca  | &r            |
| (Registrar)         |  | Gwenn L. Carr<br>Senior Vice President and Secreta                              | ry            |

## SCHEDULE OF EXHIBITS

| Exhíbit No. | <u>Form</u> | Applicable To  | Effective        |
|-------------|-------------|--|------------------|
| 3           | GCERT2000   | Basic Life, Supplemental Life,<br>Accidental Death and<br>Dismemberment, and<br>Dependent Life Insurance – All<br>Active Full-Time Employees | November 1, 2009 |