By completing the Evidence of Insurability (EOI) form, you are providing the additional information needed to review your request. Any Guaranteed Issue amount available to you will be provided regardless of your EOI application.

1. Getting Started:
   • Know how much insurance you need.
   • Know how much insurance you already have through your employer, what type of insurance it is, and how much you are eligible for.
   • Know your/your spouse’s primary health practitioner contact info.

2. Completing the EOI:
   • Complete all other sections of this form.
   • If you do not require underwriting for your spouse or children, you do not need to complete those sections.
   • OPTION section is for Voya Employee Benefits (Voya EB) use only. Do not complete.
   • The privacy and security of your personal contact and health information is critically important to us.
   • We will not share your information with your employer or anyone not directly involved in the underwriting process per attached privacy statement.
   • Your signature and date are required.
   • Your spouse's signature is only required if applying for spouse coverage.

3. Submitting your EOI Application:
   • Make a copy of your EOI form for your records.
   • Submit your EOI form directly to Voya EB for fast and confidential handling via one of the methods below:
     Fax to: 1-612-467-8721
     Or
     Mail to:
     ReliaStar Life Insurance Company
     PO Box 20, Mail Stop 4-S, Minneapolis, MN 55440

4. Questions:
   • Call your Benefits Department to verify your current amount of coverage or any Guaranteed Issue amount you may be eligible for.
   • Call Medical Underwriting at 1-800-537-5024, Option 4 if you have question on how to complete this form or the status of your submitted EOI.

FORM EXAMPLE AND DEFINITIONS

<table>
<thead>
<tr>
<th>Coverage Type</th>
<th>(A) Total Amount Desired</th>
<th>(B) Current Amount</th>
<th>(C) Guaranteed Issue Amount</th>
<th>(A) – (B) – (C) = Amount To Be Underwritten</th>
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</thead>
<tbody>
<tr>
<td>Employee Supplemental Life</td>
<td>$500,000</td>
<td>$0</td>
<td>$100,000</td>
<td>$400,000</td>
</tr>
<tr>
<td>Spouse Supplemental Life</td>
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<tr>
<td>Children Supplemental Life (per child)</td>
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<td>$0</td>
<td>$0</td>
<td>$10,000</td>
</tr>
</tbody>
</table>

Definitions:

Employee Basic Life Insurance is coverage your employer pays for, in whole or in part.

Employee Supplemental Life Insurance is typically paid for by the employee. It is often chosen as additional coverage when more insurance is needed.

Spouse Supplemental Life & Child Supplemental Life can be purchased as additional protection, if allowed by your plan. It is typically paid for by the employee.