



Intuit, Inc.

Business Travel Accidental Death & Dismemberment Insurance • GTU 4380727

The following is a brief description of the Business Travel Accidental Death and Dismemberment Plan. The benefits described are subject to certain limitations and exclusions as described in the policy. For specific definitions of terms used below as well as further details and information about this Plan, please see the policy.

Eligibility

Class I: All active, full-time and part-time U.S. and foreign employees of the policyholder.

Benefit Amount

Class I: Ten (10) times your base annual salary, excluding overtime, bonuses, commissions and any special compensation, to maximum of \$1,000,000.

Description of Coverage

24 Hour Accident Protection, While on Business Trip Excluding Corporate Owned or Leased Aircraft, H-2

This plan offers protection on a worldwide basis, 24 hours a day, 365 days a year against any covered accident incurred while on the **business of the policyholder** during the course of a business trip, including certain accidents while traveling by train, airplane, automobile, or other public and private conveyances, subject to certain limitations (see exclusions/limitations). The benefits provided are payable in addition to any other insurance which may be in effect at the time of the accident.

Business of the policyholder means an assignment by or at the direction of the policyholder to further the business of the policyholder. It does not include an accident occurring during usual travel to and from work; bona fide leaves of absence or vacation. It does include a **Personal Deviation** and **Side Trips** of a personal nature.

Personal Deviation and Side Trip Coverage

You will receive coverage if you undertake a personal deviation, non-business activity while on the business of the policyholder during a business trip; and/or a side trip which is non-business travel of a personal nature that: 1) is incidental to the business trip; 2) would not have been taken if not for the business trip; 3) is taken during the course of the business trip; and 4) is limited to 120 hours.

Exposure and Disappearance Coverage

If the conveyance in which you are riding disappears, is wrecked, or sinks, and you are not found within 365 days of the event, we will presume that you lost your life as a result of injury. If travel in such conveyance was covered under the terms of the policy, we will pay your benefit amount, subject to all policy terms.

If you are exposed to weather because of an accident and this results in a loss of life, We will pay your benefit amount, subject to all policy terms and conditions.

Family Traveling With Employee on Business and/or Relocation Trips Coverage

Your legally married spouse/domestic partner and/or eligible dependent children may be covered for certain injuries incurred while traveling with you on business and/or relocation trips authorized and paid for by the Employer. Your spouse/domestic partner could be covered for up to \$25,000 and your eligible dependent children for up to \$10,000.

Benefits Provided

If you have a covered accident that results in any of the following losses within 365 days of the date of the covered accident, we may pay certain benefit amounts shown to you or your designated beneficiary. If the covered accident results in more than one of these losses, only the loss with the largest benefit will be payable. The amounts are based on the benefit amount shown in the schedule.

Loss of:	Benefit Amount
(1) Life	100% of benefit amount
(2) Both hands or both feet.....	100% of benefit amount
(3) One hand and one foot.....	100% of benefit amount
(4) One hand or one foot plus the sight of one eye.....	100% of benefit amount
(5) Sight of both eyes.....	100% of benefit amount
(6) Speech and Hearing.....	100% of benefit amount
(7) Speech or Hearing	50% of benefit amount
(8) One hand, one foot, or sight of one eye	50% of benefit amount
(9) Thumb and index finger of the same hand	25% of benefit amount

Plegia	Benefit Amount
(1) Quadriplegia (total paralysis of all four Limbs)	100% of benefit amount
(2) Triplegia (total paralysis of three Limbs).....	75% of benefit amount
(3) Paraplegia (total paralysis of both lower Limbs)	75% of benefit amount
(4) Hemiplegia (total paralysis of upper and lower Limbs	50% of benefit amount
on one side of the body)	
(5) Uniplegia (total paralysis of one Limb).....	25% of benefit amount

Coma Benefit

If you sustain a covered injury within 365 days of a covered accident and such injury causes you to be in a coma for at least 31 consecutive days, you may receive a monthly benefit equal to 1% of your benefit amount for up to 100 months.

Additional Benefits through the Plan

Carjacking Benefit

If you suffer a covered loss of life as a direct result of an accident that occurs during a carjacking of a private passenger automobile that you were operating, getting into or out of, or riding in as a passenger, we may pay an additional benefit equal to 10% of your benefit amount to a maximum of \$10,000.

Home Alteration and Vehicle Modification Benefit

If you suffer an injury and receive a benefit under the Accidental Dismemberment and Plegia Benefit of the policy, you may be entitled to an additional benefit equal to the lesser of 10% of your benefit amount to a maximum of \$25,000 for the one time cost of alterations to your primary residence to make it wheelchair accessible and habitable; and the one time cost of modifications necessary to your motor vehicle to make the vehicle accessible or drivable. You will be entitled to this benefit provided: 1) that you are required to use a wheelchair to be ambulatory on a permanent basis; and 2) the injury that caused the payment of the Accidental Dismemberment and Plegia Benefit is the same injury that requires you to need the wheelchair.

Rehabilitation Benefit

If you suffer an injury which causes you to receive an Accidental Dismemberment Benefit under the policy, you may be entitled to receive an additional benefit for the Reasonable and Customary expenses actually incurred for a prescribed Rehabilitation Training program by a licensed physician that is required due to your injury which will prepare you for an occupation which you would not have engaged in except for the injury in an amount equal to the lesser of the actual expenses that are incurred within two years from the date of your covered accident for the Rehabilitation Training; \$10,000; or 10% of your benefit amount.

Safety Device Benefit

If you suffer a covered loss and the injury which caused your accidental death directly resulted from an accident, you may receive an additional benefit equal to 10% of your benefit amount to a maximum of \$25,000, provided you were operating or riding as a passenger in or on any private passenger automobile, motorcycle, scooter, moped, bicycle, boat or seagoing vessel, sailboard, personal watercraft, all-terrain vehicle, all-terrain cycle, snowmobile or while participating in downhill skiing, snowboarding, horseback riding, water skiing or other towed activities; and wearing or protected by, as per manufacturer's instructions, a safety device (including, but not limited to a seat belt, lap and should restraint, air bag, flotation device and/or helmet) as defined in the policy.

Therapeutic Counseling Benefit

If you suffer a covered injury which requires Therapeutic Counseling by a licensed therapist or counselor who is registered or certified to provide psychological treatment or counseling, we will reimburse the charges for such counseling up to a maximum of \$1,000, for your incurred expense, provided: 1) all terms and conditions of the policy are met; 2) Therapeutic Counseling begins within ninety (90) days of the covered accident; and 3) Therapeutic Counseling must be received within one (1) year from the date of the covered loss.

Travel Assistance Plan

A comprehensive travel assistance program offering you benefits and services when traveling 100 miles or more from your principal residence. Coverage includes the following benefits:

	Maximum Benefit Amount		Maximum Benefit Amount
Medical Evacuation:	Unlimited	Visit to Hospital:	Unlimited
Medical Repatriation:	Unlimited	Return of Child (per child):	Unlimited
Non-Medical Repatriation:	Unlimited	(per attendant):	Unlimited
Return of Remains:	Unlimited	Return of Companion:	Unlimited

You can access Zurich Travel Assist® services by calling, toll-free, 1-800-263-0261 and referencing policy number GTU 4380727 or logging on to their web site at www.zurichtravelassist.com.

To File a Claim

Contact Zurich American Insurance Company at 1-866-841-4771 for a claim form. Complete the form and send it to the Claims Department, Zurich American Insurance Company, P.O. Box 968041, Schaumburg, IL 60196-8041 within 90 days of the loss. Refer to Plan Number GTU 4380727.

Beneficiary Designation

Benefits for your loss of life will be payable to the beneficiary or beneficiaries designated in writing by you and on file with the policyholder; otherwise the beneficiary or beneficiaries designated under the Group Life insurance policy issued to the policyholder, otherwise, we will pay the benefit to your survivors in the following order:

- 1) your spouse/domestic partner;
- 2) your children;

- 3) your parents;
- 4) your brothers or sisters;
- 5) your estate.

Payment for a Foreign National Employee

If you are a citizen of a country or other jurisdiction other than the United States of America and are entitled to benefits for a covered loss and we are unable to make payment directly to you because of legal restrictions in the country or jurisdiction where you are located, we will either: (1) pay the benefits to a bank account owned by you in the United States of America; or (2) if no such bank account is established or maintained, we will pay the benefits to the policyholder on your behalf. It will then be the responsibility of the policyholder to remit the benefit to you.

EEA Foreign National Loss Payee

Loss payee means a person who is employed by the policyholder, is domiciled in the European Economic Area (EEA), and would qualify as a Covered Person under the policy but for the fact that the Loss Payee is located in the EEA. Loss Payees are neither a party to nor Covered Persons under the policy; a Loss Payee's only right under this Policy is to receive such benefit in the capacity of a Loss Payee as described below.

The payment for a Foreign National employee listed above shall not apply to a foreign national domiciled in the EEA. Where an amount is paid directly to an Insured who is a Foreign National residing in the EEA, the Insured receives such benefit in the capacity of a Loss Payee only.

A Loss Payee may only bring an action under this policy in the state found in the Contract Situs section of the first page of the policy.

Exclusions

A loss will not be a covered loss if it is caused by, contributed to, or results from:

1. suicide or any attempt at suicide or intentionally self-inflicted Injury or any attempt at intentionally self-inflicted injury;
2. war or any act of war, whether declared or undeclared;
3. involvement in any type of active military service. Reserve or National Guard active duty training is not excluded, unless it extends beyond thirty-one (31) consecutive days. For purposes of this exclusion, orders to active military service for sixty (60) days or less will not be considered involvement in active military service.
4. illness or disease, medical or surgical treatment of illness or disease; or complications following the surgical treatment of illness or disease; except for accidental ingestion of contaminated foods;
5. participation in the commission or attempted commission of any felony;
6. being intoxicated while operating a motor vehicle.
 - a. An insured will be conclusively presumed to be intoxicated if the level of alcohol in his or her blood exceeds the amount at which a person is presumed, under the law of the locale in which the accident occurred, to be intoxicated, if operating a motor vehicle.
 - b. an autopsy report from a licensed medical examiner, law enforcement officer reports, or similar items will be considered proof of the insured's intoxication.
7. being under the influence of any prescription drug, narcotic, or hallucinogen, unless such prescription drug, narcotic, or hallucinogen was prescribed by a physician and taken in accordance with the prescribed dosage;
8. travel or flight in any aircraft except to the extent stated in the Coverage Section of the policy;
9. flying as a pilot or crew member of any aircraft;

10. for an assignment by the policyholder or relocation that exceeds one hundred eighty (180) days in duration. Note: If an assignment exceeds one hundred eighty (180) days in duration, the location of the assignment will be considered the place of permanent assignment, and you will then have coverage when traveling elsewhere on the **business of the policyholder**;
11. riding in or on, boarding, or getting off any aircraft owned or controlled by, or under lease to the policyholder;
12. riding in or on, boarding, or getting off any aircraft owned or controlled by, or under lease to an insured or a member of an insured's family or household;
13. riding in or on, boarding, or getting off any aircraft operated by the policyholder or one of the policyholder's employees including members of an employee's family or household;
14. riding in or on, boarding, or getting off any aircraft while it is being used for one or more of the following specialized aviation activities: acrobatic or stunt flying, aerial photography, banner towing, bird or fowl herding, crop dusting, crop seeding, crop spraying, hang gliding, endurance tests, exploration, fire fighting, flight on a rocket-propelled or rocket launched aircraft, flight which requires a special permit or waiver from the authority having jurisdiction over civil aviation, even though granted, hunting, parachuting or skydiving, pipe line inspection, power line inspection, racing, skywriting, or test or experimental purpose;
15. riding in or on, boarding, or getting off any conveyance used for tests or experimental purposes, or in a race or speed test .

Limitations

The **Aggregate Limit of Liability** per covered accident is \$5,000,000.

Aggregate Limit of Liability means the total benefits we will pay for a covered accident or covered accidents set forth in the Schedule or Coverages section of the policy. For purposes of the Aggregate Limit of Liability provision, covered accident or covered accidents will include a covered loss or covered losses arising out of a single event or related events or originating cause and includes a resulting covered loss or covered losses. If the total benefits under the Aggregate Limit of Liability is not enough to pay full benefits to each Insured, We will pay each one a reduced benefit based upon the proportion that the Aggregate Limit of Liability bears to the total benefits which would otherwise be paid.

Important

This is a brief description of the coverage provided through the business travel Accidental Death & Dismemberment plan. If any conflict should arise between the contents of this handout and the master policy or if any point is not covered herein, the terms of the master policy shall govern in all cases.

Sanctions Exclusion Endorsement

Notwithstanding any other terms under the policy, we shall not provide coverage nor will we make any payments or provide any service or benefit to any insured, beneficiary, or third party who may have any rights under the policy to the extent that such coverage, payment, service, benefit, or any business or activity of the insured would violate any applicable trade or economic sanctions law or regulation.

The term policy may be comprised of common policy terms and conditions, the declarations, notices, schedule, coverage parts, insuring agreement, application, enrollment form, and endorsements or riders, if any, for each coverage provided. Policy may also be referred to as contract or agreement.

We may be referred to as insurer, underwriter, we, us, and our, or as otherwise defined in the policy, and shall mean the company providing the coverage.

Insured may be referred to as policyholder, named insured, covered person, additional insured or claimant, or as otherwise defined in the policy, and shall mean the party, person or entity having defined rights under the policy.

These definitions may be found in various parts of the policy and any applicable riders or endorsements.

ALL OTHER TERMS AND CONDITIONS OF THE POLICY REMAIN UNCHANGED

Zurich

1299 Zurich Way, Schaumburg, Illinois 60196-1056
800-382-2150 www.zurichna.com

The terms and conditions of the Plan described in this brief summary are governed by the individual Plan document that contains the complete terms. In the event of any discrepancy between the information in this brief summary and the Plan document, the Plan document shall govern.

Insurance coverages underwritten by member companies of Zurich in North America, including Zurich American Insurance Company. Certain coverages not available in all states. Some coverages may be written on a nonadmitted basis through licensed surplus lines brokers.

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Intuit, Inc.



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