

Pension Rules

Part 2 General Terms and Conditions (GTC)

Version 01.2019

General Information on the Pension Rules

The Pension Rules (Parts 1 and 2) of the Collective Foundation for Supplementary Occupational Benefits of Allianz Suisse Life Insurance Company Ltd consist of Part 1: Special Rules (SR) and Part 2: General Terms and Conditions (GTC). For information purposes, every insured person receives a pension certificate together with the associated information sheet.

The SR contain information specific to the pension plan that applies to the relevant pension scheme. They supplement the GTC with regard to the specific features of the plan or take precedence over them.

The GTC are equally valid for all pension plans of enrolled companies and apply without restriction, subject to provisions based on the individual agreed pension plan (SR).

The individual pension certificate reflects the insured person's specific pension situation in accordance with the pension plan. The associated information sheet contains explanations and further clarification. The provisions of the Pension Rules are authoritative.

The Pension Rules can be inspected at the employer's premises or obtained from Allianz Suisse Life, P.O. Box 8010, Zurich. The GTC are also published on the website.

The Foundation is authorised, but not obliged, to make further information and documentation relating to the Foundation and to its pension schemes available for download from www.allianz.ch. In particular, the special forms relating to pension provision, the collective insurance contract, the General Terms and Conditions for Collective Life Insurance, the Cost Schedule, the Premium Account Rules and the applicable interest rates, the Foundation's Articles of Incorporation, the Organisational Regulations, the Investment Regulations, the Partial Liquidation Regulations, details of changes to these documents, the names of members of the Board of Trustees and the Foundation's annual financial statements and annual report may be published on the Internet. The Foundation is entitled to restrict or discontinue publication on the Internet at any time.

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0. Terms and legal basis

Terms

Foundation

Collective Foundation for Supplementary Occupational Benefits of Allianz Suisse Life Insurance Company, Wallisellen

Allianz Suisse Life

Allianz Suisse Life Insurance Company Ltd, Wallisellen

Employer

An enrolled company

Pension scheme

The employer's pension fund established with the Foundation

Employees

Persons employed by the employer

Group of insured persons

Employees of a specific staff category

Insured persons

Employees belonging to the group of insured persons

Pension Commission

Governing body of the pension scheme

Board of Trustees

The supreme governing body of the Foundation

WEF early withdrawal

Withdrawal for the purposes of home-ownership promotion

Legal basis

ATSG

Federal Act on the General Part of Social Security Law

BVG

Federal Act on Occupational Retirement, Survivors' and Disability Benefits

FZG

Federal Act on Vested Benefits in Occupational Retirement, Survivors' and Disability Benefits

AHVG

Federal Act on Retirement and Survivors' Insurance

IVG

Federal Disability Insurance Act

UVG

Federal Accident Insurance Act

MVG

Federal Military Insurance Act

ZGB

Swiss Civil Code

OR

Swiss Code of Obligations

SchKG

Federal Debt Collection and Bankruptcy Act

VAG

Federal Insurance Companies Supervision Act

DSG

Federal Data Protection Act

PartG

Federal Act on the Registered Partnership of Same-Sex Couples

1. General information

1.1 Pension provider

- ¹ The Foundation was established by Allianz Suisse Life as a supplementary occupational pension provider in accordance with Article 80 ff. ZGB and Article 331 ff. OR
- ² The Foundation has been entered in the Commercial Register. It is subject to legal supervision.
- ³ The Foundation has not been entered in the Occupational Pensions Register

1.2 Purpose of pension provision

- ¹ The purpose of pension provision is to provide insured persons and those entitled to benefits under the Pension Rules with elective occupational insurance cover.

Benefits under this pension plan must comply with the statutory principles of occupational pension provision, taking account of benefits under compulsory pension provision.

- ² These Pension Rules describe the rights and obligations of the Foundation, the insured persons and those entitled to benefits on the basis of the SR agreed for the relevant pension scheme. They also set out the conduct of the employer with regard to these. The Pension Rules particularly stipulate the legal entitlements of insured persons and their survivors in the event of retirement, death, disability and departure from the pension scheme, within the framework of the home-ownership promotion scheme and in the event of divorce or legal dissolution pursuant to the PartG.

- ³ The specific pension plan that applies to the relevant pension scheme is reflected in the SR.
- ⁴ For each pension scheme, the pension plan must conform to the principles of reasonableness, collectivity, equal treatment and orderliness, as well as to the insurance principle.
- ⁵ If the employer enrolls with one or more other pension providers (meaning that persons insured by the Foundation are also insured by other pension providers), this must be reported to the Foundation without delay. In consultation with the pension providers involved, the employer must take precautions to ensure that the total pension benefits are commensurate. The Foundation is authorised to amend its pension plans if enrolment with other pension providers means that the total pension benefits are not commensurate.

- d) Providing information on the fitness for work of persons who are or are to be insured, particularly regarding the commencement and termination of incapacity
- e) Providing information on whether Federal Disability Insurance benefits being drawn were cancelled or reduced during the last three years
- f) Reporting the (projected) AHV annual salaries of the persons who are or are to be insured for the current insurance year (commencing at the contractual reference date – as a rule on 1 January)
- g) Reporting major changes that might have effects on benefit provision, notably the conclusion of, changes to or suspension of daily benefits insurance that would have a substantial impact on the commencement - or, where applicable, the delay of benefit payments by the Foundation (duration of waiting period)
- h) Reporting incidences of retirement, death and disability and submitting supporting documentation
- i) Providing information on eligible income for the calculation of overpayment or the coordination of insurance benefits
- j) Reporting that circumstances giving rise to an entitlement have changed or no longer apply, such as reaching retirement age, changes in the degree of incapacity, death, remarriage, etc.);
- k) Notification of the employer's enrolment with another occupational pension provider.

1.3 Implementation of the employee benefits scheme

- ¹ The employer has concluded an enrolment contract with the Foundation for the provision of elective employee benefits.
- ² By concluding the enrolment contract, the employer and the Pension Commission acknowledge that Allianz Suisse Life will be responsible for administering employee benefits, implementing the Pension Rules and supplying information to insured persons. They shall notify beneficiaries and also third parties - where this is appropriate by virtue of legal provisions regarding data disclosure and the provision of information to insured persons - of their rights and obligations.
- ³ The Foundation has concluded a collective insurance contract with Allianz Suisse Life for each pension scheme covering the risks of retirement, death and disability.

- ² Special obligations in the event of unfitnes for work:
- a) The employer is required to notify the Foundation immediately in writing of the total or partial incapacity for work of an insured person once the insured person has been at least 40 percent incapacitated or has been incapacitated at the minimum rate stipulated in the SR for more than 30 days within 90 days of first becoming incapacitated. The Foundation will thereupon provide the employer with the insurance benefits application form, which it must return to the Foundation, fully completed and signed, within 30 days of the postmark date.
- b) If the insured person has been at least 40 percent incapacitated or has been incapacitated at the minimum rate stipulated in the SR for more than 30 days within 90 days of first becoming incapacitated, the employer must call on the insured person to apply for preliminary registration with the Swiss Federal Disability Insurance (IV). The Foundation may also call on the insured person to make such an application.
- c) The insured person must register with the IV within 30 days of the expiry of the specified period or of being called upon to do so by the employer or the Foundation. This is designed to achieve the primary objective of the IV, namely the insured person's return to work.

1.4 Board of Trustees / Pension Commission

The constitution, composition, quorum requirements, rights and obligations of the Board of Trustees and the Pension Commission are set out in the Organisational Regulations.

1.5 Cooperation

1.5.1 Reporting and notification obligations

- ¹ As a rule, the employer, the insured person and the beneficiaries are obliged to provide the Foundation with all the data and supporting documentation that it requires in order to provide employee benefits (e.g. entry and departure forms, certificate of existence, official death certificate, grant of probate, medical certificates, disability insurance documentation, training/education certificates, family booklet etc.) and home-ownership promotion (e.g. purchase contract, contract for services, unit certificates, pledge agreement, mortgage contract, extract from the land register etc.) within 30 days. The reporting and notification obligation relates in particular to:
- a) Reporting changes of name or address
- b) Registering the entry of a new member and the departure of a former member of the group of persons required by the Pension Rules to be covered at the commencement and termination of the employment contract or the insurance obligation (including information on previous and future benefit provision)
- c) Reporting the personal data required for the provision of employee benefits and any changes to it

- ³ Special obligations in the event of multiple insurance cover:
- a) If the insured person is covered by more than one insurance scheme and the total of all his or her AHV-relevant salaries and income is more than ten times the upper limit under the BVG (= 10 x 300 percent of the maximum AHV retirement pension), he or she must provide the Foundation and every other insurer with information on the totality of his or her insurance cover and on the salaries and income insured.
- b) If the employer joins one or more other pension providers and persons insured by the Foundation are consequently simultaneously insured

elsewhere, it must notify the Foundation accordingly without delay.

- 4 The forms provided by the Foundation for supplying particular details, reports and information must be used by the employer, the Pension Commission, insured persons, pensioners and other beneficiaries.
- 5 All details, reports and information must be supplied to the Foundation in writing, signed as accurate, within 30 days of the relevant circumstances becoming known. The same applies to papers, documentation, certificates and evidence required by the Foundation for the assessment of a situation and for cooperation with IV agencies. Until such information or documentation is supplied, the Foundation is entitled not to take the action it would otherwise have been required to take. It shall in particular not be liable to pay interest on delayed benefits unless required by law to do so.
- 6 If the reporting and notification obligations have been breached and, through no fault of its own, the Foundation becomes liable towards third parties, especially towards insured persons, pensioners and other beneficiaries, for benefits that have not been adequately financed through premium payments by the employer, the person responsible for such breaches shall fully indemnify the Foundation for the ensuing costs and expenses.

1.5.2 Duty of loss mitigation

- 1 Under the duty of loss mitigation, insured persons are obliged to do whatever possible, of their own accord, to improve their ability to work in their current profession or area of activity.
In particular, they are obliged
 - to take every opportunity to find, accept or retain an occupation that can be reasonably adapted to their disability.
 - to make all possible and reasonable adjustments in their profession or area of activity so as to make the best possible use of their remaining ability to work.
 - to undergo reasonable medical treatment, providing this is capable of improving their ability to work to such an extent that the pension can be reduced or terminated. It is irrelevant whether or not the Foundation covers the costs of medical treatment.
 - under certain circumstances to relocate if there are suitable opportunities for employment in another area. Insured persons must actively cooperate with all reasonable measures aimed at retaining their current job or enabling their (re-)integration into the workplace.
- 2 Insured persons are obliged to provide information and act in a cooperative manner and must undergo all prescribed, reasonable clarification and (re-)integration measures and actively contribute to the success of the (re-)integration measures. They must also be available for the necessary medical examinations and, if resident abroad, to undergo the clarifications needed to assess their pension entitlement in Switzerland if required.
- 3 A violation of the duty of loss mitigation will, subject to alternative legal provisions, result in a reduction of benefits. This is assessed taking into account the full circumstances of the matter according to the severity of the culpable behaviour on the part of the insured person, the severity of the health impairment, and any mitigating circumstances.

1.5.3 The Foundation's and the insured person's duty to inform

- 1 The Foundation shall provide employers enrolled with it, insured persons and other beneficiaries with the information prescribed by law and specified in the Pension Rules.
- 2 The Foundation is obliged, each year, to provide the insured person, in a suitable manner, with information on benefit entitlements, coordinated salary, contribution rate, retirement assets, organisation, financing and the members of the Board of Trustees.
- 3 It is not obliged to provide other information not prescribed by law or by these Pension Rules. In all cases, additional information will only be supplied against full reimbursement of all costs thereby incurred.
- 4 Insured persons are obliged to retrieve information on the Foundation and the pension schemes regularly on the Internet from www.allianz.ch or request that the appropriate publications be sent to them.

1.6 Liability

- 1 Subject to any overriding legal provisions, the Foundation declines all liability for the consequences of breaches of reporting and notification obligations by the employer, insured persons or beneficiaries. The right to claim recovery and compensation is reserved.
- 2 The insured person is under a contractual liability to compensate the Foundation in respect of any breach of the present Pension Rules (breach of the pension contract).

1.7 Data management and protection and privacy

- 1 Allianz Suisse Life is provided with data relating to the insured person arising from application documents or from the implementation of the pension relationship. Allianz Suisse Life passes such insurance-related data to other insurance providers, i.e. to co-insurers and reinsurers, to the extent that this is necessary for occupational-benefits purposes. By agreement, Allianz Suisse Life may transfer the processing of data to third parties in Switzerland and abroad, provided that statutory data protection regulations guarantee an appropriate level of data protection and the third parties are subject to a legal duty of confidentiality or have undertaken to uphold such a duty.
- 2 In the event of recovery from a liable third party, data pertaining to the recourse claim may be disclosed to the liable third party or that party's liability insurance provider.
- 3 To prevent/combat misuse and unjustified benefit payments, the Foundation or Allianz Suisse Life may, in compliance with the principles of proportionality and data protection and in the event of justified suspicion of misuse, adopt surveillance and observation measures or delegate these tasks as required to carefully selected third parties which are subject to the same business secrecy obligation and which have undertaken to uphold the corresponding duty of confidentiality.
- 4 The Foundation and all involved insurance companies shall take the measures legally prescribed to ensure that data are handled in accordance with data protection requirements.
- 5 The provisions of the Data Protection Act (DSG) shall apply, in particular with regard to the processing of personal data, the inspection of documentation, the confidentiality obligation, data disclosure and official and administrative assistance.

2. Definitions

2.1 Age

- ¹ A person's age is the age he or she has actually reached, expressed in whole years and months. The time from birth to the beginning of the following month is disregarded.
- ² For the calculation of retirement credits, a person's age is the difference between the current calendar year and the year of his or her birth.

2.2 Insurance year / reference date

The insurance year coincides with the calendar year. The reference date is 1 January.

2.3 Salary

2.3.1 Reported annual salary

- ¹ The reported annual salary is the insured person's annual salary as reported by the employer when he or she joins the pension scheme or on the reference date. The reported annual salary applies throughout the insurance year. If the insured person is not employed for the entire year, his or her salary is pro-rated to derive an annual figure.
- ² If the person to be insured is only fit for part-time work on joining the pension scheme or on the reference date, his or her part-time salary applies.
- ³ Unless stipulated otherwise in the SR, the reported annual salary comprises the AHV salary paid by the employer, including
 - a) all remuneration paid on a regular basis for work performed and
 - b) contractually agreed or regular bonus payments and
 - c) compensation for any extraordinary working hours agreed with the insured person at the start of the insurance year (such as overtime and night work) and
 - d) any other contractually agreed or regular fringe benefits which count towards the decisive AHV salary
- ⁴ As a rule, the reported annual salary does not include salary components that are only due occasionally, in particular:
 - a) long service awards and similar payments
 - b) bonus payments that are not contractually agreed and are paid only irregularly
 - c) compensation for extraordinary working hours that are not previously agreed under the contract or are irregular
 - d) any other fringe benefits which count towards the decisive AHV salary but are not contractually agreed or are paid only irregularly.
- ⁵ Where salaries are subject to fluctuation, the annual salary can be determined in advance on the basis of the last known annual salary, taking account of any salary changes already agreed.
- ⁶ As a benchmark for the inclusion of regular bonus payments, regular indemnity payments for extraordinary working hours and regular fringe benefits that count towards the decisive AHV salary, the point of reference shall be the average of the respective amounts paid over the previous three years. When new persons requiring insurance cover join the company, income components of this kind are taken into account for the first time on 1 January of the following year on the basis of the payments made to them in the previous year.

⁷ For the purposes of insurance cover under the present Pension Rules, no account is taken of any salary earned by the insured person from another employer.

2.3.2 Insured annual salary

- ¹ The insured annual salary is specified in the SR. Together with the salary insured with other pension providers, it may not exceed the AHV annual salary, and it is limited to ten times the upper limit under the BVG (10 x 300 percent of the maximum AHV retirement pension).
- ² Multiple insured salaries may be specified in the SR. The total of the insured salaries relevant to the same risk (retirement, death; disability) may not exceed the AHV annual salary, and it is limited to ten times the upper limit under the BVG (10 x 300 percent of the maximum AHV retirement pension).
- ³ If the insured person is covered by more than one insurance scheme and the total of all his or her AHV-relevant salaries and income is more than ten times the upper limit under the BVG, the salary insured by the Foundation is reduced on a pro-rata basis so that the total of all salaries and income insured by all the insurance schemes does not exceed ten times the upper limit under the BVG.
- ⁴ To the extent provided for in the applicable SR, the coordination deduction for insured persons in part-time employment is adapted to match the degree of employment.
- ⁵ For insured persons who are partially disabled, the threshold values specified in the SR are adjusted in line with the benefit entitlement scale pursuant to Section 4.3.2 paragraph 3 or any differing provision in the SR.
- ⁶ If the applicable SR provide for continued insurance of the previously insured salary, insured persons whose AHV salary has been reduced by at most one-half as of age 58 may expressly request that their previous insured salary be maintained until they reach normal retirement age, provided that they are fully able to continue performing their duties as insured prior to the salary reduction and are not yet receiving any retirement benefits. This request must be made using a special form and addressed to the Foundation via the employer. The insured person must answer the questions on the appropriate application form truthfully and in full; otherwise the provisions on breaches of the disclosure obligation will apply. To continue to insure the earnings insured thus far, the employer informs the Foundation that the previously insured salary is to remain in force for insurance purposes until the insured person reaches normal retirement age.

2.3.3 Salary changes

- ¹ Employee benefits and contributions are adjusted annually on the reference date in line with prospective salaries at the beginning of the insurance year. Salary changes during the year are taken into account as soon as they come into force, provided that the employer notifies the Foundation in writing of all persons with salary increases and reductions.
- ² Retroactive salary changes are taken into account for a maximum of three years prior to the current year and only if documentary evidence is submitted.
- ³ If the reported annual salary temporarily falls owing to sickness, accident, unemployment, maternity, etc., the

previous reported annual salary remains valid for as long as the employer would be liable to continue payment of the salary within the meaning of Article 324a OR or for the duration of maternity leave within the meaning of Article 329f OR. The insured person may, however, request that the insured annual salary be reduced. In such cases, the insured annual salary will be reduced with effect from the date on which the request is received.

⁴ If there is justified suspicion that a false declaration has been made indicating a salary that is fictitious and deviates significantly from the AHV salary then the Foundation has the right to correct the insured salary retroactively.

2.4 Retirement credits and assets

If retirement benefits are insured under the SR.

2.4.1 Retirement credits

Retirement credits are calculated annually and credited to individual retirement assets. The applicable percentages and the basis for the calculation of retirement credits are set out in the SR.

2.4.2 Retirement assets

Retirement assets at any given time are equivalent to all interest-bearing retirement credits credited to the individual's retirement assets. In detail, these are the retirement credits plus interest for the period during which the insured person has been a member of the pension scheme. Retirement assets also include interest-bearing deposits such as transfer values on departure from previous schemes, purchases of additional benefits, and transfers under vested-benefit policies, from vested-benefit accounts or from free Foundation funds or surpluses. Total retirement assets are also affected by deposits and withdrawals relating to early withdrawals for purchases of residential property and to divorce.

2.4.3 Projected retirement assets excluding interest

At any given time, projected retirement assets excluding interest are composed of the retirement assets acquired and bearing interest up to the end of the current insurance year plus the total retirement credits for the years until normal retirement age, not including interest.

2.4.4 Interest

The rate at which interest is payable on retirement capital is set annually for the following year by Allianz Suisse Life as specified in the collective insurance contract.

3. Acceptance for insurance and pension cover

3.1 Insurance obligation

¹ All employees belonging to the group of insured persons as per the SR must be covered by insurance if they earn a qualifying annual salary as per those SR and

- a) have an employment contract that is either permanent or has a term of at least three months; or
- b) have an employment contract that was initially limited to three months but was subsequently extended; or
- c) are on one of a series of consecutive employment contracts with the same employer or are performing assignments with a total duration of more than three months for the same lending

2.5 Incapacity

Incapacity for work is the full or partial inability to perform reasonable work in the person's current profession or area of activity as a result of damage to his or her physical or mental health. In the event of protracted incapacity, account is also taken of reasonable activity in a different profession or area of activity.

2.6 Disability (incapacity)

¹ Disability means total or partial incapacity that is of such a nature and degree as to justify an entitlement to a pension under Federal Disability Insurance (IV) and is expected to be permanent or protracted.

² Incapacity is the total or partial loss of the possibility to pursue gainful employment in the relevant balanced labour market due to a medically ascertainable impairment of physical, mental or psychological health and persisting after reasonable treatment and rehabilitation efforts.

³ In assessing whether there is incapacity, solely the consequences of the medically ascertainable impairment are taken into account. Incapacity is only deemed to be present when it is, from an objective point of view, insurmountable.

2.7 Children

- ¹ Children are defined as follows:
- a) children within the meaning of Article 252 ff. ZGB
 - b) foster children, if the deceased was responsible for their maintenance
 - c) step-children maintained entirely or predominantly by the deceased

2.8 Spouses/partners registered in accordance with the PartG

¹ Spouses are married persons between the time of a civil marriage ceremony and death or a legally binding divorce. Partners registered in accordance with the PartG are equated with spouses in the absence of any regulatory provisions to the contrary.

² The term "divorce" also covers the court dissolution of a registered partnership pursuant to the PartG.

2.9 Persons obliged to pay maintenance

Insured persons obliged to pay maintenance are defined as those with dependants as described in Section 4.3.9 paragraph 2a and 2b or with children entitled to a pension. Such persons are insured in accordance with the SR.

company where no interruption exceeds three months.

² A partially disabled employee must be covered by insurance if the conditions listed in paragraph 1 are met and if he or she is not more than 70 percent disabled.

³ The insurance obligation commences:

- in the case of paragraph 1 a) when the employment contract comes into force
- in the case of paragraph 1 b) when the extension was agreed
- in the case of paragraph 1 c) from the start of the fourth month of employment in total; however, if it was agreed before the employee first started work that the duration of the employment or assignment

would exceed three months, the employee must be insured from the start.

- ⁴ The insurance obligation ceases when the employee becomes entitled to full retirement benefits on taking early, normal or deferred retirement, when his or her employment contract is terminated before that time, or when his or her salary permanently falls below the entry threshold.
- ⁵ Insurance cover also ceases on termination of the employer's enrolment with the Foundation.

3.2 Continuation of pension insurance

- ¹ The continuation of insurance after the normal retirement age is possible in the supplementary occupational benefits scheme only for persons who are also insured with Allianz Suisse Life for compulsory occupational pension benefits and who opted for a possible continuation of insurance with the pension scheme in question.
- ² If the applicable SR provide for continuation of pension insurance, insured persons may request said continuation until the end of their gainful employment, but at most until they reach the age of 70, in accordance with the relevant provisions of Appendix 5.
- ³ This request must be made using a special form and addressed to the Foundation via the employer.

3.3 Voluntary insurance

- ¹ Self-employed employers can arrange voluntary insurance cover under their employees' pension scheme. The corresponding SR and GTC apply mutatis mutandis.
- ² The employer must notify the Foundation in writing on its own initiative if it remains the only insured person in the pension scheme due to the departure of all its employees and there is no longer any prospect that it will again have employees requiring insurance within a foreseeable period of time. Insurance cover will be terminated at the end of the calendar year following the departure of the last insured employee and the departure will be handled as a vested benefits case, provided that early retirement is not requested. The employer is solely liable for any consequences of a breach of the reporting obligation (in particular for claims by tax authorities).
- ³ Employees not subject to the insurance obligation by virtue of the Pension Rules cannot arrange voluntary cover with the Foundation.
- ⁴ Pension cover cannot be continued on a voluntary basis after leaving the pension scheme, except as provided for in the provisions on the continuation of insurance during a period of unpaid leave.

3.4 Acceptance

- ¹ The employer must file an application with the Foundation for acceptance of all persons requiring insurance using the appropriate application form. Persons to be insured will be issued with an individual pension certificate detailing their position under employee benefits legislation on acceptance and on any change affecting them.
- ² If retirement benefits are insured and the person insured or due to be insured holds retirement assets with an elective pension provider, he or she shall arrange for the transfer value on departure from the former pension scheme (including indications of any advance withdrawals or pledges), together with any assets held

with vested benefits schemes, to be transferred to the Foundation's pension scheme. The Foundation can itself call for payment of the transfer value for the account of the insured person. The same applies to the elective components of a transfer value that cannot be transferred to the registered BVG pension fund because of its pension plan (statutory minimum benefits).

3.5 The disclosure obligation and the consequences of breaching it

- ¹ The employer and the insured person are required to answer the questions in the application form and the health questionnaire accurately and in full.
- ² If the employer or the insured person give false answers or conceal or misrepresent relevant facts or circumstances of which they are or should be aware, the Foundation is authorised to reduce all benefits or those of its choice as of the date of its choice, provided that it notifies the insured person accordingly in writing within six months of becoming aware of the fact. The Foundation is entitled to do this regardless of whether or not the fact or circumstance concealed or misrepresented is connected with the onset of the insured risk or the extent of the health impairment which occurred.
- ³ The Foundation may also reduce insured benefits for the future or retroactively; however, such retroactive reductions may not predate the commencement of definitive insurance cover.

3.6 Insurance cover

- ¹ Subject to the following paragraphs, the Foundation grants insured persons cover in accordance with the SR applicable to the relevant category of persons throughout the term of the insurance.
- ² Subject to any provision of the SR to the contrary, persons enrolled in the insurance enjoy death and disability cover from 1 January after they reach the age of 17, plus pension entitlements from 1 January after they reach the age of 24.
- ³ Acceptance for insurance is initially only provisional. This means that the Foundation will pay benefits only for claims whose causes do not lie in the period before insurance cover commenced. No benefits are owed for claims during the provisional insurance cover if the damage to the insured person's health underlying these claims occurred before the start of the insurance. The Foundation may, in accordance with its guidelines or with the requirements of Allianz Suisse Life, make definitive acceptance conditional on a medical report or the outcome of a medical examination. Insurance cover pursuant to the applicable SR becomes definitive as soon as the Foundation issues a statement to that effect.
- ⁴ If the information or documentation requested is not delivered to the Foundation within 90 days, the Foundation reserves the right to cancel insurance cover retroactively to its inception date.
- ⁵ Restriction of definitive insurance cover in consequence of impaired health takes the form of a retention lasting a maximum of five years. This period is reduced by any elapsed retention period imposed by the former insurer in respect of the insurance cover acquired with the deposited vested benefits.
- ⁶ If, during the period of the retention, the health impairment to which it relates leads to incapacity, disability or death, then no benefits are payable, owing to restricted insurance cover, regardless of the period for which the retention applied.

- ⁷ Where the Pension Rules provide for increases in benefits, in particular due to significant salary increases, the foregoing provisions apply mutatis mutandis in respect of the increases.
- ⁸ If insurance cover is discontinued in consequence of the termination of the employment contract before retirement or because the salary of the insured person falls permanently below the minimum level (entry threshold), death and disability cover under the Pension Rules remains in force until new insurance cover takes effect or until one month has elapsed, whichever is the sooner (extended cover).
- ⁹ If the Foundation takes over benefit obligations for persons already receiving benefits from a previous insurer, such persons are not considered to be insured persons or pensioners under these regulations with respect to the nature, conditions and amount of insured benefits. Their benefits, particularly prospective future benefits, are governed by a separate contract between the Foundation and the previous insurer.

3.7 Suspension or continuation of insurance during unpaid leave

- ¹ The insurance is suspended during periods of unpaid leave lasting more than one month unless the Foundation is informed before the start of the unpaid leave that the insurance is to be maintained.
- ² The insured person has the option to request continuation either with the insured benefits unchanged or only with the insured benefits for the risks of death and disability unchanged.
- ³ The continued insurance cover is limited to a maximum of one year. After that, insurance cover is suspended.
- ⁴ If insurance cover is maintained, the contributions must be paid in full by the insured person, though the employer remains formally responsible to the Foundation for their payment.
- ⁵ The insured person must submit the corresponding request to the Foundation before the start of the unpaid leave.
- ⁶ No insurance cover exists during the period of suspension.

4. Benefits

4.1 Principles

- ¹ According to the model stipulated by the occupational pensions expert, the SR must be structured in such a way that
 - a) the total contributions for all insured employees that serve to finance retirement benefits do not account for more than 25 percent of all salaries subject to AHV - maximised to ten times the upper BVG limit and - if the employer is also insured - do not exceed 25 percent of the - accordingly maximised - salary subject to AHV per year; or
 - b) the benefits provided for in the SR do not exceed 70 percent of the last salary or income subject to AHV before retirement - maximised to ten times the upper BVG limit.
- ² In addition, the retirement benefits pursuant to the applicable SR, together with those paid under the AHV and other domestic insurance arrangements, must not exceed 85 percent of the last salary or income subject to AHV prior to retirement between one and ten times the upper BVG limit.
- ³ Insured benefits are governed by the following provisions, subject to any provision to the contrary in the SR.

4.2 Retirement benefits

4.2.1 Normal retirement

- ¹ Insured persons are entitled to retirement benefits from the first day of the month after they reach normal retirement age.
- ² Normal retirement age means the statutory retirement age specified in the BVG, currently 64 for women and 65 for men.
- ³ Attainment of normal retirement age does not confer entitlement to retirement benefits if the insured person has decided to maintain pension insurance (the maximum age limit for maintaining pension insurance being 70), this is stated in the SR and the insured person is

working beyond the normal retirement age on at least a part-time basis.

4.2.2 Early or partial retirement

- ¹ Insured persons may take partial or total early retirement at the earliest on reaching the age of 58, thus drawing all or part of their retirement benefits early. Partially disabled insured persons cannot draw the passive portion of their retirement assets early.
- ² Each step of early retirement must involve a reduction in working hours of at least 20 percent.
- ³ A reduction of at least 30 percent must be taken:
 - a) at the time of the first step, if pension is taken as a lump sum, and
 - b) at the time of the last step.
- ⁴ Lump-sum payments may only be taken for a maximum of two steps.
- ⁵ The period of time between the individual retirement steps must amount to at least one year. The entitlement to retirement benefits based on the proportion of retirement assets corresponding to the reduction in working hours begins on the first day of the month after the reduction in working hours and, in the case of the final partial retirement step, after the termination of the employment contract.
- ⁶ If the employment contract is terminated between the earliest possible retirement age and normal retirement age, but the insured person does not wish to take early retirement, he or she will receive a departure benefit. Once the insured person has reached normal retirement age, termination of the employment contract will result in retirement.
- ⁷ Insured persons drawing all their retirement benefits must entirely terminate their employment contract. Where part of the retirement benefits is taken early as a result of a reduction in working hours (partial retirement), the insured person's previous annual salary must be reduced accordingly. As long as the SR do not contain any provisions to the contrary for partial retirements, the reduced salary continues to be insured with the coordination deduction being adjusted accordingly.

⁸ In the event of a partial advance withdrawal of retirement benefits, the capital in question is taken from the retirement assets and used to fund the retirement benefits.

4.2.3 Retirement capital

¹ If the benefits are insured in accordance with the SR, the insured person is entitled to draw part or all of his or her retirement capital in cash.

² If the insured person is married or living in a registered partnership pursuant to the PartG, the lump-sum payment is subject to the written consent of his or her spouse or registered partner. If such consent cannot be obtained or is refused, the insured person may take the matter to court.

³ If part of the retirement capital cannot be paid out in cash because of the restriction on drawing capital after the purchase of additional benefits, this is converted into a pension.

4.2.4 Retirement pension instead of retirement capital

¹ Instead of drawing retirement capital, insured persons may draw some or all of their retirement assets on which their retirement benefits depend as a pension. Subject to the statutory three-year blocking period on drawing benefits from purchases, any remaining retirement assets are paid out as retirement capital.

² If insured persons wish to draw their retirement assets as a pension, they must make a corresponding written declaration before they effectively become entitled to retirement benefits. The declaration is regarded as having been revoked if the written revocation reaches the Foundation before the entitlement to retirement benefits takes effect.

³ In the event of partial retirement, the application for the payment of all or part of the retirement assets as a pension is also valid for a further partial-retirement stage until full retirement, unless the request is revoked in sufficient time.

4.2.5 Pension conversion rate

The amount of the annual retirement pension depends on the proportionate retirement assets at the time of retirement. Such assets are converted to a retirement pension at the elective conversion rate set out in the Allianz Suisse Life collective life insurance rate schedule. In the event of normal retirement, the conversion rate valid on the insured person's birthday corresponding to the retirement age under the Pension Rules shall be used. In the event of early retirement, the conversion rate applicable on the date of the legal termination of the employment relationship shall be used.

4.3 Survivors' benefits

4.3.1 Entitlement conditions

¹ Survivors' benefits are payable if the insured person:

- was insured at the time of his or her death under the applicable SR, or
- was insured under the applicable SR at the commencement of the incapacity of at least 20 percent which led to his or her death, or
- was already receiving a retirement or disability pension from the Foundation at the time of his or her death.

² The entitlement to a survivor's pension does not come into force until salary continuation in accordance with Article 338 OR has terminated.

4.3.2 Surviving spouse's (widow's and widower's) pensions

¹ On the death of the insured person, provided that insurance cover is specified in the SR, the surviving spouse is entitled to a widow's/widower's pension regardless of his or her age, the duration of the marriage and the number of children.

² The annual widow's/widower's pension on the death of an insured person who has not yet reached retirement age under the Pension Rules and on the death of the recipient of a retirement pension is as specified in the applicable SR.

³ The entitlement to a widow's/widower's pension commences on the date of the insured person's death. If the deceased was receiving a retirement or disability pension, the entitlement commences on the first day of the calendar month following his or her death.

⁴ The widow's/widower's pension ceases on the death of the surviving spouse. A surviving spouse who remarries or enters into a registered partnership pursuant to the PartG before reaching the age of 45 also ceases to receive the widow's/widower's pension, but is eligible for the payment of a lump sum equal to three times the annual widow's/widower's pension. Provided that an application is made in time, this settlement may be replaced by a prospective entitlement to the resumption of the pension on the dissolution of the subsequent marriage or the registered partnership.

4.3.3 Pensions for surviving partners pursuant to the PartG (partner's pensions)

Subject to any express provision to the contrary for partner's pensions in the SR, the provisions for widow's and widower's pensions also apply to partner's pensions.

4.3.4 Pensions for surviving life partners (life partner's pensions)

¹ Provided that insurance cover is specified in the SR, the surviving life partner is entitled to a life partner's pension if the insured person dies before retirement and all the conditions listed below are met at the time of the insured person's death:

- The surviving life partner cohabited exclusively with the insured person at the time of the latter's death.
- The cohabitation relationship existed without interruption for the last five years of the insured person's life or the surviving life partner was responsible at the time of the insured person's death for the maintenance of at least one acknowledged, joint child in accordance with Article 260 ff. ZGB.
- There were no legal obstacles to the marriage of the surviving life partner and the insured person or to the registration of a partnership between them pursuant to the PartG.
- At the time of death neither the surviving life partner nor the insured person was married or a member of a registered partnership pursuant to the PartG.
- The surviving life partner is not receiving an occupational survivor's pension (widow's/widower's pension, partner's pension, life partner's pension) and is not otherwise entitled to pensions of a similar nature from domestic or foreign insurers; this means survivor's pensions or entitlements to such pensions which were already current or already existed at the time of the insured person's death.
- The surviving life partner who is supposed to be entitled to a pension was notified to the Foundation by the insured person prior to the latter's death by submitting the special form for

this purpose. The form must have been signed by the insured person.

- ² If the insured person dies after retirement, the entitlement only exists if it would have existed in the event of death prior to retirement and the insured person received a retirement pension until his or her death. The condition for entitlement specified in paragraph 1 f) must not have already been fulfilled on the insured person's retirement.
- ³ The annual life partner's pension upon death of a retiree is 60 percent of the current retirement pension. Subject to any provision to the contrary in the SR, the annual life partner's pension on the death of the insured person in the other cases is equal to the full widow's/widower's pension as specified in the SR, regardless of whether the insured person died as a result of sickness or an accident.
- ⁴ The entitlement arises when compliance with all preconditions in paragraphs 1 or 2 has been proven and commences at the earliest on the date when the insured person dies. On the death of the recipient of a retirement or disability pension, the entitlement commences on the first day of the calendar month following his or her death.
- ⁵ Claims must be lodged in writing with the Foundation by the beneficiary within 180 days of the insured person's death, enclosing evidence that all the preconditions in accordance with paragraph 1 or 2 have been met.
If the claim is not lodged or the required evidence not produced within this period, entitlement is forfeited.
- ⁶ If the insured person notified the Foundation or Allianz Suisse Life of a series of successive cohabitation relationships, all except the last are deemed to have been dissolved. Notification of multiple cohabitation relationships is not permitted.
- ⁷ The entitlement to a life partner's pension ceases when the beneficiary marries, enters into a registered partnership pursuant to the PartG or dies. It also ceases on the day before the death of the beneficiary's new life partner if the new life partner's death would trigger an entitlement to occupational survivors' benefits in the beneficiary's favour in the absence of the life partner's pension from the Foundation. All circumstances leading to the cessation of an entitlement must be reported to the Foundation without delay.
- ⁸ On the death of a person who was receiving a retirement pension or a full disability pension at the time of his or her death, the surviving life partner shall not be entitled to benefits if the start date of the pension was before 31 December 2006.

4.3.5 Pension reductions

- ¹ If the person entitled to a pension is more than 10 years younger than the insured person, the widow's/widower's pension, the partner's pension and the life partner's pension are reduced by one percentage point for each year or part of a year by which the age difference exceeds 10 years.
- ² If the insured person married or entered into a registered partnership pursuant to the PartG after reaching the age of 65, the pension is reduced to the following percentage rates:
Marriage/registration at the age of 66:
80 percent
Marriage/registration at the age of 67:
60 percent
Marriage/registration at the age of 68:
40 percent
Marriage/registration at the age of 69:
20 percent

The pensions thus reduced are further reduced in accordance with paragraph 1.

- ³ If the insured person married or entered into a registered partnership pursuant to the PartG after reaching the age of 69, there is no pension entitlement.
 - ⁴ If the insured person married or entered into a registered partnership pursuant to the PartG after reaching the age of 65 while suffering from a serious sickness of which he or she must have been aware, no pension is payable if the insured person dies of that sickness within two years of marrying or entering into a registered partnership pursuant to the PartG.
- #### 4.3.6 Commuting a widow's/widower's pension, a partner's pension or a life partner's pension

In the event of the death due to illness of an insured person prior to retirement or a disability pension recipient, the beneficiary may draw the entire benefits as a lump sum instead of the widow's/widower's, partner's or life partner's pension. If a retiree dies, this option is available regardless of whether the death was due to illness or accident. The corresponding request must be submitted before receipt of the first pension payment. The amount of the lump sum shall be calculated in accordance with Allianz Suisse Life's collective rate schedule. If the beneficiary is under 45 years of age and provided that the amount of the pension is non-trivial, the lump sum is reduced by 3 percent for every year or part of a year by which his or her age is less than 45. In the event of a reduction, however, a lump sum equal to at least four years' unreduced pension payments is payable. If the amount of the pension is trivial, its net present value is payable.

4.3.7 Orphan's pension

- ¹ If orphan's pensions are insured, children are entitled to an orphan's pension:
 - a) up to the maximum age defined in the SR
 - b) beyond the maximum age defined in the SR if the child is in education up to a maximum age of 25; a child is not regarded as being in education if he or she earns an average monthly income that is higher than the maximum full AHV retirement pension
 - c) beyond the maximum age defined in the SR if the child is at least 40 percent disabled up to a maximum age of 25
- ² If the benefit is insured in accordance with the SR, qualifying children of the insured person are entitled to an orphan's pension from the day of his or her death. If the deceased was receiving a retirement or disability pension, the entitlement commences on the first day of the calendar month following his or her death.
- ³ The annual orphan's pension upon death of a retiree is 20 percent of the current retirement pension. On the death of an insured person in the other cases, it is based on the SR.
- ⁴ If a child entitled to a pension dies, the pension entitlement lapses. In the other cases, the pension entitlement ceases when the grounds for it no longer apply.
- ⁵ Subject to any provision to the contrary in the SR, the pension entitlement ceases at the end of a month.

4.3.8 Lump-sum death benefit from purchase

- ¹ If the SR contain a provision for the return of benefits purchased as an additional lump-sum death benefit, on the death of the insured person before full retirement the total additional benefits purchased by him or her (without interest) are paid out as a lump-sum death benefit. This amount is reduced in the event of partial

retirement, pension settlements following a divorce and WEF early withdrawals.

² Only additional benefits purchased from the Foundation on or after the date on which the relevant SR regulation came into effect are taken into account. Earlier purchases are therefore not included. Purchases eligible for inclusion are those set out in the Pension Rules and purchases for early retirement.

³ As an exception to this rule, in the case of new employers joining the scheme whose previous pension plan included provision for a corresponding return, the purchases made previously by insured persons are also taken into account under these regulations. However, this is only done on the condition that (at the request of the Foundation) the previous pension scheme or its insurer provides notification of the purchases by all insured persons to be included within 30 days.

⁴ The entitlement to the lump-sum death benefit is set out in Section 4.3.9 paragraphs 2 and 3.

4.3.9 Lump-sum death benefit from repayment of unappropriated retirement assets

¹ Provided that retirement benefits are insured under the SR, if an insured person dies as a result of illness or accident before full retirement, then the retirement assets available at the end of the month of death, provided that they exist and have not been paid out or used to finance another death benefit, are paid out as a lump-sum death benefit in the following proportions: 100 percent in cases pursuant to paragraph 2 a) to e), 50 percent in cases pursuant to paragraph 2 f).

² Notwithstanding inheritance law, the following beneficiaries are entitled to this payment in the following order of priority:

- a) the surviving spouse or registered partner; in his or her absence
- b) the surviving life partner who meets the conditions for entitlement set out in Section 4.3.4 paragraph 1 a) to e); this is subject to the condition that the surviving life partner who is supposed to be entitled to the lump-sum death benefit was registered with the Foundation by the insured person prior to the latter's death using the special form for this purpose signed by the insured person; in his or her absence
- c) the children in accordance with Section 2.7 paragraph 1 a); in their absence
- d) the parents; in their absence
- e) the siblings; in their absence
- f) the remaining legal heirs, to the exclusion of the community.

³ If a group includes more than one beneficiary, the lump-sum death benefit is divided among them individually.

4.3.10 Additional lump-sum death benefit

¹ If provided for in the SR, an additional lump-sum death benefit is payable on the death of the insured person before full retirement pursuant to the SR. Entitlement is as set out in Section 4.3.9 paragraph 2 and 3.

² If persons obliged to pay maintenance are insured, the persons defined in Section 4.3.9 paragraph 2a) and b) and the children eligible for a pension are entitled to the lump-sum death benefit insurance in accordance with paragraph 1.

- a) was insured under the applicable SR at the commencement of the incapacity which led to his or her disability, or
- b) was at least 20 percent but less than 40 percent incapacitated due to a birth defect on taking up gainful employment and was insured under the applicable SR when the incapacity that led to his or her death increased to at least 40 percent, or
- c) became disabled as a minor and was therefore at least 20 percent but less than 40 percent incapacitated on taking up gainful employment and was insured under the applicable SR when the incapacity that led to his or her disability increased to at least 40 percent.

4.4.2 Benefit amounts

¹ Unless stipulated otherwise in the SR, the level of benefits is based on the benefit entitlement scale in paragraph 3. The degree of disability reflects the loss of income due to impaired health by comparing the theoretical income after the onset of disability with the income that would have been hypothetically possible if the insured person's health had not been impaired. The degree of disability, however, cannot exceed the maximum degree of disability set by the IV for persons in gainful employment.

² The Foundation may deviate from the degree of disability set by the IV. It may also deviate from the degree of disability set by the IV if the IV does not notify the Foundation in advance of the degree of disability or the degree of disability determined proves to be untenable.

³ Entitlement to benefits is graduated as follows:

- a) disability of 70 percent or more: full benefits
- b) disability of at least 60 percent but less than 70 percent: three-quarters of full benefits
- c) disability of at least 50 percent but less than 60 percent: half of full benefits
- d) disability of at least 40 percent but less than 50 percent: a quarter of full benefits
- e) disability of less than 40 percent confers no entitlement to benefits.

⁴ The Foundation may call on its independent medical examiner to determine incapacity and its degree.

⁵ In the event of an insured person's incapacity or disability, his or her benefits are based on the last salary reported by the employer before the onset of the incapacity or disability.

4.4.3 Exemption from the obligation to pay contributions

¹ If an insured person is at least 40 percent incapacitated or is incapacitated at the minimum rate stipulated in the SR due to illness or accident for longer than the qualifying waiting period specified in the SR, he or she becomes exempt from the obligation to pay contributions.

² As soon as a final ruling has been received from the IV agency, the exemption from the obligation to pay contributions shall take effect from the start date of the pension entitlement conferred by the IV agency in line with the benefit entitlement scale in Section 4.3.2 paragraph 3 or any provision to the contrary in the SR, taking into account the IV's findings with regard to the degree of disability. Until this point in time, the exemption from the obligation to pay contributions is based on a doctor's certificate attesting to the degree of incapacity. Incapacity of less than 40 percent or less than the minimum rate specified in the SR does not confer any entitlement to exemption from the obligation to pay contributions.

4.4 Benefits in the event of incapacity/disability

4.4.1 Conditions for entitlement

¹ Benefits are payable if the insured person:

- ³ If the final ruling from the IV agency does not confer entitlement to an IV disability pension, the exemption from the obligation to pay contributions continues to be based on a doctor's certificate attesting to the degree of incapacity and shall end at the latest on the first day of the twelfth calendar month after the commencement of the incapacity.
 - ⁴ If the exemption from contributions is based on a doctor's certificate attesting to the degree of incapacity, any changes to the degree of incapacity lasting fewer than 10 days are not taken into account.
 - ⁵ The entitlement to the exemption from contributions ceases:
 - a) as soon as the entitlement to benefits ceases, subject to the provisions of Appendix 7
 - b) at the end of the month in which the insured person dies
 - c) on full retirement
 - ⁶ Any excessive or excessively long exemption from payment of contributions will lead to an adjustment in contributions debited to the employer's premium account. If insufficient exemption was given then the insured person has the right to claim reimbursement from the employer of the overpaid amounts charged by the employer.
 - ⁷ The entitlement to exemption from the obligation to pay contributions is only unrestricted if both the employer and the insured person fulfil their special responsibilities in the event of incapacity on time. If they do not, the Foundation may postpone the exemption from the obligation to pay contributions by the number of days equivalent to the delay in fulfilment of an individual obligation, but for no longer than the period until the commencement of the disability pension.
 - ⁸ The exemption from the obligation to pay contributions in cases of disability (incapacity) is granted in cases of illness or accident.
- 4.4.4 Disability pension and pension for a disabled person's child
- Provided that the benefits are insured in accordance with the SR, if the insured person becomes disabled before reaching normal retirement age pursuant to Section 4.1.1 paragraph 1, then he or she is entitled – after the waiting period specified in the SR and subject to a delay in the entitlement in accordance with Section 4.3.4 – to a disability pension and a pension for each child who would be entitled to an orphan's pension in the event of the insured person's death. The level of these pensions is set out in the SR. Disability of less than 40 percent or less than the minimum rate specified in the SR does not confer any pension entitlement.
- 4.4.5 Commencement and cessation of entitlement
- ¹ The entitlement to payment of pensions commences on the expiry of the waiting period specified in the SR. It is postponed for as long as the insured person draws his or her full salary or daily benefits under sickness or accident insurance equal to 80 percent of his or her lost salary. The entitlement may also be postponed for other reasons as specified in paragraph 6.
 - ² If incapacity or disability is interrupted, the total duration of all periods of incapacity or disability due to the same cause is decisive in calculating the waiting period. If an interruption of incapacity or disability lasts longer than one-third of the waiting period specified in the SR, the waiting period starts again. Incapacity or disability is deemed to have been interrupted if its degree falls below 40 percent or the minimum rate stipulated in the SR.
 - ³ Incapacity or disability due to a different cause counts as a new event, and a new waiting period applies. This applies even if the condition of a claimant already suffering from disability deteriorates owing to a new cause, increasing his or her degree of disability.
- 4.4.6 Retirement account of partially disabled insured persons
- ¹ Provided that retirement benefits are insured under the SR, at the onset of incapacity due to the same cause as the insured person's disability, insurance is divided into a passive component (corresponding to the benefit entitlement scale in accordance with Section 4.4.2 paragraph 3 or any differing provision in the SR) and a residual active component.
 - ² The active component is managed in the same way as insurance for employed persons. The threshold values specified in the SR are adjusted in line with the benefit entitlement scale pursuant to Section 4.4.2 paragraph 3 or any differing provision in the SR.
 - ³ In the passive component, the retirement assets are maintained in accordance with the last insured salary that is reduced in accordance with the benefit entitlement scale pursuant to Section 4.4.2 paragraph 3 or any differing provision in the SR; the retirement assets are maintained as soon as and for as long as the entitlement to benefits pursuant to Section 4.4.2 paragraph 3 exists.
- 4.4.7 Change in the degree of disability
- ¹ If the degree of disability increases and the insured person is still insured under the applicable SR at the time of the increase, the disability benefits are adjusted, taking into account the provisions on waiting periods.
 - ² The following rule applies if an insured person for whom the entitlement conditions are met leaves the group of insured persons:
 - a) If the degree of the already existing disability increases after the insured person's departure, there is no entitlement to higher benefits. This is the case regardless of whether the increase

has the same cause as the existing disability or a new cause.

- b) If the degree of disability falls below 40 percent or the minimum rate specified in the SR, there is no entitlement in respect of a later increase to at least 40 percent, even if this is closely related in terms of cause and time to the original disability.

4.4.8 Re-evaluation

- ¹ The Foundation may review both the conditions and the level of entitlement at any time and reduce its benefits on the basis of the outcome of the review at any time without it being necessary for the circumstances to have changed significantly or the original benefit assessment to have proved untenable.
- ² If the review leads to a reduction in benefits in these cases, the benefit reduction takes effect on the first day of the second month following notification by the Foundation.
- ³ If the review leads to a reduction in benefits because the circumstances have changed, the change in the benefits takes effect retroactively from the date when the circumstances changed.
- ⁴ The beneficiary may submit a written request for a review of his or her entitlement. Any increase in benefits takes effect from the first day of the month in which the notification was received.

4.5 Transfer value on departure

4.5.1 Preconditions and timing

If an insured person leaves the pension scheme or the Foundation before the occurrence of an insured event (vested benefits case), he or she is entitled to the transfer value on departure. This is due for payment on the insured person's departure and bears interest from that point at the interest rate defined in the SR. If the transfer value is not transferred within 30 days of the necessary information being provided, then the interest rate increases to the arrears interest rate for the transfer value set by the Federal Council (for the current arrears rates see Appendix 2).

4.5.2 Amount of the transfer value on departure

- ¹ The transfer value on departure is the highest of the following two amounts:
 - a) Available retirement assets (Article 15 FZG): the retirement assets accumulated during the insurance term in accordance with the SR plus previous transfer values on departure and other additional deposits such as purchases of additional benefits, including interest.
 - b) Minimum sum (Article 17 FZG): the vested benefits transferred for the account of the insured person and any additional deposits for the purchase of additional benefits, with interest, plus contributions made by the insured person, plus 4 percent of the contributions made by the insured person for each year by which his or her age exceeds 20 up to a maximum of 100 percent.

As prescribed by law, certain sums are deducted from the total contributions made by the insured person. These are:

- I a contribution to funding entitlements to disability benefits until the insured person reaches normal retirement age
- II a contribution to funding entitlements to survivors' benefits until the insured person reaches normal retirement age
- III a contribution to administrative costs
- IV a contribution to the costs of the BVG Guarantee Fund

- ² The above transfer value calculations take account of any division of the insurance in consequence of partial disability or the partial early withdrawal of retirement benefits.

- ³ However, if part of the retirement assets has been withdrawn for purchases of residential property or transferred following a divorce for the benefit of the occupational-pension arrangements of the divorced spouse, the amount and timing of the withdrawal or transfer are taken into account in the calculation of the transfer value.

- ⁴ If the insured person ceases to be disabled, thus losing his or her entitlement to disability benefits, after the employment contract has been terminated, he or she is entitled to the transfer value on departure equal to the current retirement assets.

4.5.3 Transfer to the new pension provider

- ¹ If the insured person enters a new pension scheme in Switzerland or the Principality of Liechtenstein, the Foundation transfers the transfer value on departure to the new scheme.
- ² If the Foundation is required to pay survivors' or disability benefits after it has transferred the transfer value, it is entitled to reimbursement to the extent of those benefits. If this is not forthcoming, it may reduce benefits.

4.5.4 Maintenance of insurance cover in another form

- ¹ An insured person who does not enter a new pension scheme or whose annual salary is below the entry threshold or the minimum salary pursuant to the SR must maintain insurance cover in another permissible form with a vested benefits institution (vested benefits foundation or insurer) of his or her choice.
- ² The departing person or the employer on his or her behalf must inform the Foundation which vested benefits institution of his or her choice is to receive the transfer value on departure. This information must be provided within one month of his or her departure.
- ³ If it is not provided, the transfer value is sent for the account of the person concerned to a vested benefits institution designated by the Foundation, identified to him or her in the departure form or otherwise.
- ⁴ If the Foundation designates a vested benefits institution, the latter places the transfer value in a vested benefits account established in the name of the person concerned (the account holder) and notifies him or her accordingly in writing.
- ⁵ If the Foundation designates an insurer, the latter uses the transfer value to create a vested benefits endowment policy for the benefit of the person concerned (the policyholder). This provides a lump sum on maturity when the policyholder reaches normal BVG retirement age or a lump-sum death benefit of the same amount if he or she dies prior to this date. The details are contained in a policy document and in the general policy terms.
- ⁶ The account holder or the policyholder notifies the vested benefits institution if he or she wishes the transfer to go to another vested benefits institution.
- ⁷ Either in the departure form or previously, the departing person or the employer on his or her behalf may expressly prohibit transfer to the vested benefits institution designated by the Foundation. In this event, the Foundation will transfer the transfer value plus interest to the Substitute Occupational Benefit Institution between six months and two years after the vested benefits event.

4.5.5 Disbursement in cash

- ¹ The insured person may request that the transfer value be disbursed in cash, on production of the requisite documentation, if:
 - a) he or she is permanently leaving Switzerland and the Principality of Liechtenstein, or
 - b) he or she is taking up self-employment and is no longer subject to compulsory insurance, or
 - c) the transfer value is less than the annual contributions paid in by the insured person (employee contribution).
- ² If the insured person is married or living in a registered partnership pursuant to the PartG, cash disbursement is subject to the written consent of his or her spouse or registered partner. If such consent cannot be obtained or is refused, the insured person may take the matter to court.
- ³ The Foundation may stipulate as documentation necessary for disbursement in cash an authenticated signature, confirmation of departure from the residents' registration authorities or confirmation of residence, evidence of insurance cover, evidence of an employment contract, confirmation from the AHV Compensation Office, an extract from the commercial register or other equivalent documentation.

4.6 Pension settlement in the event of divorce

- ¹ If retirement benefits are insured under the SR, the court determines in the course of divorce proceedings what portion of the transfer value acquired by the insured person during the marriage and what portion of a current retirement pension is to be used for the benefit of his or her former spouse's occupational pension arrangements.
- ² Partners registered in accordance with the PartG have the same status as spouses with regard to pension settlements. The term "divorce" also covers the court dissolution of a registered partnership pursuant to the PartG.
- ³ The details are covered in Appendix 8, "Provisions on pension settlements in the event of divorce".

4.7 Home-ownership promotion benefits

- ¹ If retirement benefits are insured under the SR, the insured person may, before the actual entitlement to an old-age pension takes effect and within the limits of the statutory possibilities, use occupational pension assets to acquire residential property for his or her own use. Such use may take the form of early withdrawal of pension assets or their assignment as collateral. The Foundation provides the insured person with an information sheet detailing the preconditions and effects of these two alternatives, highlighting in particular:
 - a) the pension capital available for the purchase of residential property
 - b) the benefit reductions that early withdrawal or pledging will bring
 - c) the possibility of making good any deficiency in insurance cover for disability or death resulting from withdrawal or pledging
 - d) the tax due on withdrawal or a pledge
 - e) the entitlement to a refund of the tax paid on withdrawal or a pledge when the capital involved is repaid, together with the applicable time limit.
- ² The part of the pension capital resulting from a purchase may not be withdrawn within the statutory block-

ing period of three years after the purchase. This period starts again with every purchase the insured person makes.

- ³ The Foundation provides insured persons considering withdrawal or a pledge with the information and services required by law, together with an application form.
- ⁴ If the insured person is married or living in a registered partnership pursuant to the PartG, early withdrawal, each subsequent establishment of a lien on the residential property and pledging are subject to the written consent of his or her spouse or registered partner. If such consent cannot be obtained or is refused, the insured person may take the matter to court.
- ⁵ The insured person shall owe the Foundation the cost contribution for processing an application for withdrawal or a pledge as set out in Allianz Suisse Life's Cost Schedule.
- ⁶ If the insured person is disabled at the time of the application to withdraw occupational pension assets to acquire residential property, he or she is not entitled to make such a withdrawal.

4.8 Coordination of multiple benefits

4.8.1 General provisions

- ¹ The lump-sum death benefit from repayment of unappropriated retirement assets and the lump-sum death benefit from purchases are not included in the coordination calculation.
- ² The payment of other death and disability benefits insured in accordance with these Pension Rules in addition to other relevant benefits is subject to the following provisions.
- ³ The relevant benefits include in particular pension and capital benefits under the AHV/IV and the federal accident and military insurance (hereinafter referred to as "UV/MV") and any supplementary insurance policies. Pensions on disability (paid to the disabled and their children) and death (widow's/widower's pensions, partner's and orphan's pensions) are added together. Other relevant benefits also include those paid by domestic and foreign insurers and foreign social-security agencies. They do not include assistance to the destitute, severance payments or similar benefits. The coordination calculation also takes account of claims against liable third parties, and in the case of disabled persons the earned or compensation income that they have actually received or can reasonably be expected to receive. The inclusion of benefits that are not of the same kind or for the same purpose and to which the insured person did not become entitled as a result of the same event and the inclusion of liability claims are expressly permitted.
- ⁴ Capital benefits are converted to pensions for the coordination calculation according to actuarial principles.
- ⁵ If federal accident or military insurance reduce or refuse benefits on the grounds that the actions concerned were deliberate, culpable or involved exposure to extraordinary hazards and risks, in particular in accordance with Article 21 ATSG, Articles 37 and 39 UVG and Article 65 or 66 MVG, the Foundation will not make up the reductions. The coordination calculation is based on the unreduced benefits.
- ⁶ In order to prevent unjustified advantage, insured benefits payable in addition to the other relevant benefits are restricted to 100 percent of the reported annual salary prior to the occurrence of the insured event.

⁷ If the IV classifies the insured person as not in employment (change of status), a new overpaid benefits calculation is carried out. In such cases, the limit for overpaid benefits is not 100 percent of reported annual salary prior to the insured event but a putative lost income of zero.

4.8.2 Multiple causes

Where disability is due to more than one cause (sickness and accident), the benefits provided for in the GTC and the SR are only paid proportionately in respect of the cause that is covered.

4.8.3 Re-evaluation of the overpaid benefits calculation

The Foundation may review the conditions and the level of any overpaid benefits at any time and adjust its benefits on the basis of the outcome of the review at any time without it being necessary for the circumstances to have changed significantly.

4.9 Common benefit provisions

4.9.1 Accident cover and exclusion

Unless the applicable SR contain provisions to the contrary, the risk of accident is excluded.

4.9.2 Recourse

In the event of a claim and if called upon by the Foundation to do so, the beneficiary is obliged to assign to the Foundation any claim against third parties with joint and several liability up to the amount of the benefits payable by the Foundation.

4.9.3 Miscellaneous

¹ If the beneficiary was responsible to a significant extent for bringing about the death or disability or refuses to undergo IV rehabilitation measures, the Foundation may reduce or refuse to pay benefits. In the event of claims to a lump-sum death benefit from repayment of unappropriated retirement assets or from purchases, the relevant sequence of beneficiaries shall apply as if the person whose benefits were refused did not exist.

² If a criminal investigation or criminal proceedings have been instigated against an insured person on grounds of suspected insurance fraud, the Foundation may postpone its final decision on entitlement and on any payment of benefits until the final conclusion of the criminal case, provided that there is a connection with the claimed entitlement to benefits. During this period, it shall not be liable to pay interest on delayed benefits unless required by law to do so.

³ Beneficiaries are obliged to provide the Foundation with accurate information regarding all insurance benefits and other income.

⁴ If all or part of the contributions owed by the employer remain unpaid even after the end of the first month of the calendar or insurance year for which they are owed, potentially resulting in the relevant pension scheme becoming insolvent in the event of benefits being due, then in the event of any claims from the insurance of the insured employer or of executives working for the employer in comparable positions (e.g. members of the Board of Directors or the Board of Management or Heads of Human Resources or Accounts) and on receipt of a corresponding written preliminary notice from the BVG Guarantee Fund, the Foundation will withhold its benefits until such time as the contributions owed have been paid in full or the BVG Guarantee Fund has given a written assurance or guarantee that the benefit in question will be paid.

⁵ Benefits obtained improperly must be repaid to the Foundation. Repayment may be waived if it would cause severe hardship to a recipient acting in good faith. Repayment may be made by deduction from future benefits if this is legally permissible. The right to claim more extensive compensation for damages is reserved.

⁶ Future benefits cannot be pledged or ceded except in accordance with the provisions on pledges for home-ownership purposes using occupational pension funds. The entitlement to benefits may be netted against claims ceded to the Foundation by the employer if they relate to sums that have not been deducted from salaries.

⁷ Otherwise, in the absence of overriding legal provisions to the contrary, the Foundation may at any time net benefits due for payment against its claims.

⁸ Benefits are exempt from compulsory execution to the maximum extent permitted by law.

⁹ Benefits on the death of the insured person do not form part of their estate.

4.9.4 Form and disbursement of benefits

¹ As a rule, retirement benefits are paid out in capital, survivors' and disability benefits as pensions. Subject to the three-year blocking period for lump-sum payments after a purchase, lump-sum benefits may also be disbursed as a pension and pension benefits as a lump sum in the cases prescribed by the Pension Rules. Provisions to the contrary are set out in the SR.

² The Foundation is authorised to pay a lump sum instead of an annuity if the full retirement or disability pension, excluding exemption from contributions, is less than 10 percent, the widow's/widower's pension is less than 6 percent or the orphan's pension is less than 2 percent of the respective AHV minimum retirement pension.

³ When a disability pension is commuted, there is an additional entitlement to the transfer value plus the commuted value of the "exemption from the obligation to pay contributions" benefit. The payment of a lump sum and the transfer of the transfer value to a vested benefits institution ends any entitlement to further benefits in accordance with the SR and these regulations.

⁴ As a rule, the Foundation pays pensions quarterly in advance on 1 January, 1 April, 1 July and 1 October. If the pension does not begin on one of these dates, it is calculated on a pro-rata basis.

⁵ Payments fall due 30 days after the Foundation receives all the information and documents required for disbursement.

⁶ Benefits due for payment may – on the instructions of the Foundation – be disbursed by Allianz Suisse Life. Subject to any overriding legal provision to the contrary, the Foundation generally pays benefits that are due to the point of payment in Switzerland indicated by the beneficiary.

⁷ When lump sums disbursed in accordance with the provisions of the Pension Rules (such as disbursement of the transfer value in cash and advance withdrawal for home-ownership promotion) require the written consent of the recipient's spouse or registered partner pursuant to PartG, the Foundation is entitled to call for such consent to be authenticated at the insured person's expense.

⁸ The Foundation is deemed to be in arrears if it is notified that it is delinquent in the appropriate legally prescribed manner. This applies even if the due date is

subject to the expiry of a certain period of time. In the event of binding legal provisions to the contrary, these shall apply. Interest owed by the Foundation for late payments shall be equivalent to the interest rate applicable to retirement assets, but no more than 5 percent, subject to any applicable special agreement or to any provision in these Pension Rules to the contrary.

4.9.5 Adjustment of pensions in line with inflation

Retirement, survivors' and disability pensions are adjusted in line with inflation to the extent permitted by the financial possibilities of the pension scheme. Decisions on this are taken by the Pension Commission.

5. Financing

5.1 Obligation to pay contributions

5.1.1 Components of the total contribution

¹ The total cost of insurance provision consists of retirement credits, contributions for death and disability risks, cost contributions, contributions for inflation adjustment and the BVG Guarantee Fund, costs of special expenditure and regulatory fees and any special contributions.

² According to the model stipulated by the occupational pensions expert, the pension plans of each pension scheme must be structured in such a way that

- a) the total contributions for all insured employees that serve to finance retirement benefits do not account for more than 25 percent of all salaries subject to AHV - maximised to ten times the upper BVG limit and - if the employer is also insured - do not exceed 25 percent of the - accordingly maximised - salary subject to AHV per year; or
- b) the benefits provided for in the SR do not exceed 70 percent of the last salary or income subject to AHV before retirement - maximised to ten times the upper BVG limit.

In addition, the retirement benefits pursuant to the SR, together with those paid under the AHV and other domestic insurance arrangements, must not exceed 85 percent of the last salary or income subject to AHV prior to retirement between one and ten times the upper BVG limit.

³ Furthermore, at least 6 percent of total contributions for all groups and pension plans conducted by the Foundation for the employer must finance benefits for the risks of death and disability.

5.1.2 Retirement credits (if retirement benefits are insured under the SR)

The retirement credits set out in the SR are levied annually.

5.1.3 Risk contributions for death and disability / cost contributions

Risk and cost contributions are set out in the rates table. The rates for individual contracts may be higher or lower than standard rates. In addition, insured persons may be divided into risk classes according to operating conditions and risk exposure (risk-category-based rates), and/or claims experience under the individual contract may also be factored in (experience-based rates).

5.1.4 Contributions for the BVG Guarantee Fund

The Foundation levies contributions for the BVG Guarantee Fund, which can be charged entirely to insured persons and the employer.

5.1.5 Cost contributions / regulatory fees

Cost of special expenditure are charged in accordance with the separate Cost Schedule. Pension schemes may be charged proportionately in respect of regulatory fees and flat-rate contributions to cover the Foundation's costs of statutory supervision. Charges are levied annually in arrears at the beginning of each year.

5.1.6 Special contributions

To guarantee the rates for interest on retirement assets and to convert retirement assets at retirement, the Foundation can levy special contributions pursuant to the applicable SR, provided that these are covered by the applicable Allianz Suisse Life collective insurance rate schedule approved by FINMA.

5.2 Obligation to pay contributions

5.2.1 Obligation to pay contributions

The obligation of the employer and the insured person to pay contributions commences when the insured person takes up employment, though not before the employee concerned has joined the group of insured persons. It ceases when the insured person reaches normal retirement age, on his or her death, on the early termination of his or her employment contract or when he or she ceases to be subject to compulsory insurance in accordance with these Pension Rules. No contributions are payable during the exemption from the obligation to pay contributions and during periods of extended cover.

5.2.2 Contributions of the employer and insured persons (employees)

¹ The employer pays at least half the total annual cost of pension and insurance cover, or that portion of it that does not have to be borne by insured persons in accordance with the provisions of the SR. This share must be at least half of the total contributions. Contributions payable by insured persons are deducted from their salaries by the employer. The employer is responsible for paying all contributions.

² Subject to any provision in the SR to the contrary, the insured person pays half of the total annual contribution or cost.

³ The employer may make voluntary advance payments to the Foundation, thus building up contribution reserves (employer contribution reserves) from which the Foundation can source subsequent contributions.

5.3 Transfer value on entry

¹ If retirement benefits are insured under the SR, the insured person's transfer value from previous pension arrangements is added to his or her retirement assets on receipt.

² The deposit consists of retirement credits previously acquired within an extra-mandatory and/or elective pension scheme.

³ The same applies to the elective components of a transfer value that cannot be transferred to the registered BVG pension fund because of its pension plan (statutory minimum benefits).

5.4 Purchasing additional benefits

If retirement benefits are insured under the SR.

5.4.1 Purchasing benefits in accordance with the Pension Rules

- 1 Additional benefits may be purchased on becoming a member of the pension scheme with effect from the date of entry, and subsequently for as long as the insured person remains a member and no insured event has occurred. The purchase must take place before the insured person becomes entitled to retirement benefits.
- 2 A purchase is permissible only to the extent that retirement benefits under the applicable SR following the purchase, together with those paid under the AHV and other domestic insurance arrangements, do not exceed 85 percent of the last salary or income subject to the AHV prior to retirement between one and ten times the upper BVG limit.
- 3 The purchase is based on the current insured salary and the scale in the SR. Purchases are possible only if the insured person is gainfully employed. The maximum purchase amount, subject to paragraph 2 and the reduction in accordance with paragraph 4, is equivalent to the maximum permissible retirement assets (a function of the age of the insured person) at the end of the calendar year before the purchase, less the retirement assets already held for him or her at that time.
- 4 The maximum purchase amount is reduced:
 - a) by any vested benefits that the insured person did not have to transfer to the Foundation, plus
 - b) by any pillar 3a assets, to the extent that these exceed the total, increased by interest at the BVG minimum rates, of 8 percent per year of the upper BVG limit for the age of the insured person from 1 January after he or she reached the age of 24 (see the tied pillar 3a retirement assets restricting the purchase of additional benefits in Appendix 3), plus
 - c) by the retirement capital paid out in connection with early retirement by a pension provider or a vested-benefits institution
 - d) by the retirement assets held when the insured person begins to draw a retirement pension arising from early retirement in pillar 2.
- 5 If these contributions with the effect of reducing the purchase amount have already led to the reduction of the amount payable when purchasing additional benefits in another pension scheme, the Foundation may waive the reduction if the insured person supplies proof in the form of written confirmation of the purchase calculation from the other pension scheme.
- 6 If the insured person is a new arrival from abroad and has never been covered by pension arrangements in Switzerland, the maximum annual purchase amount in the five years following his or her first entry into pension arrangements in Switzerland is limited to 20 percent of his or her insured salary.

- 7 When applying to purchase additional benefits, the insured person must notify the Foundation of when he or she first entered into pension arrangements in Switzerland.
- 8 A direct transfer of pension assets from another country's occupational benefits plan to the Foundation is possible, provided that
 - a corresponding agreement is concluded between the Foundation and the foreign institution, and
 - the insured person does not claim a tax deduction for this transfer.
- 9 Each purchase is fixed in consultation with the insured person, taking account of his or her ability to work and the maximum as reduced in accordance with paragraphs 4 to 6. Persons drawing partial IV disability pensions can make purchases relating to the extent to which they are fit for work. As a general principle, the purchase amount thus determined is payable by the insured person, but all or part of it may also be contributed by the employer. The purchase takes legal effect only when it is received by the Foundation.
- 10 Any obligation on the part of the employer to provide standardised sums for purchases or for the provision of full pension benefits on early retirement must be explicitly stated in an additional Appendix to the SR.
- 11 Purchases are subject to the provisions on repurchases and purchases of elective benefits following a divorce.
- 12 Where purchases have been carried out, the resulting benefits cannot be drawn in lump-sum form within three years.
- 13 Where early withdrawals for home-ownership purposes have been made, the amounts involved must be repaid before voluntary purchases can take place.

5.4.2 Repurchase following pension settlements in the event of divorce

The details are covered in Appendix 8, "Provisions on pension settlements in the event of divorce".

5.5 Repayment of an early withdrawal

- 1 The full or partial repayment of an advance withdrawal as part of home-ownership promotion is possible at any time until the entitlement to retirement benefits takes effect, until another insured event occurs or until the insured person becomes entitled to the transfer value.
- 2 The repayment is used to increase retirement assets.
- 3 The amount of the repayment must be the proceeds of a disposal or, in other cases, at least CHF 10,000.

6. Final provisions

6.1 Participation in the profits from insurance contracts

- 1 The Foundation, as prescribed by law and the surplus allocation plan, is entitled to a share of Allianz Suisse Life's surplus in the occupational pension business.
- 2 Surpluses are determined by Allianz Suisse Life at the end of each calendar year in accordance with statutory provisions for the entire occupational pension business. In determining the allocation of surpluses a distinction is drawn as required by law between savings, risk and cost processes on the basis of the Allianz Suisse Life's occupational-pensions operating accounts. Surpluses are allocated to the groups of insured persons effective

1 January of the following year (the reference date) on the basis of the surplus allocation plan.

- 3 Surpluses as determined by the insurer are allocated to the legally prescribed purposes in line with the statutory minimum quota. To the extent that it does not have to be appropriated for legally prescribed purposes or, in accordance with the insurer's business plan approved by the responsible authority, to form reserves or to cover the costs of additional risk capital raised with official approval, the minimum quota serves to increase the surplus fund.

- ⁴ The profit participation is taken exclusively from the surplus fund formed by the insurer. The insurer must ensure that allocations to the surplus fund are distributed within a maximum of five years. Surpluses accumulated in the surplus fund are distributed annually, subject to alternative legal provisions, in accordance with recognised actuarial methods, but must not exceed two-thirds of the fund in a single year.
- ⁵ Surpluses are distributed to the groups of insured persons in particular in proportion to actuarial reserves, claims experience regarding the risks covered, administrative costs incurred, and other allocation criteria determined by the insurer. Allocation criteria and methods are set out in detail in the surplus allocation plan.
- ⁶ Surpluses are not allocated to the groups of insured persons until completion of the first insurance year. The surplus allocation takes place on a flat-rate basis per collective insurance contract, as a rule with effect from the following year's reference date.
- ⁷ How the surplus allocated to each contract is to be used is a matter for the Pension Commission to decide. Subject to any resolution by this body to the contrary, surpluses allocated to a contract can - provided that retirement benefits are insured - be credited to the insured persons' retirement assets if this was agreed in the collective insurance contract and the contract is still in force at the time of allocation. The Pension Commission determines what proportion of the amount is to be credited to the retirement assets of the individual insured persons.
- ⁸ Insured persons and pensioners are not entitled to any of the surpluses allocated to the pension scheme or their collective insurance contract unless these have been credited to the retirement assets of the insured persons or for increases in current pensions.
- ⁹ The insurer prepares an annual statement for each pension scheme showing the principles underlying the calculation and allocation of surpluses. The statement also contains information on the distribution of the surpluses allocated to the contract for the insured persons where these are credited to their retirement assets or appropriated as a deposit to increase the actuarial reserve for current pensions.
- ¹⁰ Pro-rata entitlements to surplus allocations for the year of annulment are based on Allianz Suisse Life's surplus allocation plan. The claim is deferred until Allianz Suisse Life has calculated the surpluses and decided on the distribution and allocation.

6.2 Free funds of the pension scheme

- ¹ Free funds are formed by voluntary contributions from the employer, yields on assets, insurance benefits that cannot be paid out and the profit participation allocated to the groups of insured persons from the insurance contracts concluded for the account of the pension schemes. They have been allocated by the Pension Commission to the pension scheme's free Foundation assets with or without a designated purpose, or the Pension Commission may not yet have decided on their appropriation.
- ² The Pension Commission decides on the appropriation of free funds in accordance with the purpose described in the GTC. Any voluntary distribution to insured persons and pensioners to increase their retirement assets and pensions is made in accordance with the procedure specified in Appendix 4.

6.3 Partial or total liquidation

The details are covered in the Partial Liquidation Regulations (Appendix 6).

6.4 Consequences of the annulment of the contract

- ¹ With the annulment of the enrolment on which the insured persons' pension and insurance arrangements are based, the collective insurance contract is also annulled. Insurance cover in accordance with the applicable SR also ceases with effect from the date of annulment (effective date), subject to the following provisions or any agreements to the contrary.
- ² If the enrolment is annulled, the insured persons (those who are fit to work and those who are unfit to work), the partially disabled and the partially retired persons shall be affected by the loss of insurance cover in relation to the active portion of their policies, as well as the fully and partially disabled persons who have not reached normal retirement age in relation to the pension portion of their policies.
- ³ Full retirees and recipients of survivors' pensions shall remain part of the Foundation, as shall partial retirees in relation to the pension portion of their policies.
- ⁴ The employer may not terminate the enrolment if the new pension provider refuses to take on the recipients of disability pensions.
- ⁵ The employer and the Pension Commission are obliged to reach a joint, timely and binding arrangement on the taking over of pension benefits by the new pension provider so that pensioners who do not remain with the Foundation do not experience an interruption in pension payments.
- ⁶ If the enrolment is terminated by the Foundation and the new pension provider does not take on the recipients of disability pensions, they shall also remain with the Foundation in relation to the pension portion of their policies.
- ⁷ Contrary to the above provisions, the Foundation may reach an agreement with the new pension provider as to whether individual groups or the entire group of pensioners shall transfer to the new pension provider. Agreements between the Foundation and the new pension provider require the approval of Allianz Suisse Life.
- ⁸ In other cases, the insured persons' and pensioners' corresponding pension claims (settlement values) shall be guaranteed in a legally acceptable form.
- ⁹ When pensioners remain with the Foundation, the enrolment and the collective insurance contract in respect of the pensioners shall remain in force until their pension entitlements terminate. A lump sum shall be charged to the premium account for future statutory contributions to the security fund and invoiced to the employer.
- ¹⁰ Upon annulment of the enrolment, the settlement value shall be payable for the annulled insurance policies. The settlement value is determined taking effective contract term into account and applying the rules for calculating settlement values upon cancellation of contract based on Allianz Suisse Life's actuarial principles and approved by the competent supervisory authority, all in accordance with the General Terms and Conditions for Collective Life Insurance in Supplementary Occupational Pensions outside the scope of the BVG (GTC SP) together with their technical appendix. The settlement value is calculated on the basis of the technical reserves accrued under the insurance at this point in time.

If the annulled enrolment lasted fewer than five years, a deduction will be applied to the calculated value for interest rate risk.

- ¹¹ Settlement values are transferred to the new pension provider as capital. The Foundation is entitled to make payments on account to the new pension provider and to deduct any pensions paid out for periods extending beyond the effective annulment date.
- ¹² Pension assets transferred from previous insurance providers are also passed on in accordance with the rules applicable to settlement values.
- ¹³ If the employer has fulfilled all its obligations and the Foundation is late in transferring the settlement values of the persons who are fit for work, it shall be liable to pay default interest on these assets. The interest rate shall be in line with sector agreements and recommendations if these are also acceptable to the new pension provider's insurer. Otherwise it is equal to the rate applied by the Foundation at the time of annulment to interest-bearing retirement assets.
- ¹⁴ The settlement values for persons unfit for work and for current contribution waiver and/or pension obligations are subject to interest only if expressly provided in the takeover agreement by the new pension provider and if Allianz Suisse Life expressly consents to such arrangements.

6.5 Omissions in the Pension Rules

Where the Pension Rules contain no relevant provisions, other occupational pension regulations apply (BVG, OR, FZG, Directive etc.). In other cases the Board of Trustees of the Foundation designs a provision in keeping with the purpose of the Foundation and the concept of pension provision.

6.6 Changes to the Pension Rules

- ¹ The Board of Trustees may amend the GTC and the SR at any time in compliance with the applicable legal provisions and the Foundation Deed.
- ² The Pension Commission can at any time amend the SR within the powers held by it by virtue of the Organisational Regulations of the Foundation in consultation with Allianz Suisse Life. Changes come into force at least 30 days after the consent of the Board of Trustees is obtained, if this is required in accordance with the Organisational Regulations of the Foundation.
- ³ Changes to these GTC fall exclusively within the competence of the Board of Trustees. They are based on a decision by the Board of Trustees following a preliminary examination by the relevant supervisory authority.
- ⁴ Changes to the GTC and the SR, subject to any provisions to the contrary, apply only to insured events occurring after the date on which they come into force.

6.7 Place of performance and jurisdiction

- ¹ The place of fulfilment for benefits is the Swiss place of residence of the beneficiary, or failing that, the place of residence of his or her proxy in Switzerland, or failing that, the registered office of the Foundation.
- ² In the event of well-founded doubts as to potential beneficiaries, the Foundation may deposit payable benefits at its registered office.
- ³ The place of jurisdiction is the Swiss registered office or place of residence of the defendant or the location of the insured person's employer.

6.8 Authoritative version of the Pension Rules

- ¹ The GTC and the SR apply as amended.
- ² The language version of the GTC and the SR determined upon the employer's enrolment with the Foundation is authoritative.

6.9 Transitional provisions

When the SR and the GTC come into force they supersede or replace existing regulatory principles, subject to the following provisions:

6.9.1 Transitional provision for current retirement and survivors' pensions, pending disability cases and current disability pensions for which the previously valid regulations remain partially or totally applicable.

¹ Retirement and survivors' pensions that are current when these regulations come into effect are governed by the provisions of the regulations previously valid for these pensions until they cease to apply.

² Disability cases pending when these regulations come into effect where

- a) the commencement of pension payments has been postponed because a salary or a replacement salary continues to be paid are determined by the provisions of these regulations which were valid when the entitlement to a pension began;
- b) no pension is paid because of overcompensation are determined by the provisions of these regulations which were valid when the entitlement to a pension began;
- c) the waiting period (under the previously valid regulations) has already begun and will not end until after the new regulations enter into force are determined by the provisions of these regulations which were valid when the waiting period began.

³ Disability pensions that are current when these regulations come into force are governed by the provisions of the regulations previously valid for these pensions until they cease.

⁴ Notwithstanding the foregoing paragraphs, the provisions in connection with the 6th Disability Insurance Revision, which came into force on 1.1.2012 and are shown in Appendix 7, shall apply to the disability pensions already being paid on 1.1.2012, and when more than one benefit is payable, the coordination provisions that apply are always those of the regulations valid at the time when the question of coordination arises.

⁵ If retirement assets were insured under the SR, the passive component of the retirement assets of partially disabled persons is maintained on the basis of last insured salary before the onset of incapacity, which is adjusted in accordance with the benefit entitlement scale for current disability pensions.

6.9.2 transitional provisions under the first BVG amendment

¹ Subject to the following arrangements pursuant to clauses a) and b), disability pensions that were current on 1 January 2005 are governed by the provisions of the regulations previously valid for these pensions until they cease.

- a) If the degree of disability has increased since 1 January 2005 to the extent that it affects the pension, the disability pension calculated in accordance with the previously valid regulations is payable in accordance with the benefit entitlement scale in Section 4.4.2 paragraph 3.

If the degree of disability falls after these regulations come into force to the extent that the pension would be affected, the benefit entitlement scale under the previously valid regulations remains applicable.

- b) If the regulations formerly valid for these pensions provide that they cease when the insured person reaches the normal retirement age, the following applies:
 - I Disability pensions already being paid as at 1 January 2005 cease when the recipient reaches the normal retirement age specified in the regulations that were formerly valid.
 - II If retirement benefits are insured, these are paid when the insured person reaches the normal retirement age specified in the regulations that were formerly valid.

III The calculation of these retirement benefits is based on the retirement assets available on reaching normal retirement age as per II above, calculated from 1.1.2005 with the retirement credits specified in the regulations previously valid for these pensions and corresponding to the benefit entitlement scale for current disability pensions, and the coordinated salary on which the calculation of the current disability pension was based.

² The provisions of paragraph 1 also apply to cases of disability in which at the time when the new regulations come into force the commencement of pension payments has been postponed because salary or a replacement salary continues to be paid, no pension is paid because of overcompensation, or the waiting period under the previously valid regulations has commenced and will not expire until after the new regulations have come into force.

³ If in cases where the incapacity leading to disability occurred before 1 January 2005 but the entitlement to a disability pension arose after 31 December 2004, the benefit entitlement scale in Section 4.3.2 paragraph 3 is applied.

⁴ If the entitlement to a survivor's or disability pension arises after 31 December 2004 and the salary on which its calculation is based according to the regulations was before 1 January 2005, this salary is not adjusted.

⁵ If a disability or retirement pension that is current when these regulations come into force ceases on the death of the recipient, survivors' benefits conform to the provisions of the regulations by which the current pensions were previously governed.

⁶ Notwithstanding the foregoing paragraphs, the coordination provisions that apply when more than one benefit is payable are always those of the regulations valid at the time when the question of coordination arises.

6.9.3 Transitional provision for the purchase of additional benefits

Section 5.4.1 paragraphs 5 and 6 only apply to persons joining the Foundation after 31 December 2005.

6.9.4 Transitional provision for the maximum insured annual salary

The restriction of the insured annual salary to ten times the upper BVG limit (10 x 300 percent of the maximum AHV retirement pension) does not apply to persons who have reached the age of 50 and were already insured with the Foundation on 1.1.2006 in respect of the death and disability cover in force at that time.

6.9.5 Transitional provision on the adjustment of the coordination deduction in the event of partial retirement

Unless the SR contain a provision to the contrary for partially retired persons, the salary reduced due to partial retirement continues to be insured with the coordination deduction being adjusted accordingly.

6.10 Entry into force

¹ This version of the GTC comes into force on 1 January 2019, subject to any resolution to the contrary by the Board of Trustees.

² If individual provisions of these GTC amended as of 1 January 2019 are not to apply to current contracts, this will be expressly stated in the SR for these contracts.