

Broker Supplemental Compensation Plan

Brokers with \$15 million to < \$50 million of inforce premium

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Introduction



With four generations in the workforce and increasing competition to attract and retain top talent, your clients rely on your strategic guidance more than ever. Count on our wide range of proven benefit solutions, 100 years of experience, and forward-thinking insights to help you and your clients navigate the changing needs of today's workforce. We remain committed to collaborating with you to strengthen client relationships.

Designed to recognize new and long-standing business relationships, MetLife is pleased to present the 2024 Supplemental Compensation Plan.¹ The plan pays qualifying brokers a percentage of 2024 Received and Earned Premium. All appropriately licensed and appointed brokers are offered the Supplemental Compensation Plan.²

This brochure provides details about how brokers can qualify and how Supplemental Compensation will be paid. It is available at www.metlife.com/business-and-brokers/broker-resources/broker-compensation.

The terms and conditions of the Supplemental Compensation Plan are described in this brochure. MetLife has the sole discretion to interpret the terms and conditions of the Supplemental Compensation Plan.

If you have any questions, please contact your Account Executive. If your clients have questions regarding broker compensation, they may call (800) ASK-4MET. You can always find more information about our products and the sales office near you by visiting our **Web site**, www.metlife.com.

1. The 2024 Supplemental Compensation Plan shall be referred to in this brochure as the "Supplemental Compensation Plan." Payments under the Supplemental Compensation Plan shall be referred to in this brochure as "Supplemental Compensation."
2. By accepting any payment under the 2024 Supplemental Compensation Plan, the Broker attests that it is an independent contractor (as such term is defined in Treasury Regulation Section 1.409A-1(f)(2)) with respect to MetLife, and acknowledges that it is solely responsible for payment of all taxes related to any payment from the 2024 Supplemental Compensation Plan. The Broker also releases (to the extent permitted by law) MetLife from any and all responsibility for payment of any and all taxes related to any payment from the 2024 Supplemental Compensation Plan, including, if applicable, any interest or penalties that may be imposed under statutes, regulations, orders, or rulings governing the taxation of deferred compensation, including but not limited to Section 409A of the Internal Revenue Code.

Overview

A broker may qualify for Supplemental Compensation based on the following criteria^{3,4} and detailed in the tables below:

- (1) Inforce premium^{5,6,7} of \$15,000,000 up to \$49,999,999 as of October 1, 2023
- (2) New business (New Business Premium or New Business Coverage Groupings) between January 1, 2024 and December 31, 2024 (the "Qualification Period")
- (3) Year End Persistency

New Business Qualification

A broker may qualify for New Business Supplemental Compensation based on the criteria in the table below:

Annualized New Business Premium Criteria		New Business Coverage Groupings	Supplemental Compensation Level
≥ \$2,500,000	OR	≥ 60	Gold
\$2,000,000 – \$2,499,999		50 – 59	Silver
\$1,500,000 – \$1,999,999		40 – 49	Bronze

A broker who qualifies for the New Business Supplemental Compensation is eligible to be paid based on the table below:

New Business Premium	Gold	Silver	Bronze
First \$50,000	6.00%	4.00%	3.00%
Next \$75,000	3.50%	3.00%	2.50%
Next \$100,000	2.50%	2.00%	1.50%
Over \$225,000	1.25%	1.00%	0.75%

3. In certain circumstances, MetLife may set the Supplemental Compensation percentages and the qualification criteria set forth in this brochure will not apply.

4. For purposes of determining which of the 2024 Supplemental Compensation Programs a broker will qualify under, inforce premium is determined as of October 1, 2023, including New Business Premium with effective dates on or before October 1, 2023. However, MetLife may in its sole discretion, determine annualized inforce premium at the end of the Qualification Period for certain brokers based on changes in inforce premium during the Qualification Period.

5. MetLife may in its discretion aggregate affiliated Tax ID's for qualification while applying payment to the individual Tax ID's, if requested to do so by the broker. A request to aggregate must be submitted no later than October 1, 2023. After this date, MetLife may in its discretion consider requests to aggregate Tax ID's if a merger or acquisition occurs among firms before September 30, 2024, or under other circumstances that MetLife deems appropriate due to activity that occurred during the Qualification Period. MetLife may, in its discretion, allow a Tax ID to de-aggregate based on a firm's business alignment for qualification purposes instead of at the Tax ID level. These requests are only considered for distinct business models within a single Tax ID. Any such request must be submitted no later than March 1, 2024. After that date, MetLife may, in its discretion, consider requests to de-aggregate in situations where MetLife deems appropriate due to activity that occurred during the Qualification Period.

6. If the Broker of Record is merged with another broker, or otherwise legally consolidates multiple Tax IDs, and submits both written notice of the transaction and a broker change request to MetLife by October 1, 2024, MetLife will combine the inforce premium as of October 1, 2023 to redetermine which of the 2024 Supplemental Compensation Programs the consolidated entity will qualify under. If notice of the transaction and broker change request is submitted after October 1, 2024, but no later than December 1, 2024, the qualification tier for the consolidated entity will be that of the acquiring broker prior to the transaction.

7. If two or more firms merge prior to the Qualification Period and this results in an increase of 50% or more of the acquiring firm's inforce block of business with MetLife, MetLife reserves the right to remove the combined firms from the 2024 Supplemental Compensation Plan program.

Persistency Qualification

Brokers may qualify for Persistency Business Supplemental Compensation based on the criteria outlined in the table below:

Year End Persistency Criteria	Renewal Supplemental Compensation Rate
≥ 91.0%	2.00%
87.0% – 90.9%	1.50%
84.0% – 86.9%	1.00%

In addition to the table above, a broker with a minimum of \$250,000 of inforce voluntary product premiums as of October 1, 2023, may be eligible for an increase or a reduction in their Renewal Supplemental Compensation Rate based on the criteria below:

Voluntary Products Year End Persistency Criteria	Renewal Supplemental Compensation Rate Adjustment
≥ 97.0%	+ 0.10%
93.0% – 96.9%	No Change
0.0% – 92.9%	- 0.10%

Payment for New Business and Persistency Supplemental Compensation Rates

Payment is calculated based on 2024 Received and Earned Premium. The New Business Supplemental Compensation Rate is a declining scale and as a customer's Received and Earned Premium accumulates, the compensation MetLife pays moves down the scale. The New Business Supplemental Compensation Rate will be applied to New Business Premium. The Renewal Business Supplemental Compensation Rate is a flat rate and will be applied to Renewal Business Premium. Payment will be made by March 15, 2025 in one lump sum. MetLife reserves the right to adjust the timing of all Supplemental Compensation payments. (See Payment Capping details on page 11).

Platinum Tier Qualification and Payment — Eligible for an additional 1.00%

A broker may also qualify for an additional Platinum Tier Supplemental Compensation based on the criteria in the table below:

Qualification				Payment
Annualized New Business Premium		New Business Coverage Groupings	Year End Persistency	New and Renewal Business Platinum Supplemental Compensation Rate
≥ \$2,500,000	OR	≥ 60	AND ≥ 93.0%	1.00%

Payment is calculated based on 2024 Received and Earned Premium. The payment rate will be applied to New Business and Renewal Business Premium. The maximum Platinum Tier Supplemental Compensation payment amount is \$175,000 per broker. Payment will be made by March 15, 2025 in one lump sum. MetLife reserves the right to adjust the timing of all Supplemental Compensation payments.

Large Customer New Business Compensation Qualification and Payment

A broker may also qualify for an additional Large Customer New Business Compensation. A broker must first meet the New Business Qualification for Supplemental Compensation to be eligible and will be paid based on the criteria in the table below:

Qualification	Payment
Annualized New Business Premium	
\$2,000,000 – \$2,999,999	\$15,000
\$3,000,000 – \$3,999,999	\$20,000
\$4,000,000 – \$4,999,999	\$25,000
\$5,000,000 – \$5,999,999	\$30,000
\$6,000,000 – \$6,999,999	\$35,000
\$7,000,000 – \$7,999,999	\$40,000
\$8,000,000 – \$8,999,999	\$45,000
≥ \$9,000,000	\$50,000

The annualized New Business Premium is per customer. While a broker can receive multiple payments, the maximum Large Customer New Business Compensation payment amount any broker can receive in total is \$50,000 per broker. Payment will be made by March 15, 2025 in one lump sum. MetLife reserves the right to adjust the timing of all Supplemental Compensation payments. This payment is in addition to any other broker payment caps outlined in the definition section of this brochure.

Eligible group products and services

There are a number of different group products and services marketed by MetLife for which a broker is eligible to earn Supplemental Compensation. For qualification and payment purposes, coverages must have a minimum of two eligible lives. The products and services fall into the following Coverage Groupings:

Core Products

Coverage Grouping 1

- Basic Life, Core Life, Dependent Life, Accidental Death & Dismemberment ("AD&D") both personal and dependent

Coverage Grouping 2

- Optional Group Term (Supplemental Life), Voluntary AD&D both personal and dependent, Optional Life/AD&D, Buy-Up Life, Buy-Up AD&D, Survivor Income Benefit

Coverage Grouping 3

- Group Universal Life – cost of insurance only

Coverage Grouping 4

- Group Variable Universal Life – cost of insurance only[†]

Coverage Grouping 5

- Dental*, Voluntary Dental

Coverage Grouping 6

- Short Term Disability ("STD")*, Voluntary STD, Mandated State Disability Plans, Paid Family Leave (PFL), Paid Medical Leave (PML)

Coverage Grouping 7

- Long Term Disability ("LTD")*, Voluntary LTD

Coverage Grouping 8

- Vision^{9,10}, Voluntary Vision

Voluntary Products

Coverage Grouping 9

- Hospital Indemnity Insurance, Accident Insurance, Cancer Insurance, Critical Illness

Coverage Grouping 10

- Worksite STD, MetLife Legal Plans¹¹, Whole Life¹², Identity & Fraud Protection powered by Aura¹³, Health Savings & Spending Accounts¹⁴

[†] Only a registered broker-dealer may receive qualification credit and Supplemental Compensation for the sale of Group Variable Universal Life.

* Administrative Services Only ("ASO") business may be included only in Coverage Groupings 5, 6 and 7.

Coverages Eligible for Payment Only

The following coverages are included for Supplemental Compensation payment purposes but excluded for qualification:

- Texas Life Whole Life¹⁵
- MetLife TakeAlong DentalSM

Excluded Products

Any products or services not specifically included in the above section are excluded from the Supplemental Compensation Plan, and therefore will not be counted for qualification purposes, nor will a broker receive Supplemental Compensation on the premium or fees relating to those products. Products or services sold to customers whose situs is outside the United States and its territories are excluded.

8. Premium received for GVUL coverage which has been ported or for which a conversion right has otherwise been exercised is ineligible for qualification and payment on MetLife's supplemental compensation plans.
9. Safeguard Vision cases and other cases issued by companies other than Metropolitan Life Insurance Company are excluded from Supplemental Compensation for qualification and payment.
10. Inforce coverages that are issued by Metropolitan Insurance Company and are administered or were previously administered by Davis Vision, Inc. or Superior Vision, Inc. are eligible for Supplemental Compensation for payment only. New business coverages that are issued by Metropolitan Life Insurance Company and not otherwise payable on policies administered by Davis Vision, Inc. or Superior Vision, Inc. are eligible for qualification and payment.
11. MetLife Legal Plans is excluded for qualification and payment for customers with less than 100 employees.
12. Products issued by Metropolitan Life Insurance Company or Metropolitan Tower Life Insurance Company.
13. Aura is a product of Aura Sub, LLC. Aura Sub, LLC is not affiliated with MetLife, and the services and benefits they provide are separate and apart from any MetLife product. As a component of becoming an Aura member, Consumers receive identity theft insurance through a group policy issued to Aura. Identity Theft Insurance underwritten by insurance company subsidiaries or affiliates of American International Group, Inc. American International Group, Inc. is not an affiliate or subsidiary of MetLife and MetLife does not issue or underwrite this policy.
14. Products issued by MetLife Consumer Services, Inc. Account assets associated with this product are excluded from qualification and payment, only service fees qualify.
15. Texas Life Whole Life Insurance is underwritten by Texas Life Insurance Company, 900 Washington Avenue, Waco, Texas. Texas Life is not affiliated with Metropolitan Life Insurance Company or its affiliates.

Additional opportunities to earn Supplemental Compensation

A broker may earn Supplemental Compensation for the following additional opportunities as follows:

Post-retirement benefit & reserve buy-outs		
Additional opportunities	Supplemental Compensation percentages	Payment cap
General Account Life Insurance Fund Account ("GA LIFA")	0.50%	\$500,000
Guaranteed Life Insurance Fund Account ("GLIFA")	0.50%	\$500,000
Long Term Disability Reserve Buy-out ("LTD RBO")	0.25%	\$ 100,000

Supplemental Compensation will be paid in an amount equal to 0.50% of new assets for a GA LIFA or GLIFA, provided the new assets are from a source other than MetLife or its affiliates. Supplemental Compensation will be paid only to one broker with regard to new GA LIFA or GLIFA assets. For example, should the Broker of Record change after Supplemental Compensation is paid on new GA LIFA or GLIFA assets, Supplemental Compensation will not be paid to the new Broker of Record unless additional new assets are deposited, in which case Supplemental Compensation will only be paid to the new Broker of Record on the additional new assets. Supplemental Compensation will not be paid on GA LIFA or GLIFA in excess of \$500,000 per customer. Separate caps apply to assets for each of GA LIFA and GLIFA.

For an LTD RBO, Supplemental Compensation will be paid in an amount equal to 0.25% of the reserve assets; Supplemental Compensation will not be paid on LTD RBO of more than \$100,000 per customer.

GA LIFA and GLIFA assets and LTD RBO reserve assets will not count towards New Business Supplemental Compensation or Persistency Supplemental Compensation for qualification purposes and inforce premium. In addition, the Supplemental Compensation percentages for the New Business and the Persistency qualification do not apply to assets for GA LIFA and GLIFA or reserve assets for LTD RBO.

Supplemental Compensation for these products will be paid in one lump sum by March 15, 2025 based on the receipt of the assets associated with those products.

Guidelines

General Program Guidelines

Amendments

The terms and conditions set forth in this brochure govern the Supplemental Compensation Plan. MetLife reserves the right to change the terms of the Supplemental Compensation Plan and discontinue the sale of any product. There will be no changes to the Supplemental Compensation Plan unless set forth in writing approved by an Executive Vice President. Changes to the Supplemental Compensation Plan will be posted on www.metlife.com/brokercompensation.

Contacting MetLife

Your representative is available to answer any questions. You may also contact our dedicated Service Center at the e-mail or address below.

When contacting MetLife by e-mail, please state the topic of your request in the subject line and include pertinent details in the body of the message. Information needed to respond to your request may include the broker's name, address, e-mail address, phone number, broker code, customer name and coverages.

E-mail: ins_compensation_inquiries@metlife.com

Mail to: MetLife
P.O. Box 30160
Tampa, FL 33630

Disclosure

MetLife reserves the right to notify its customers of a broker's eligibility to receive compensation under the Supplemental Compensation Plan and the amount of any payment made or to be made, and to obtain written customer authorization prior to making any payment. Certain customer and prospect communications will include a compensation notice explaining to customers and prospects how brokers are compensated. MetLife will send to all group insurance customers an annual statement indicating all compensation paid to the customer's Broker of Record in the prior year. Working with MetLife, you can be assured of its commitment to disclosure of information about its compensation plans to customers and potential customers.

Important Dates

Qualification Period

New business with effective dates between January 1, 2024 and December 31, 2024.

Inforce Premium as of December 31, 2023 and Inforce Premium as of December 31, 2024, will be used as part of the Persistency calculation.

Customer Authorization Form

Must be completed and received by MetLife by February, 2025 – to be counted for qualification.

If it is received by MetLife after February, 2025 – will apply to payment only. Payment cannot be made until receipt of signed Customer Authorization Form.

Notification of Qualification

Estimate of qualification – intended to be mailed in December 2024 to brokers qualifying for 2024 Supplemental Compensation Plan.

Broker book of business corrections – due to MetLife by January 15, 2025. MetLife may, in its discretion, consider changes received after this date in unique situations.

Official notification of qualification – mailed in February 2025 to brokers qualifying for 2024 Supplemental Compensation Plan.

Payment and Timing

Payment will be based on 2024 Received and Earned Premium received by February, 2025. All Supplemental Compensation payments will be made by March 15, 2025.

MetLife reserves the right to adjust the timing of all Supplemental Compensation payments.

Licensing and Appointment

In order to be eligible for qualification and payment under the Supplemental Compensation Plan, the broker must be appropriately licensed and appointed and comply with all applicable laws and regulations, including without limitation, those that apply to disclosure of compensation.

Pricing

The cost of Supplemental Compensation is not directly charged to the price of our products except as an allocation of overhead expense, which is applied to all eligible group insurance products, whether or not Supplemental Compensation is paid in relation to a particular sale or renewal.

Qualification Guidelines

ASO / Participating (“PAR”)

For ASO and PAR customers/coverages, MetLife will apply the full ASO fee or the PAR premium amount towards qualification.

Broker of Record

The Broker of Record on the effective date of the qualifying new business sold during the Qualification Period will receive qualification credit for annualized New Business Premium and New Business Coverage Grouping count; there is no prorating of the qualification credit. A customer's coverage must be in force at the end of the Qualification Period in order to be counted towards qualification for New Business.

Where there is a Broker of Record change on inforce business during the Qualification Period, such business is excluded from qualification for Persistency.

Brokers splitting / deal %

If two or more brokers split base compensation, the New Business Premium will be apportioned. This apportionment will be the same as the base compensation apportionment.¹⁶

Coverage Grouping Count

Coverage Grouping counts are determined at the customer number level. For a given customer number, a broker will receive a single Coverage Grouping count for each Core new business product in a Coverage Grouping in the first plan year only and will receive a single Coverage Grouping count each plan year when a new Voluntary Coverage is added.

Opting out

All premium on qualifying business is counted for qualification purposes. However, if a customer chooses to Opt-out of the Supplemental Compensation Plan, no Supplemental Compensation will be paid in relation to that customer's premium.

¹⁶ MetLife may in its discretion allow the apportionment of Supplemental Compensation to be different than the apportionment of base compensation, if requested to do so by the broker.

Guidelines (continued)

Payment Guidelines

Advances

No Supplemental Compensation payments shall be made in advance of when they are due under the Supplemental Compensation Plan, unless specifically agreed to in writing by MetLife, in MetLife's sole discretion.

ASO / PAR Customers

ASO fees and PAR premium are reduced to 25% of the actual ASO fees and PAR premium prior to applying the applicable Supplemental Compensation percentage.

Brokers splitting / deal %

Received and Earned Premium shall follow the apportionment designated on the brokers' commission agreement.¹⁶

Broker of Record

Supplemental Compensation shall be earned by the Broker of Record only so long as the premium is deemed to be Received and Earned Premium, and provided MetLife and the customers continue to recognize the broker as the Broker of Record for the Bill Date during the Qualification Period.

Capping

MetLife will pay a broker a maximum of \$800,000 (the "Cap") of total Supplemental Compensation per customer (See Guidelines — Payment and Timing). The Cap is based on a maximum of \$200,000 for the total amount of Supplemental Compensation for New Business core product coverages, \$200,000 for the total amount of Renewal Business core product coverages, \$200,000 for the total amount of New Business voluntary product coverages, and \$200,000 for the total amount of Renewal Business voluntary product coverages (See page 7 for product coverages).

If more than one broker is eligible for Supplemental Compensation with respect to one customer and Supplemental Compensation is more than \$800,000, MetLife may apply the Cap or Caps per customer for each broker so long as the brokers are not affiliated or under common ownership or control. MetLife may, in its sole discretion, determine when a broker has an affiliation or common ownership with another broker. MetLife reserves the right to determine in its sole discretion how the Caps are applied.¹⁷

If a customer acquires another company that does not have eligible group products prior to the acquisition, MetLife will treat the existing customer and the acquired company as separate companies for purposes of applying the Cap or Caps under the 2024 Supplemental Compensation Plan.

MetLife reserves the right to consider the customer and the acquired company to be one customer in relation to any future Supplemental Compensation Plans.

Notwithstanding any of the other provisions in this section, MetLife reserves the right to apply the Cap or Caps in instances where customers are deemed by MetLife in its sole discretion, to be affiliated or under common ownership.

Customer Authorization

MetLife reserves the right to obtain written customer authorization before making any Supplemental Compensation payment.

Overpayments

The broker shall immediately return any overpayment of Supplemental Compensation. Any Supplemental Compensation paid to a broker that is not earned by the broker shall be immediately returned and MetLife reserves the right to offset any funds payable by a broker against any funds payable to the broker. By cashing any check or otherwise accepting any payment, including any Supplemental Compensation payment, the broker thereby agrees that MetLife may offset any funds payable to the broker in order to recover an overpayment or any other funds payable by the broker.

Primary Payee

In instances where multiple payee codes exist for a single Tax ID, MetLife will require a duly authorized representative of the broker to designate in writing a primary payee. When a primary payee is designated, it will remain in effect until MetLife receives and approves a written change request.

¹⁷ Furthermore, as it pertains to our customer capping rules with existing or new life coverages, multiple brokers may not support more than one life coverage to trigger an additional Supplemental Compensation payments that exceed what a single broker could be paid on an individual customer (Includes Basic Life, Core Life, Dependent Life, Optional Group Term, Supplemental Life, Optional Life/AD&D, Buy-Up Life).

Definitions

In addition to the defined terms below, some terms may be defined where they first appear in this brochure.

1. **“Annualized Billed Premium”** – the last billed premium earned and received in good order at the end of the Qualification Period is then used to calculate an annual premium amount.
2. **“Bill Date”** – Billing due date for the premium of the customer.
3. **“Broker of Record”** – the broker recognized, by both the customer and MetLife, to service the customer's eligible group insurance coverage.
4. **“Coverage Grouping”** – one or more coverages or group products or services marketed by MetLife that are eligible for qualification and payment under the Supplemental Compensation Plan. MetLife may, in its sole discretion, defer Coverage Grouping count qualification to the following year's Supplemental Compensation Plan.
5. **“Division Number” and “Experience Number”** – terms used internally. A Division Number or Experience Number may be used to identify sub-groups within a customer. For example, a customer may choose to have one sub-group of its employees covered for basic life insurance benefits under one Experience Number and another sub-group of its employees covered for basic life insurance benefits under a different Experience Number. MetLife reserves the right to determine in its sole discretion whether to permit multiple Division Numbers or Experience Numbers under one customer.
6. **“Inforce Premium”** – the Annualized Billed Premium for customers whose group coverages are in force as of the calculation date, but excluding coverage(s) effective on or after January 1, 2024 unless otherwise noted. For purposes of determining Inforce Premium, MetLife includes all customers of the Broker, including customers with Zero Commission Coverages and Opt-out customer.
7. **“New Business Premium”** – New Business Premium is Annualized Billed Premium for new coverages with an effective date during the Qualification Period. For payment purposes, New Business Premium is Received and Earned Premium credited to a billing cycle that occurs during the first twelve (12) months following the coverage effective date for the 2024 Supplemental Compensation Program year. MetLife may, in its sole discretion, defer New Business Premium qualification to the following year's Supplemental Compensation Plan.
8. **“Opt-out”** – the act of electing to exclude a broker's Tax ID, customer, Division Number, Experience Number and/or Coverage Grouping from participating in the Supplemental Compensation Plan. This can be accomplished by contacting the Broker Service Center.
9. **“Received and Earned Premium”** – the premium paid by a customer and allocated by MetLife to loss experience, expense and profit for the customer's case, and used to calculate base compensation.
10. **“Renewal Business Premium”** – Premium received by MetLife to credit a billing cycle that occurs after the first twelve (12) months following the coverage effective date. For payment purposes, Renewal Business Premium is Received and Earned Premium credited to a billing cycle that is not considered New Business Premium for the 2024 Supplemental Compensation Program Year.
11. **“Tax ID”** – an individual's social security number or a firm's taxpayer identification number.
12. **“Year End Persistency”** – Persistency is calculated by dividing the Core and Voluntary Products (See page 7 for product coverages) Inforce Premium as of December 31, 2024 for customer coverages for which a broker is Broker of Record by the Inforce Premium as of December 31, 2023 for the same coverages. The persistency calculation utilizes only the premiums associated with the inforce coverages in effect on December 31, 2023. Coverage(s) effective on or after January 1, 2024 will be excluded. Coverages that cancel on December 31, 2023 or January 1, 2024 will impact 2024 Persistency qualification. Coverages for which there is a Broker of Record change during the Qualification Period will be excluded from the calculation. For purposes of calculating a broker's persistency, MetLife includes all customers of the broker, including customers with Zero Commission Coverage and Opt-out customers. For qualification purposes and upon notification by the Broker of Record, a conversion from insured to ASO will be excluded from the persistency calculation and a conversion from ASO to insured will be included in the persistency calculation. Upon notification and MetLife's validation of the situation, coverage cancellations due to bankruptcy or acquisition where the acquiring customer was not inforce with MetLife at the time of acquisition, may be considered for exclusion from broker's persistency calculation for qualification purposes only. The persistency calculation will utilize a premium cap for each customer of \$500,000 for Dental and \$250,000 for each of the other coverages.
13. **“Voluntary Products Year End Persistency”** – Voluntary Product (See page 7 for product coverages) Persistency is calculated by dividing the Inforce Premium as of December 31, 2024 for Voluntary Product customer coverages for which a broker is Broker of Record by the Inforce Premium as of December 31, 2023 for the same Voluntary Product coverages. The persistency calculation utilizes only the premiums associated with the Voluntary Product inforce coverages in effect on December 31, 2023.

Voluntary Product Coverage(s) effective on or after January 1, 2024 will be excluded. Voluntary Product Coverages that cancel on December 31, 2023 or January 1, 2024 will impact the 2024 Voluntary Product Persistency qualification. Voluntary Product Coverages for which there is a Broker of Record change during the Qualification Period will be excluded from the calculation. For purposes of calculating a broker's Voluntary Product persistency, MetLife includes all customers of the broker, including customers with Zero Commission Coverage and Opt-out customers. For qualification purposes and upon notification by the Broker of Record, a conversion from insured to ASO will be excluded from the Voluntary Product persistency calculation and a conversion from ASO to insured will be included in the persistency calculation. Upon notification and MetLife's validation of the situation, coverage cancellations due to bankruptcy or acquisition where the acquiring customer was not in force with MetLife at the time of acquisition, may be considered for exclusion from broker's persistency calculation for qualification purposes only. The Voluntary Product persistency calculation will utilize a premium cap for each customer of \$250,000 for each of the Voluntary Product coverages.

14. **"Zero Commission Coverage"** – group coverage where the Broker of Record is not receiving base compensation, whether or not MetLife or the customer pays any amount to that broker. Both the broker and customer must sign the Customer Authorization Form to include a Zero Commission Coverage in the Supplemental Compensation Plan for purposes of determining eligibility and Supplemental Compensation payable. Once a Customer Authorization Form is completed and submitted for the 2024 Supplemental Compensation Plan, it will remain in effect for subsequent supplemental and other additional compensation plans unless a customer notifies MetLife in writing of its intention to terminate the authorization.

Customer Authorization Form

MetLife requires customer consent by means of the Customer Authorization Form in order to include a Zero Commission Coverage for qualification and/or payment purposes.

Supplemental Compensation will only be paid on Zero Commission Coverages with an effective date on or after January 1, 2010, provided a Customer Authorization Form is received by February, 2025, and the broker is recognized as the Broker of Record as of the effective date of the coverage.

MetLife will accept a Customer Authorization Form and pay supplemental compensation for coverages with effective dates before January 1, 2010 under the following conditions:

1. A new Supplemental Compensation eligible group product for qualification (as defined on page 7) is added; or
2. An Auto and Home product¹⁸ is added; or
3. A qualifying re-enrollment campaign¹⁹ for existing coverages is implemented; or
4. A customer converts from ASO to non-participating Dental, STD or LTD insurance.

For previously excluded coverages (as described above) where no base commission had been payable or that had a base commission change, a signed Customer Authorization Form is required in order to be eligible for payment and qualification under the supplemental compensation plans.

Both the broker and customer must sign the Customer Authorization Form. MetLife reserves the right to exclude from its Supplemental Compensation Plans any business where a broker may have represented that broker compensation paid under their Supplemental Compensation Plans with respect to a customer's coverage will reduce the price or premium rates with respect to the customer's coverage.

If a customer submits a Customer Authorization Form for the 2024 Supplemental Compensation Plan, it will remain in effect for current or subsequent supplemental compensation plans, beginning with 2024 Supplemental Compensation, unless the customer notifies, in writing, of its intention to terminate authorization. In addition, if a Customer Authorization Form has been received for the

2010 – 2024 Supplemental Compensation Plans, it will remain in effect for current or subsequent supplemental compensation plans, unless the customer notifies MetLife, in writing, of its intention to terminate the authorization. Annual notices may be provided to customers who have submitted the Customer Authorization Form describing changes to its supplemental compensation plan from the prior year.

The customer may terminate the authorization at any time. Termination of the authorization will take effect within thirty (30) days after notification is received and no payments in relation to that customer's premium will be made thereafter under any supplemental compensation plan.

The Customer Authorization Form must be completed and submitted via U.S. Mail, overnight delivery service, or e-mail to one of the following contact points below by February, 2025:

E-mail: ins_compensation_inquiries@metlife.com

Mail to: MetLife
P.O. Box 30160
Tampa, FL 33630

In MetLife's discretion, Supplemental Compensation earned only under the 2024 Supplemental Compensation Plan may qualify and be paid retroactively by MetLife by March 15, 2025, after the date of receipt of the Customer Authorization Form. The Customer Authorization Form will not be considered received until it is received at one of the contact points listed above.

If the form is submitted to another area (for example, a sales office), the form will not be considered received until it is received at one of the contact points listed above, and the business may not be counted for Supplemental Compensation purposes. Any Customer Authorization Forms received at one of the contact points listed above after February, 2025, will apply to payment only and will not count towards the broker's qualification for the 2024 Supplemental Compensation Plan.

In addition to using the Customer Authorization Form in this brochure, you can photocopy the form, or download a PDF version of the form at www.metlife.com/business-and-brokers/broker-resources/broker-compensation.

18. Auto and Home insurance products branded as Farmers GroupSelect® are underwritten by Farmers Property and Casualty Insurance Company (a MA licensee) and certain of its affiliates: Economy Fire & Casualty Company, Economy Premier Assurance Company, Economy Preferred Insurance Company, Farmers Casualty Insurance Company, Farmers Direct Property and Casualty Insurance Company (CA Certificate of Authority: 6730; Warwick, RI), Farmers Group Property and Casualty Insurance Company (CA COA: 6393; Warwick, RI), or Farmers Lloyds Insurance Company of Texas, all with administrative home offices in Warwick, RI.

19. Your MetLife Account Executive can provide you with specific details around qualifying re-enrollment campaigns.

Customer Authorization Form



Important Information for MetLife Customers:

MetLife requires that this form be completed when a customer obtains MetLife group insurance products through a licensed and appointed insurance intermediary, such as a broker or consultant ("Broker") and MetLife is not paying the Broker base commission in connection with the customer's coverages, but the customer wishes to permit MetLife to include each of the customer's MetLife coverages for determining the Broker's eligibility for payment of supplemental compensation pursuant to the 2024 Supplemental Compensation Plan (or future MetLife supplemental compensation plans ("Compensation")). If a customer submits a Customer Authorization Form for a current Compensation plan, the authorization will remain in effect for future Compensation plans, unless the customer advises MetLife in writing that such authorization is terminated. MetLife may provide to each customer who submits this form an annual notice describing any changes to its Compensation plan from a prior year. MetLife will only accept this form in relation to a coverage that has an effective date on or after January 1, 2010, and in relation to a Broker recognized as Broker of Record by MetLife as of the effective date of such coverage. A customer's signature on this form will permit MetLife to include each of the customer's MetLife coverages, for determining the Broker's eligibility for payment of Compensation with respect to current and future Compensation plans, beginning with the 2024 Supplemental Compensation Plan.

MetLife will accept a Customer Authorization Form (and pay Compensation) for coverages with effective dates before January 1, 2010 under the following conditions:

1. A new Supplemental Compensation eligible group product for qualification is added; or
2. An Auto and Home product¹ is added; or
3. A qualifying re-enrollment campaign for existing coverages is implemented; or
4. A customer converts from ASO to non-participating Dental, STD or LTD insurance.

For previously excluded coverages (as described above) where no base commission had been payable or that had a base commission change, a signed Customer Authorization Form is required in order to be eligible for payment and qualification under any of the Compensation plans.

Sections I and II of this form **MUST** be completed in their entirety and received by MetLife by **February, 2025**, at one of the contact points listed below. In MetLife's discretion, Supplemental Compensation earned only under the 2024 Supplemental Compensation Plan may qualify and be paid retroactively by MetLife by March 15, 2025, after the date of receipt of the Customer Authorization Form. Any Customer Authorization Forms received by MetLife at one of the contact points listed below after **February, 2025** will apply to payment only and will not affect the Broker's 2024 Supplemental Compensation percentage.

SECTION I must be completed and signed by the **broker**. **SECTION II** must be completed and signed by the **customer**.

PERF RULE DOES NOT PRINT

Broker information (To be completed by Broker)	SECTION I
	Printed name and Tax I.D. of broker: _____
	Address: _____
	Broker code: _____
	Name and Tax I.D. of individual writing agent: _____
	Effective date of coverage: _____ Contact phone number: _____
	E-mail address: _____
	Signature of broker or of a duly authorized representative of broker, if broker is a firm: _____ Date: _____

Customer information (To be completed by customer)	SECTION II (Initial where applicable)								
	On behalf of the MetLife customer identified below, I authorize MetLife to include each MetLife coverages identified below for the purposes of determining the Broker's eligibility for, and payment of, Compensation, subject to Section 1, with respect to one or more of the Compensation plans and any future MetLife compensation plans. I have had the opportunity to review MetLife's Supplemental Compensation Plan brochures. I understand that my Broker may receive a payment under one or more of the Compensation plans and future compensation plans for the insurance coverages listed below that are being placed with MetLife. I understand that this form also confirms my intention for MetLife to consider the above broker to be my Broker of Record.								
	<table border="1"><thead><tr><th>MetLife coverages</th><th>MetLife customer name and number</th><th>MetLife division or experience number</th></tr></thead><tbody><tr><td>_____</td><td>_____</td><td>_____</td></tr><tr><td>_____</td><td>_____</td><td>_____</td></tr></tbody></table> <p><input type="checkbox"/> Check if all is applicable</p>	MetLife coverages	MetLife customer name and number	MetLife division or experience number	_____	_____	_____	_____	_____
MetLife coverages	MetLife customer name and number	MetLife division or experience number							
_____	_____	_____							
_____	_____	_____							

Authorization of MetLife Customer

By signing below, I certify that I am duly authorized by the company identified below to execute this document and to authorize MetLife to include the MetLife insurance coverages identified above in the calculation of MetLife's 2024 Compensation plan payments as well as payments pursuant to any subsequent Compensation plans. This authorization will permit MetLife to include each of the customer's coverages for determining the Broker's eligibility for payment of Compensation, pursuant to current and future Compensation plans, beginning with the 2024 Supplemental Compensation Plans. In addition, I represent that the broker identified above has not solicited my signature on this form by suggesting that any Compensation will reduce the pricing and/or premium payments for any MetLife coverage listed above.

Customer's company name: _____

Address: _____

City: _____ State: _____ Zip code: _____

Printed name: _____ Title: _____

Signature: _____ Date: _____

Return by Mail to: MetLife, P.O. Box 30160, Tampa, FL 33630 or **E-mail to:** INS_Compensation_Inquiries@metlife.com. You can download a PDF version of the Compensation brochures and the Customer Authorization Form at www.metlife.com/business-and-brokers/broker-resources/broker-compensation.

1. Auto and Home insurance products branded as Farmers GroupSelect® are underwritten by Farmers Property and Casualty Insurance Company (a MA licensee) and certain of its affiliates: Economy Fire & Casualty Company, Economy Premier Assurance Company, Economy Preferred Insurance Company, Farmers Casualty Insurance Company, Farmers Direct Property and Casualty Insurance Company (CA Certificate of Authority: 6730; Warwick, RI), Farmers Group Property and Casualty Insurance Company (CA COA: 6393; Warwick, RI), or Farmers Lloyds Insurance Company of Texas, all with administrative home offices in Warwick, RI.

[metlife.com](https://www.metlife.com)



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