

## ADMINISTRATIVE INFORMATION

<b>Plan Name</b>	The official Plan Names for the Life Insurance Plans are: <ul style="list-style-type: none"> <li>• The Avaya Inc. Life Insurance Plan which is a part of the Avaya Inc. Health &amp; Welfare Benefits Plan</li> <li>• The Avaya Inc. Supplementary Life Insurance Plan</li> <li>• The Avaya Inc. Supplementary AD&amp;D Insurance Plan</li> <li>• The Avaya Inc. Dependent Life Insurance Plan</li> <li>• The Avaya Inc. Dependent AD&amp;D Insurance Plan</li> </ul>
<b>Plan Sponsor</b>	The Plan Sponsor is Avaya Inc.
<b>Type of Administration</b>	The Life Insurance Plans are underwritten by Metropolitan Life Insurance Company (the Insurer). The master group life insurance contracts between Avaya Inc. and the Insurer govern the operation of the Life Insurance Plans at all times.
<b>Plan Administrator</b>	The Plan Administrator is:  Avaya Inc. Life Insurance Plans Administrator 211 Mount Airy Road Basking Ridge, NJ 07920  E-mail: <a href="mailto:hwplanadmin@avaya.com">hwplanadmin@avaya.com</a>
<b>Insurer</b>	The Insurer is Metropolitan Life Insurance Company.
<b>Agent for Service of Legal Process</b>	Legal actions regarding a claim should be sent to the Insurer. All other legal actions should be directed to the Plan Administrator.
<b>Plan Records and Plan Year</b>	The Life Insurance Plans and all their records are maintained on a calendar year basis, beginning on January 1st and ending on December 31st of each year.
<b>Type of Plan</b>	The Life Insurance Plans are considered “health & welfare” plans under the Employee Retirement Income Security Act of 1974, as amended (ERISA).
<b>Plan Numbers</b>	The Plan Numbers for the Life Insurance Plans are: <ul style="list-style-type: none"> <li>• Life Insurance Plan* ..... 551</li> <li>• Supplementary Life Insurance Plan ..... 513</li> <li>• Supplementary AD&amp;D Insurance Plan ..... 514</li> <li>• Dependent Life Insurance Plan ..... 515</li> <li>• Dependent AD&amp;D Insurance Plan ..... 516</li> </ul> <p>*Includes basic AD&amp;D insurance</p>
<b>Employer Identification Number</b>	The Employer Identification Number is 22-3713430.