

Long-Term Disability (LTD)

Summary Plan Description



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1. INTRODUCTION

Windstream sponsors the Windstream Long Term Disability Insurance Plan (Plan) to protect your income if you are unable to work because of injury or illness. You must be disabled for a period of time before payments begin. This period is called your elimination period. The Plan coordinates with other Company- and government-sponsored plans to ensure a total benefit as specified in the attached Certificate of Insurance.

The Plan also includes an early intervention program designed to help disabled employees return to work before reaching eligibility for regular LTD benefits.

Benefits of the Plan are provided under an insurance contract entered into between Windstream and Cigna.

Enrollment is automatic. Benefits under the Plan are described in the Certificate of Insurance issued by Cigna.

Windstream is providing this document to give you an overview of the Plan and to address certain information that may not be addressed in the attached Certificate of Insurance. This Windstream document, together with the Certificate of Insurance issued by Cigna, is the Summary Plan Description (SPD) required by ERISA. This Windstream document is not intended to give you any substantive rights to benefits that are not already provided by the attached Certificate of Insurance.

2. ELIGIBILITY AND PARTICIPATION REQUIREMENTS

To determine whether you are eligible to participate in the Plan, please read the eligibility information contained in the attached Certificate of Insurance issued by Cigna.

To be an eligible employee, you must be one of the following:

- A non-bargaining employee regularly scheduled to work at least 30 hours per week.
- A bargaining employee regularly scheduled to work at least 30 hours per week whose collective bargaining agreement provides for the benefits described.

The following individuals are not eligible:

1. A temporary or seasonal employee;
2. A leased employee;
3. An independent contractor;
4. A full time member of the armed forces of any country; and

5. An employee covered by a collective bargaining unit which has not bargained for benefits under the attached Certificate of Insurance.
6. Dependents of the employee.

All eligible employees are automatically enrolled for coverage effective on the first day of the month following their first 56 calendar days of employment.

Long-term disability coverage ends on your last date of employment. If you have been covered under the Plan and actively at work for at least 12 straight months, you may be able to convert your coverage to an individual policy with Cigna. To do so, you must apply in writing to the insurance company within 31 days after your coverage terminates. Cigna long-term disability conversion forms are available from the Benefits Center at 888.392.7597. It is the employee's responsibility to request a conversion packet upon termination of employment.

3. SUMMARY OF PLAN BENEFITS

The Plan provides LTD insurance to eligible employees. These benefits are provided under a group insurance contract entered into between Windstream and Cigna. A summary of the benefits provided under the Plan is set forth in the Certificate of Insurance issued by Cigna. You must read the policy to understand your benefits.

4. PLAN ADMINISTRATION

The Plan is administered by the Windstream Benefits Committee.

This Plan is fully insured. Benefits are provided under a group insurance contract entered into between Windstream and Cigna. Claims for benefits are provided to Cigna. Cigna, not Windstream or the Windstream Benefits Committee, is responsible for paying claims.

If you have any general questions regarding the Plan, please contact the Windstream Benefits Center.

Telephone 844-689-7832

Benefits hereunder are provided solely pursuant to an insurance contract between the Plan Sponsor, Windstream, and the insurance company, Cigna. If the terms of this summary document conflict with the terms of the insurance contract, then the terms of the insurance contract will control, unless superseded by applicable law.

5. AMENDMENT OR TERMINATION

Windstream -reserves the right to amend, modify, terminate, and partially terminate the Plan at any time. Windstream -may make amendments or modifications through an action of the Windstream Benefits Committee, and may terminate or partially terminate the Plan through a Board of Directors resolution.

6. NO EMPLOYMENT CONTRACT

The purpose of this Summary Plan Description is to provide you with information about the benefits available under the Plan. The benefits described are not conditions of employment, nor is the Summary Plan Description intended to create an employment contract between you and Windstream. Nothing in this Summary Plan Description should be interpreted as a limitation on your right or Windstream's right to terminate your employment at any time, with or without cause.

7. CLAIMS PROCEDURES

Cigna is responsible for evaluating all benefit claims under the Plan. Cigna will decide your claim in accordance with its reasonable claims procedures as required by ERISA.

See the Certificate of Insurance issued by Cigna for information about how to file a claim and for details regarding Cigna's claims procedures.

If you become disabled while employed with the Company, notify your manager immediately. Your manager will notify your local Human Resources Business Partner, and he/she will let you know the next steps for submitting a claim.

If your claim is denied, you may request a review of the denied claim from Cigna. Cigna will make a decision regarding your request for review in accordance with its reasonable claims procedures, as required by ERISA.

If you don't request a review on time, you will lose your right to file suit in a state or federal court, as you will not have exhausted your internal administrative appeal rights (which generally is a condition for bringing suit in court).

See the -Certificate of Insurance issued by Cigna for information about how to request a review of a denied claim and for details regarding Cigna's claims procedures.

8. STATEMENT OF ERISA RIGHTS

If you are a participant in this Plan, you are entitled to certain rights and protections under the Employee Retirement Income Security Act of 1974, as amended (ERISA). ERISA provides that all plan participants shall be entitled to the following:

Receive Information About Your Plan and Benefits

- Examine, without charge, at the Plan Administrator's office, all documents governing the plan, including insurance contracts, and a copy of the latest annual report (Form 5500 Series) filed by the Plan with the U.S. Department of Labor and available at the Public Disclosure Room of the Employee Benefits Security Administration.
- Obtain, upon written request to the Plan Administrator, copies of documents governing the operation of the Plan, including insurance contracts, and copies of the latest annual report (Form 5500 Series) and updated summary plan description. The Plan Administrator may make a reasonable charge for the copies.
- Receive a summary of the plan's annual financial report. The Plan Administrator is required by law to furnish each participant with a copy of this summary annual report.

Prudent Actions by Plan Fiduciaries

In addition to creating rights for plan participants, ERISA imposes duties upon the people who are responsible for the operation of the employee benefit plan. The people who operate your plan, called "fiduciaries" of the plan, have a duty to do so prudently and in the interest of you and other participants and beneficiaries.

No one, including your employer, or any other person, may terminate you or otherwise discriminate against you in any way to prevent you from obtaining a plan benefit or exercising your rights under ERISA.

Enforce Your Rights

If your claim for a benefit is denied or ignored, in whole or in part, you have a right to know why this was done, to obtain copies of documents relating to the decision without charge, and to appeal any denial, all within certain time schedules.

Under ERISA, there are steps you can take to enforce the above rights. For instance, if you request a copy of plan documents or the latest annual report from the Plan and do not receive them within 30 days, you may file a suit in federal court. In such a case the court may require the Plan Administrator to provide the materials and pay you up to \$110 a day until you receive the materials, unless the materials were not sent because of reasons beyond the control of the Plan Administrator. If you have a claim for benefits that is denied or ignored, in whole or in part, you may file suit in a state or federal court. In addition, if you disagree with the Plan's decision or lack thereof concerning the qualified status of a domestic relations order or a medical child support order, you may file suit in federal court. If it should happen that the Plan fiduciaries misuse the Plan's money or if you are discriminated against for asserting your rights, you may seek assistance from the U.S. Department of Labor, or you may file suit in federal court. The court will decide

who should pay court costs and legal fees. If you are successful, the court may order the person you have sued to pay court costs and legal fees. If you lose, the court may order you to pay these costs and fees (for example, if it finds your claim is frivolous).

Assistance With Your Questions

If you have any questions about your plan, you should contact the Plan Administrator. If you have questions about this statement or your rights under ERISA, or if you need assistance in obtaining documents from the Plan Administrator, you should contact the nearest area office of the Employee Benefits Security Administration, U.S. Department of Labor (listed in your telephone directory) or the Division of Technical Assistance and Inquiries, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue N.W., Washington, DC 20210. You may also obtain certain publications about your rights and responsibilities under ERISA by calling the publications hotline of the Employee Benefits Security Administration.

Attachment

Certificate of Insurance issued by Cigna

9. PLAN DATA

NAME OF PLAN: WINDSTREAM SERVICES L.L.C. LONG-TERM DISABILITY PLAN

Plan Sponsor:

Windstream Services, L.L.C.
4001 Rodney Parham Road
Little Rock, AR 72212

Participants and beneficiaries may receive from the Plan Administrator, upon written request, a complete list of employers sponsoring the Plan, information as to whether a particular employer is a Sponsor of the Plan, and, if the employer is a Plan Sponsor, the Sponsor's address.

Agent for Service of Legal Process:

For disputes arising under the Plan, service of legal process may be made upon the Plan Sponsor at the above address. For disputes arising under those portions of the Plan insured by the LIFE INSURANCE COMPANY OF NORTH AMERICA, a Cigna company, service of legal process may be made upon the LIFE INSURANCE COMPANY OF NORTH AMERICA, a Cigna company, at one of its local offices, or upon the supervisory official of the Insurance Department in the state in which you reside.

Plan Information may be Obtained by Writing to:

You may obtain Summary Plan Descriptions (“SPDs”) about Windstream’s benefit plans at WindstreamBenefits.com. If you do not have access to a computer, you may also write to Windstream Benefits Department, 4001 N Rodney Parham Rd, Little Rock AR 72212 to request a copy of any SPD.

Collective Bargaining Agreements:

The Windstream Long Term Disability Insurance Plan is maintained pursuant to one or more collective bargaining agreements. You may obtain a copy of the applicable collective bargaining agreement upon written request to the Plan Administrator, or you may examine a copy of the applicable agreement at the Plan Administrator’s office.

Plan Administrator: Windstream Services, L.L.C.

Employer Identification Number: 20-0792300

Type of Plan: Insured Welfare Plan for Disability Benefits

Plan Identification Number: 501

Type of Administration: Insurance Administration with the LIFE INSURANCE COMPANY OF NORTH AMERICA, a Cigna company.

Sources of Contributions of the Plan: Employer

Plan Year: January 1 - December 31