Conditions VIAC Life Basic

As of December 2026, there will be an adjustment to the Life terms and conditions.

This document lists both the new and current terms and conditions.

- Conditions VIAC Life Basic, valid from 01.12.2026

- Conditions VIAC Life Basic, valid until 30.11.2026

VIAC Life by VIAC Services AG

[non-binding translation]

Conditions VIAC Life Basic

Endowment insurance for death or disability due to illness or accident

Valid from 01.12.2026

VIAC Life
by VIAC Services AG

Conditions VIAC Life Basic

Endowment insurance for death or disability due to illness or accident

A Introduction

Life Basic provides a one-time lump-sum benefit in the event of disability or death of the insured person to cover the financial consequences of disability or death due to illness or accident.

For this purpose, VIAC Services AG, hereinafter "VIAC", has entered into a group life insurance contract (hereinafter referred to as the insurance contract) effective from December 1, 2026 with FINMA-subordinated Helvetia Swiss Life Insurance Company Ltd, hereinafter "Helvetia".

Helvetia is the insurer and the risk carrier. VIAC provides the insurance benefits from the insurance contract paid by Helvetia to VIAC to the insured person. An insured person is a natural person who, at the time of joining the group insurance plan and throughout the term of the insurance coverage, are domiciled exclusively in Switzerland, have entered into a pension plan contract with the Terzo Pension Foundation of WIR Bank and/or the Vested Benefits Foundation of WIR Bank within the minimum and maximum entry age ranges, and meet all conditions for inclusion in the group insurance plan. If the insured person relocates their residence abroad, insurance coverage ends on the day of departure from Switzerland. If they later re-establish residence in Switzerland and meet the requirements for the group of insured persons, they are automatically reinstated into the group of insured persons. VIAC provides the insured person with the insurance benefits paid by Helvetia to VIAC under the insurance contract. VIAC reports any claims to Helvetia and forwards the documents necessary for assessing the benefits.

The insured person has no direct right of claim against Helvetia. VIAC's obligation to pay benefits to the insured person is limited to the insurance benefits that VIAC itself receives for the insured person under the insurance contract.

All terms used in the text that refer to persons shall be understood to be gender neutral.

The following conditions of Life Basic reflect the conditions concluded in the group life insurance contract.

B Content of the contract

1 What is the basis of the contract?

This contract is based on the individual application for inclusion in the group insurance (Sections 2 and 8), these applicable terms and conditions and the provisions of the Federal Law on Insurance Contracts (VVG).

2 What risks are insured?

The insured risks are death or disability of the insured person due to illness or accident.

Disability is insured at the beginning of the insurance coverage.

The insured person can, however, change to a death insurance by making the appropriate application on the VIAC platform (Mobile App and/or Desktop App).

Switching between death and disability insurance can still be requested afterwards. However, at least a full twelve months must have passed between two changes.

Each change is subject to a risk assessment.

No changes are possible between a claim notification and the conclusion of the benefit assessment.

3 What is not insured?

Disability or death caused by a condition (illness or accident) that existed prior to the start of the insurance is excluded from insurance coverage.

If the eligible person caused the insured event intentionally or while intentionally committing a crime or offense, there is no entitlement to benefits.

There is no entitlement to benefits if the death or disability is the result of the participation of the insured person in civil unrest or acts of war.

In the event of the insured person's suicide, the death benefits will be paid in full. There is no entitlement to death benefits if an insured person dies during the first three years of coverage as a result of suicide or from the consequences of a suicide attempt.

Helvetia only provides insurance coverage and is only liable to VIAC for insurance claims to the extent that the insured person or their legal successors are not subject to any sanctions or restrictions under UN resolutions and do not violate any trade or economic sanctions imposed by Switzerland, the European Union, the United Kingdom, or the United States of America.

C Definitions

4 What is considered an illness?

Illness is any impairment of physical, mental or psychological health which is not the result of an accident and which requires medical examination or treatment or results in incapacity to work (Art. 3 ATSG).

5 What is considered an accident?

An accident is the sudden, unintentional harmful effect of an unusual external factor on the human body, which results in impairment of physical, mental or psychological health or death (Art. 4 ATSG).

6 How is work incapacity defined?

Incapacity to work is the full or partial inability to perform reasonable work in one's previous occupation or field of activity due to an impairment of physical, mental or psychological health. IIn case of a long-term incapacity, reasonable work in another occupation or field of activity is also taken into account (Art. 6 ATSG).

7 How is incapacity for gainful employment defined?

Incapacity for gainful employment is the total or partial loss of employment opportunities on the balanced labour market in question caused by impairment of physical, mental or psychological health and remaining after reasonable treatment and integration (Art. 7 ATSG).

D Insurance Coverage

8 What is Life Basic?

Life Basic corresponds to a lump-sum payment depending on the average VIAC Pillar 3a assets invested in securities in the previous month with the Terzo Pension Foundation of WIR Bank, or the average VIAC vested benefits assets invested in securities in the previous month with the Vested Benefits Foundation of WIR Bank:

For every full CHF 10'000 of average assets invested in securities in the previous month, the insurance coverage amounts to CHF 2'500. The assets invested with the Terzo Pension Foundation of WIR Bank (across all 3a pension relationships) and the Vested Benefits Foundation of WIR Bank are considered separately.

The maximum insurance coverage is CHF 250'000. If the insurance coverage exceeds CHF 100'000, it is mandatory to fill out an application with health questions in order to receive the corresponding insurance coverage. If these are not answered, the maximum amount for Life Basic is CHF 100'000. If the risk assessment decision is negative, the maximum amount is also CHF 100'000.

Average invested assets in the previous month	Insurance coverage
From CHF 10'000	CHF 2'500
From CHF 20'000	CHF 5'000
From CHF 30'000	CHF 7'500

From CHF 40'000	CHF 10'000
...	...
From CHF 400'000 (maximum insurance coverage without application/health questions)	CHF 100'000
...	...
From CHF 1'000'000 (maximum insurance coverage)	CHF 250'000

9 When does the insurance coverage begin?

If the average VIAC retirement assets invested in securities with the Terzo Pension Foundation of WIR Bank or the Vested Benefits Foundation of WIR Bank amount to CHF 10'000, Life Basic starts the following month.

Insurance coverage of CHF 100'000 or more is subject to an additional application and a positive risk assessment. In these cases, insurance coverage begins in the month following the application with a positive risk assessment decision. The same applies to an application for a change of the insured risk (Section 2).

10 When does the insurance coverage end?

The insurance coverage expires:
- upon death of the insured person
- with the payment of the disability capital
- by denying a claim for a disability lump-sum payment, provided that the disability is 70% or higher. Reinstatement of insurance coverage may be considered upon request
- when the insured person reaches the reference age defined by the OASI
- if the average VIAC investment in securities in the previous month is less than CHF 10'000 for the Terzo Pension Foundation of WIR Bank or the Vested Benefits Foundation of WIR Bank
- the day on which the VIAC portfolios of the Terzo Pension Foundation of WIR Bank and the Vested Benefits Foundation of WIR Bank, respectively, on which Life Basic capital insurance is based, are dissolved

If the insured person moves their place of residence abroad, the insurance coverage ends on the day they leave Switzerland.

Furthermore, the insurance expires upon termination of the insurance contract between Helvetia and VIAC. The dissolution must be notified to the insured person by VIAC in electronic text form (e.g. by e-mail) at least 1 month before the insurance coverage expires.

11 Duty of disclosure and breach of duty of disclosure in risk assessment

For the purposes of the risk assessment, the person to be insured must answer the questions posed by VIAC about the state of their health fully and truthfully. If answers to the health questions are incorrectly communicated or withheld, VIAC may terminate the contract in writing or in electronic text form (e.g. by e-mail) within 4 weeks after becoming aware of the breach of duty of disclosure. The termination becomes effective upon receipt by the insured person (Art. 6 VVG).

If the contract is terminated by such a cancellation, the obligation to pay benefits for insured events which have already occurred, whose occurrence or extent has been influenced by the incomplete or incorrectly communicated fact, also ceases to apply. Furthermore, the obligation to pay benefits ceases if the insured event has already occurred at the time of signing the application for inclusion in the group insurance coverage or before the commencement of insurance coverage, as well as in the event of fraudulent assertion of an insurance claim.

If benefits have already been paid for such insured events, they will be claimed back.

E Financials

12 How much does it cost to be included in the insurance?

For Life Basic, the insured person is not charged an amount for coverage under the insurance policy.

F Benefits

I) Disability benefit

13When does the entitlement to the disability benefit arise?

An entitlement to a disability lump-sum arises if an insured person is unable to work as a result of illness or accident and subsequently becomes at least 70% disabled due to this cause. If the degree of disability is less than 70%, there is no entitlement to the insured benefits.

A legally binding decision of the Swiss Federal Disability Insurance (DI), the corresponding preliminary notice, and the current "Claim in the event of disability" form available in the application is mandatory for a claim. Without such a decision, there is no entitlement to a lump sum disability benefit.

To determine the date of commencement of the incapacity to work and the level of insurance cover the date of start of the waiting year determined by the DI (Art. 28 para. 1 lit. b IVG) is decisive.

14 Who is entitled to disability benefits?

Only the insured person is entitled to the disability benefit. If the insured person dies before the degree of disability is finally determined, the entitlement expires. The insured benefits are paid regardless of any other insurance.

II) Death benefit

15 When does the entitlement to the disability benefit arise?

The entitlement to the lump-sum death benefit arises upon the death of the insured person. VIAC must be informed of the death immediately. An official death certificate and the current form "Claim in the event of death" available in the application, including the appendix "Medical report on the cause of death" with details of the circumstances and cause of death, must be submitted.

16 Who is entitled to death benefits?

The insured person or their heirs are entitled to claim.

G Special provisions

17 What is the procedure in case of a claim?

An accident or illness that is likely to trigger a liability to pay benefits as well as the death of an insured person must be reported to VIAC without delay.

18 Which requirements must be met in the event of a claim?

The insured benefits will be paid as soon as VIAC and Helvetia have received the documents necessary for the assessment of the claim (see in particular Sections 13 and 15 above) and the conditions set out in Section D ff. above have been met.

All documents must be provided in either German, French, Italian or English. For documents which were not issued in one of these languages, a certified translation must be provided.

19 Where is the place of fulfilment of the insured benefits?

The place of fulfilment for the insured benefits is the Swiss residence of the entitled person or legal representative. In the absence of the required place of residence, the registered office of VIAC shall be the place of fulfilment.

20 Can claims be assigned or pledged?

All benefits under this insurance policy may not be assigned or pledged before they become due.

21 What applies to military service and war?

Active service to maintain Swiss neutrality and to maintain peace and order within Switzerland, both without acts of war, is considered military service in peacetime and as such is included in the insurance policy within the scope of these conditions. In the event that Switzerland conducts war or is drawn into warlike actions, the corresponding regulations issued by the Federal Council shall apply. Operations for peacekeeping measures within the framework of the UN are not insured (e.g. UN blue helmets and OSCE yellow caps).

22 What method is used to send notifications?

Notifications to VIAC must be sent via the VIAC platform (Mobile App and/or Desktop App), in electronic text form (for example by e-mail) or to the following address: VIAC Services AG, Innere Margarethenstrasse 2, 4002 Basel.

Notifications from VIAC to the insured person or their legal successors are valid if they are sent via the VIAC platform, in electronic text form (e.g. by e-mail) or to the last known address in Switzerland.

Further information, such as changes to these conditions, will be published on the VIAC homepage and in electronic text form (for example by e-mail).

23 Where is the place of jurisdiction?

The courts at the registered office of VIAC shall have exclusive jurisdiction over any disputes between the insured person and VIAC.

24 When is the payment due?

Four weeks after VIAC has delivered the complete documents necessary for assessing the claim to Helvetia, default interest of 1% per annum shall be payable; no default interest shall be payable before this date.

All documents must be provided in either German, French, Italian or English. For documents which were not issued in one of these languages, a certified translation must be provided.

H Data

25 What happens to my data?

VIAC processes the personal information of the insured persons for the purpose of processing the contract, but also in order to continuously improve the quality of the products and services that they offer to their potential, existing and former insured persons. VIAC may also outsource the processing of data to third parties. The data is evaluated using mathematical and statistical methods.

26 Is personal data passed on to third parties?

VIAC is subject to strict data protection regulations. Therefore, no personal information will be disclosed to third parties outside VIAC. Exceptions are only made in those cases in which the disclosure of data is expressly required or permitted by law or if cooperation partners are involved in the processing and fulfilment of this insurance policy.

VIAC forwards the data necessary for the processing of the insurance contract to Helvetia.

27 How long is the personal data stored?

Personal data is processed and stored in a database or on paper only for as long as required by law or contractual provisions.

I Special provisions

28 Entry into force and amendments

These conditions come into force on 01 December 2026.

Changes to the terms and conditions of the contract will be communicated to the insured person at least 30 days before they take effect, either in writing or electronically. All notices are deemed to have been validly delivered if they have been sent to the last mailing address provided to VIAC.

29 Valid edition of the insurance conditions

These insurance conditions are a translation of the original German text. In the event of deviations or difficulties in interpretation, the German version of the insurance conditions shall prevail.

[non-binding translation]

Conditions VIAC Life Basic

Endowment insurance for death or disability due to illness or accident

Valid until 30.11.2026

Conditions VIAC Life Basic

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Helvetia is the insurer and the risk carrier. VIAC provides the insurance benefits from the insurance contract paid by Helvetia to VIAC to the insured person. VIAC reports any claims to Helvetia and forwards the documents necessary for assessing the benefits.

The insured person has no direct right of claim against Helvetia. VIAC's obligation to pay benefits to the insured person is limited to the insurance benefits that VIAC itself receives for the insured person under the insurance contract.

All terms used in the text that refer to persons shall be understood to be gender-neutral.

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The insured risks are death or disability of the insured person due to illness or accident.

Disability is insured at the beginning of the insurance coverage.

The insured person can, however, change to a death insurance by making the appropriate application on the VIAC platform (Mobile App and/or Desktop App).

Switching between death and disability insurance can still be requested afterwards. However, at least a full twelve months must have passed between two changes.

Each change is subject to a risk assessment.

No changes are possible between a claim notification and the conclusion of the benefit assessment.

3 What is not insured?

Disability or death caused by a condition (illness or accident) that existed prior to the start of the insurance is excluded from insurance coverage.

If the eligible person caused the insured event intentionally or while intentionally committing a crime or offense, there is no entitlement to benefits.

There is no entitlement to benefits if the death or disability is the result of the participation of the insured person in civil unrest or acts of war.

Helvetia only provides insurance coverage and is only liable to VIAC for insurance claims to the extent that the insured person or their legal successors are not subject to any sanctions or restrictions under UN resolutions and do not violate any trade or economic sanctions imposed by Switzerland, the European Union, the United Kingdom, or the United States of America.

C Definitions

4 What is considered an illness?

Illness is any impairment of physical, mental or psychological health which is not the result of an accident and which requires medical examination or treatment or results in incapacity to work (Art. 3 ATSG).

5 What is considered an accident?

An accident is the sudden, unintentional harmful effect of an unusual external factor on the human body, which results in impairment of physical, mental or psychological health or death (Art. 4 ATSG).

6 How is work incapacity defined?

Incapacity to work is the full or partial inability to perform reasonable work in one's previous occupation or field of activity due to an impairment of physical, mental or psychological health. IIn case of a long-term incapacity, reasonable work in another occupation or field of activity is also taken into account (Art. 6 ATSG).

7 How is incapacity for gainful employment defined?

Incapacity for gainful employment is the total or partial loss of employment opportunities on the balanced labour market in question caused by impairment of physical, mental or psychological health and remaining after reasonable treatment and integration (Art. 7 ATSG).

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8 What is Life Basic?

Life Basic corresponds to a lump-sum payment depending on the average VIAC Pillar 3a assets invested in securities in the previous month with the Terzo Pension Foundation of WIR Bank, or the average VIAC vested benefits assets invested in securities in the previous month with the Vested Benefits Foundation of WIR Bank:

For every full CHF 10'000 of average assets invested in securities in the previous month, the insurance coverage amounts to CHF 2'500. The assets invested with the Terzo Pension Foundation of WIR Bank (across all 3a pension relationships) and the Vested Benefits Foundation of WIR Bank are considered separately.

The maximum insurance coverage is CHF 250'000. If the insurance coverage exceeds CHF 100'000, it is mandatory to fill out an application with health questions in order to receive the corresponding insurance coverage. If these are not answered, the maximum amount for Life Basic is CHF 100'000. If the risk assessment decision is negative, the maximum amount is also CHF 100'000.

Average invested assets in the previous month	Insurance coverage
From CHF 10'000	CHF 2'500
From CHF 20'000	CHF 5'000
From CHF 30'000	CHF 7'500
From CHF 40'000	CHF 10'000
…	…
From CHF 400'000 (maximum insurance coverage without application/health questions)	CHF 100'000
…	…
From CHF 1'000'000 (maximum insurance coverage)	CHF 250'000

9 When does the insurance coverage begin?

If the average VIAC retirement assets invested in securities with the Terzo Pension Foundation of WIR Bank or the Vested Benefits Foundation of WIR Bank amount to CHF 10'000, Life Basic starts the following month.

Insurance coverage of CHF 100'000 or more is subject to an additional application and a positive risk assessment. In these cases, insurance coverage begins in the month following the application with a positive risk assessment decision. The same applies to an application for a change of the insured risk (Section 2).

10 When does the insurance coverage end?

The insurance coverage expires:
- upon death of the insured person
- with the payment of the disability capital
- when the insured person reaches the reference age defined by the OASI
- if the average VIAC investment in securities in the previous month is less than CHF 10'000 for the Terzo Pension Foundation of WIR Bank or the Vested Benefits Foundation of WIR Bank
- the day on which the VIAC portfolios of the Terzo Pension Foundation of WIR Bank and the Vested Benefits Foundation of WIR Bank, respectively, on which Life Basic capital insurance is based, are dissolved

If the insured person moves their place of residence abroad, the insurance coverage ends on the day they leave Switzerland.

Furthermore, the insurance expires upon termination of the insurance contract between Helvetia and VIAC. The dissolution must be notified to the insured person by VIAC in electronic text form (e.g. by e-mail) at least 1 month before the insurance coverage expires.

11 Duty of disclosure and breach of duty of disclosure in risk assessment

For the purposes of the risk assessment, the person to be insured must answer the questions posed by VIAC about the state of their health fully and truthfully. If answers to the health questions are incorrectly communicated or withheld, VIAC may terminate the contract in writing or in electronic text form (e.g. by e-mail) within 4 weeks after becoming aware of the breach of duty of disclosure. The termination becomes effective upon receipt by the insured person (Art. 6 VVG).

If the contract is terminated by such a cancellation, the obligation to pay benefits for insured events which have already occurred, whose occurrence or extent has been influenced by the incomplete or incorrectly communicated fact, also ceases to apply. If benefits have already been paid for such insured events, they will be claimed back.

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An entitlement to a disability lump-sum arises if an insured person is unable to work as a result of illness or accident and subsequently becomes at least 70% disabled due to this cause. If the degree of disability is less than 70%, there is no entitlement to the insured benefits.

A legally binding decision of the Swiss Federal Disability Insurance (DI), the corresponding preliminary notice, and the current "Claim in the event of disability" form available in the application is mandatory for a claim. Without such a decision, there is no entitlement to a lump sum disability benefit.

To determine the date of commencement of the incapacity to work and the level of insurance cover the date of start of the waiting year determined by the DI (Art. 28 para. 1 lit. b IVG) is decisive.

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17 What is the procedure in case of a claim?

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18 Which requirements must be met in the event of a claim?

The insured benefits will be paid as soon as VIAC and Helvetia have received the documents necessary for the assessment of the claim (see in particular Sections 13 and 15 above) and the conditions set out in Section D ff. above have been met.

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I Special provisions

28 Entry into force and amendments

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The insured person will be notified of any changes to the contractual conditions at least 3 months before they come into force.

29 Valid edition of the insurance conditions

These insurance conditions are a translation of the original German text. In the event of deviations or difficulties in interpretation, the German version of the insurance conditions shall prevail.