



TRANSAMERICA
FINANCIAL FOUNDATION IUL[®]
GUIDE FOR INSURANCE PROFESSIONALS



Transamerica Financial Foundation IUL

Uncertain economic times may have left clients feeling uneasy with traditional universal life insurance products. Index Universal Life products may be the answer. Over the years, these products have gained popularity due to the potential for higher Policy Value accumulation combined with the guaranteed minimum interest rates they provide.

The Transamerica Financial Foundation IUL offers flexibility with a Basic Interest Account, along with two Index Account choices available in the policy. Both Index Accounts utilize the annual point-to-point crediting method and have a guaranteed minimum interest rate of 0.75%. The Basic Interest Account offers a guaranteed minimum interest rate of 2%.

The Global Index Account uses the S&P 500® Index, the EURO STOXX 50® Index, and the Hang Seng Index to determine Excess Index Interest. The S&P 500® Index Account utilizes the S&P 500® Index to determine Excess Index Interest.

This guide provides detailed product information for the Transamerica Financial Foundation IUL policy.

INDEX UNIVERSAL LIFE INSURANCE IS NOT A SECURITY and index universal life insurance policies are not an investment in the stock market or in the indexes. Index Account Interest is based, in part, on index performance.

Past performance of an index is not an indication of future index performance. There is no guarantee that any Excess Index Interest will be credited above the guaranteed minimum interest rate for the Index Account(s). Additionally, there is no guarantee that the Company will declare an interest rate greater than the guaranteed minimum interest rate for the Basic Interest Account.

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Please read the full disclaimer in the Transamerica Financial Foundation IUL policy regarding the Hang Seng Index in relation to the policy.



Product Overview

Issue Age Range

Age last birthday 0-85

Face Amount Bands

Band 1: \$25,000 – \$99,999

Band 2: \$100,000 – \$249,999

Band 3: \$250,000 – \$499,999

Band 4: \$500,000+

Issue Dates

1st – 27th of every month. Policies will not be issued on the 28th, 29th, 30th, or 31st of any month.

Underwriting Risk Classes

Preferred Elite Non-Tobacco	(Issue Ages 18-70)
Preferred Plus Non-Tobacco	(Issue Ages 18-70)
Preferred Non-Tobacco	(Issue Ages 18-75)
Non-Tobacco	(Issue Ages 18-85)
Preferred Tobacco	(Issue Ages 18-75)
Tobacco	(Issue Ages 18-85)
Juvenile	(Issue Ages 0-17)

Preferred Risk Class Minimum is \$100,000

Please see current underwriting guidelines for complete details.



Illustration System

In order to comply with the NAIC Model Regulations, every index universal life policy must be illustrated for the client. Upon request at any time, we will send the policy owner an illustration of the policy's benefits and values. If a policy is issued other than as applied for or no hard copy illustration was delivered at the time the application was written, we will send a new illustration to be signed by the owner at policy delivery.

The illustration signature page must be signed and returned to us along with the Policy Delivery Receipt, and any applicable amendments.

The Death Benefit

The death benefit can be applied in many ways. It can help protect a client's family. It can help protect a client's business with key person insurance or as part of a buy-sell agreement. The client has the flexibility to select the death benefit option that can help meet their objectives.

LEVEL

Face Amount

INCREASING

Face Amount plus Policy Value

GRADED

Same as Increasing to age 70, grading to Level at age 95.

These amounts may be increased to meet IRS guidelines.

Change in Death Benefit Option

The policy owner may change the death benefit option after the third Policy Year. Changes in the death benefit option are limited to once per Policy Year. No change in the death benefit option will be allowed if the new Face Amount would be less than the Minimum Face Amount for the policy. Just after a death benefit option change is elected, the net amount at risk will be the same, but may change thereafter. Death benefit option changes are not permitted after age 95.



Increases and Decreases of the Face Amount

Insurance objectives can change over time, with changes in income, family situations, or any other circumstances. Consequently, the amount of necessary insurance coverage can also change. We provide clients the ability to adjust their Face Amounts if their needs change. Adjustments can only be made once during any Policy Year.

INCREASES

We allow the client to increase the Face Amount after the first Policy Year (subject to age and underwriting limitations at the time the change is requested) prior to age 86. The minimum increase amount is \$25,000. Additional cost of insurance, per unit charges and surrender charges will apply to increases in the Face Amount.

DECREASES

Decreases in the Face Amount are permitted after the third Policy Year. The minimum decrease amount is \$25,000. Prior to the later of age 65 or the end of the surrender charge period, we may limit decreases to no more than 20% of the Face Amount prior to the decrease. A decrease will not be allowed if the new Face Amount would be less than the minimum Face Amount for the policy, or if it would violate IRC Sec. 7702 requirements.

Income Protection Option (IPO) Endorsement

This optional endorsement provides an alternative payment method to a lump sum death benefit. The IPO, available at no additional cost, allows the policy owner to structure their death benefit with an initial lump sum, monthly income payments, and a final lump sum. Initial and final lump sums are optional. The monthly income payments can be extended over a period between 5 and 25 years. The IPO is only available at issue but can be modified by the policy owner prior to the death of the insured.

Premiums

Subject to certain limitations, this policy provides flexible premium payment options. Payments can be increased or decreased, made more or less frequently, and can even be skipped or stopped altogether if the No Lapse Guarantee is in effect or the Cash Surrender Value* is sufficient to cover the Monthly Deductions and the Index Account Monthly Charge.

* Cash Surrender Value is the amount available upon surrender. Cash Surrender Value equals the Policy Value minus surrender charges, unpaid loans and loan interest.



Net Premiums

Net premiums are equal to gross premiums paid less applicable premium expense charges. Net premiums are allocated to the Basic Interest Account and/or an Index Account in accordance with the policy holder's direction. The allocation percentage must be a whole number and not a fraction. A request may be made over the phone with customer service or notification in writing to transfer money or change the Net Premium allocation. Change in Net Premium allocation is only allowed once per month with the effective date on the next Monthly Date. There is no charge for changing the Net Premium allocation.

Minimum Monthly No Lapse Premium

The Minimum Monthly No Lapse Premium (MNLN) is the minimum premium required to keep the No Lapse Guarantee in effect. Until the No Lapse Guarantee period ends, a policy will not lapse for insufficient Cash Surrender Value provided the cumulative Minimum Monthly No Lapse Premium requirements** are met. Policy and rider changes will alter the Minimum Monthly No Lapse Premium.

Payment of the no lapse premium assures that the policy will remain in force during the guarantee period. However, by paying only the no lapse premium, the client may be forgoing the opportunity to build up additional Policy Value. At issue, we reserve the right to require that the initial premium plus planned premiums are at least equal to the cumulative Minimum Monthly Premium needed during the No Lapse Guarantee period.

If base or rider coverage has been added or reduced during the No Lapse period, the Company will recalculate the Minimum Monthly No Lapse Premium to reflect the new coverage. However, the No Lapse Guarantee period will not be extended.

No Lapse Guarantee Period***

We will guarantee the death benefit, regardless of Policy Value during the Minimum No Lapse Guarantee period, providing the cumulative Minimum Monthly No Lapse Premium requirements are met.

The No Lapse Guarantee period is based on issue age.

Issue Ages 0-45:	20 years
Issue Ages 46-60:	until age 65
Issue Ages 61-85:	5 years

** MNLN requirements:

1. The sum of the premiums that we have accepted (less any Loan Balance and withdrawals) must be greater than or equal to the sum of all Minimum Monthly No Lapse Premiums to that date; and
2. The No Lapse Ending Date must not have passed.

*** After the No Lapse Guarantee Period or if the cumulative Minimum Monthly No Lapse Premium requirements are not met, then fluctuations in interest rates and/or policy charges may require the payment of additional premiums to keep the policy in force. Guarantees are based on the claims-paying ability of the Company.

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If the requirements of the No Lapse Guarantee are not met and the Cash Surrender Value is not enough to meet the Monthly Deductions and Index Account Monthly Charge, a grace period will begin and the policy will lapse unless sufficient payment is made. The grace period is 61 days. Allowing the policy to lapse may result in adverse tax consequences.

Tax-Free Loans and Withdrawals*

Subject to certain limitations, the policy's Cash Surrender Value can be accessed through policy loans and withdrawals for uses such as college expenses, supplemental retirement income and other needs.

LOANS*

Here are some important details regarding loans:

- > Available after the free look period, providing there is enough policy value
- > The portion of the Policy Value borrowed is secured by transferring that amount from the Basic Interest or Index Accounts to the loan reserve.
- > Current loan interest rate is 2.75% in arrears (currently 2.00% on gains through preferred loans after year 10)
- > Maximum loan interest rate is 3.00% (maximum loan interest rate is 2.25% on gains through preferred loans after year 10)
- > We determine the amount eligible for a preferred loan by subtracting the total premiums paid, withdrawals and the loan balance from the Policy Value.
- > Loan reserve is credited with interest at 2.00% in arrears.
- > Minimum loan amount is \$500 (except FL and NY where there is no minimum).

*Loans, withdrawals and death benefit accelerations will reduce the policy value and death benefit. Provided the policy is not and does not become a modified endowment contract (MEC), 1) withdrawals are tax free to the extent that they do not exceed the policy basis (generally, premiums paid less withdrawals) and 2) policy loans are tax free as long as the policy remains in force. If the policy is surrendered or lapses, the amount of the policy loan will be considered a distribution from the policy and will be taxable to the extent that such loan plus other distributions at that time exceed the policy basis.

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- > The maximum loan amount is the Policy Value minus any existing Loan Balance, minus loan interest that will accrue prior to the next anniversary, minus the greater of:
 - > the Surrender Charge
 - > two Monthly Deductions
- > The loan will be deducted from the unloaned value in the Basic Interest Account first, then pro-rata across the the unloaned values in the Index Accounts. Within each account, loans are taken pro-rata across segments.
- > Excess Index Interest will not be credited on any amounts taken as loans from an Index Account Segment prior to the end of that Segment Period.
- > Loan repayments must be clearly designated as such or they will be applied as premium payments.
- > Any loan repayment received will be applied to the accounts as specified by the policy owner. If there is no choice it will be applied per the current premium allocation instructions.
- > Loan provisions may vary by jurisdiction.

WITHDRAWALS*

If there is enough Policy Value, policy owners may take a withdrawal at any time after the free look period without incurring company imposed surrender charges, subject to the conditions and limitations specified in the policy.

- > The minimum withdrawal amount is \$500.
- > Withdrawals cannot reduce the Cash Surrender Value below \$500.
- > Withdrawals are subject to a \$25 withdrawal fee.
- > Withdrawals will be taken on a pro rata basis from the unloaned portions of the Basic Interest Account and the Index Accounts unless otherwise requested.
- > Excess Index Interest will not be credited on any amounts taken as withdrawals from an Index Account Segment prior to the end of that Segment Period.

See the policy for a complete description of loans and withdrawals.



Account Options

Policy owners can choose between the Global Index Account, the S&P 500® Index Account, the Basic Interest Account, or any combination of the three.

The Account Options consist of one or more Segments to which net premiums and/or transfers of Policy Values have been allocated. The value of an Account Option is the sum of its Segment values. Each Segment will end on its first anniversary, one year from the beginning date of that Segment. Each net premium or transfer is allocated to a Segment associated with the policy month in which it was received. At the end of each Segment Period, a new Segment Period begins with the value from the prior Period.

Policy Value

The Policy Value is the starting point for calculating important values under the policy, such as the Cash Surrender Value and, in some circumstances, the net death benefit. There is no guaranteed minimum Policy Value. The policy may lapse if the client does not have sufficient Policy Value to pay the Monthly Deductions, the Index Account Monthly Charge, the surrender charge and/or any outstanding loan amount and accrued loan interest. The Policy Value is comprised of the value of the Basic Interest Account, the Index Accounts and the loan reserve.

Cap

The maximum percentage of Excess Index Interest that can be credited to an Index Account Segment for the 12-month Segment Period just ended. At the end of each Segment Period, we compare the Cap rate to the calculated Index Change percentage. The excess interest crediting rate equals the lesser of the Cap or the Index Change percentage, but will not be less than zero. Caps are subject to change and the Cap for any Segment may increase or decrease but will not be less than the current rate on the Basic Interest Account. The Cap is set by the Company at its discretion at the beginning of each Segment Period and may differ between Index Account Segments. Once a Cap is declared for a Segment, it applies until the beginning of the next Segment Period. Policy owners will only be informed in writing of the current Caps when they receive their Annual Statements.



Guaranteed Minimum Interest Rate (Floor)

The FFIUL policy provides a guaranteed minimum interest rate or floor. As such, no matter how the Global or S&P 500® indexes perform, the Company will never credit less than the guaranteed minimum interest rate of 0.75%.

Transfers

Transfers from an Index Account to any other account are only allowed at the end of an Index Account Segment Period. Transfers from the Basic Interest Account to an Index Account are only allowed on the first day of a policy month, which generally does not correspond to the calendar month.

Basic Interest Account

The portion of the Policy Value in the Basic Interest Account earns interest at rates declared by the Company. The interest rates on the Basic Interest Account Segments will never be less than an effective annual rate of 2.00%, but there is no guarantee that the rates will be greater than 2.00%. At the end of the Segment Period, we will declare an interest rate that will apply until the end of the next Segment Period.

Global Index Account

Instead of crediting interest at an interest rate declared in advance, Excess Index Interest may be credited to each Global Index Account Segment as of the end of the Segment Period. Any Excess Index Interest credited to the Global Index Account is based, in part, on changes in the S&P 500® Index, the EURO STOXX 50® Index and the Hang Seng Index, excluding dividend income. Amounts allocated to the Global Index Account earn interest at a guaranteed minimum effective annual interest rate of 0.75% throughout each Segment Period.

At the end of each Global Index Account Segment Period, we determine whether any Excess Index Interest (interest exceeding guaranteed minimum interest) will be credited for the Segment Period just ended. The amount of the Excess Index Interest credited at the end of the Segment Period depends on the value in the Global Index Account at the beginning of the Segment Period, any change in a weighted average of the values of the indexes, and the applicable Cap. Monthly deductions, Index Account monthly charges, and policy owner transactions such as loans or withdrawals will reduce the amount of Excess Index Interest.



No Excess Index Interest is credited during the Segment Period. Any Policy Values determined during the Segment Period, including the net death benefit or cash surrender value, will be based only on the guaranteed minimum interest credited throughout the Segment Period.

INDEX DESCRIPTIONS

- > **S&P 500® INDEX** tracks 500 large-cap common stocks actively traded in the United States, and is one of the most well known market benchmarks.
- > **EURO STOXX 50® INDEX** is comprised of 50 large-cap stocks from leading European blue-chip companies. The stocks used in this index are selected from countries in the European Union.
- > **HANG SENG INDEX** has a long history beginning in the 60s and is one of the most recognized indicators of the stock market performance in Hong Kong.

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Please read the full disclaimer in the Transamerica Financial Foundation IUL policy regarding the Hang Seng Index in relation to the policy.



Calculating Excess Index Interest

The Excess Interest, if any, for the Global Index Account is based on changes in the values of external indexes, excluding dividends. We use a weighted calculation to determine any excess interest.

To arrive at the weighted average of the index changes, we apply the following factors:

50% to the percentage change in the S&P 500® or the EURO STOXX 50® index, whichever is higher

30% to the percentage change in the S&P 500® or the EURO STOXX 50® index, whichever is lower

20% to the percentage change in the Hang Seng Index regardless of the change in its index value

The following examples illustrate the calculation. These examples are not a representation of historical, current or future index changes.

Assume the following changes in index values at the end of each Segment Period.

HYPOTHETICAL SEGMENT PERIOD RESULTS:

INDEX	INDEX CHANGE FOR SEGMENT 1	INDEX CHANGE FOR SEGMENT 2	INDEX CHANGE FOR SEGMENT 3
S&P 500®	5%	-3%	12%
EURO STOXX 50®	6%	-5%	12%
Hang Seng	7%	-7%	14%



HYPOTHETICAL EXAMPLE, CONTINUED
WEIGHTED INDEX CHANGE PERCENTAGE:

SEGMENT PERIOD 1

INDEX	INDEX CHANGE	WEIGHT	WEIGHTED INDEX CHANGE PERCENTAGE
EURO STOXX 50®	6%	50%	$(6\% \times 50\%) = 3\%$
S&P 500®	5%	30%	$(5\% \times 30\%) = 1.5\%$
Hang Seng	7%	20%	$(7\% \times 20\%) = 1.4\%$

SEGMENT PERIOD 2

INDEX	INDEX CHANGE	WEIGHT	WEIGHTED INDEX CHANGE PERCENTAGE
EURO STOXX 50®	-3%	50%	$(-3\% \times 50\%) = -1.5\%$
S&P 500®	-5%	30%	$(-5\% \times 30\%) = -1.5\%$
Hang Seng	-7%	20%	$(-7\% \times 20\%) = -1.4\%$

SEGMENT PERIOD 3

INDEX	INDEX CHANGE	WEIGHT	WEIGHTED INDEX CHANGE PERCENTAGE
EURO STOXX 50®	12%	50%	$(12\% \times 50\%) = 6\%$
S&P 500®	12%	30%	$(12\% \times 30\%) = 3.6\%$
Hang Seng	14%	20%	$(14\% \times 20\%) = 2.8\%$



Cap Rate vs. Weighted Average Index Change

The weighted index change percentages are added together and compared to the Cap rate. The Global Index Account is credited either the Cap rate or the Weighted Average Index Change, whichever is less. If the Weighted Average Index Change is negative, the Excess Index Interest is 0%. If the Weighted Average Index Change is greater than the Cap, the Weighted Average Index Change is adjusted to equal the Cap.

The Excess Index Interest for the Segment Period depends on the beginning segment value, the weighted average index change, and the applicable Cap. Monthly deductions, index account monthly charges, and policy owner transactions such as loans or withdrawals will reduce the amount of Excess Index Interest. The minimum guaranteed interest rate of 0.75% is credited on the monthly date throughout the Segment Period.

No Excess Index Interest is credited during the Segment Period. Any Policy Values determined during the Segment Period, including the net death benefit or cash surrender value, will be based only on the guaranteed minimum interest credited throughout the Segment Period.

HYPOTHETICAL EXAMPLE - ADJUSTED INDEX CHANGE PERCENTAGE

	CAP RATE	WEIGHTED INDEX CHANGE PERCENTAGES	INDEX CHANGE	ADJUSTED INDEX CHANGE PERCENTAGE
Segment Period 1	12%	$(3\% + 1.5\% + 1.4\%) = 5.9\%$	5.9%	5.9%
Segment Period 2	12%	$(-1.5\%) + (-1.5\%) + (-1.4\%) = -4.4\%$	-4.4%	0%
Segment Period 3	12%	$(6\% + 3.6\% + 2.8\%) = 12.4\%$	12.4%	12%

S&P 500[®] Index Account

Instead of crediting interest at a rate declared in advance, Excess Index Interest may be credited to each S&P 500[®] Index Account Segment, based in part on changes in the S&P 500[®] Index, excluding dividend income. Amounts allocated to the S&P 500[®] Index Account earn interest at a guaranteed minimum effective annual interest rate of 0.75% throughout each Segment Period.

The amount of Excess Index Interest credited at the end of the Segment Period depends on the value in the S&P 500[®] Index Account at the beginning of the Segment Period, any change in the value of the index, and the applicable Cap. Monthly deductions, index account monthly charges, and policy owner transactions such as loans or withdrawals will reduce the amount of Excess Index Interest.

No Excess Index Interest is credited during the Segment Period. Any Policy Values determined during the Segment Period, including the net death benefit or cash surrender value, will be based only on the guaranteed minimum interest credited throughout the Segment Period.



INDEX CHANGE

The Index Change percentage for an S&P 500® Index Account Segment is calculated as follows:

(**A** minus **B**) divided by **B**, where:

A = The Index Value on the Ending Index Date for that Segment

B = The Index Value on the Beginning Date for that Segment

The Index Value is the value of the Index, excluding dividends, as of 4:00 p.m. Eastern time on the date the Index is published.

The **Index Change percentage** is adjusted so that it will neither exceed the applicable Index Account Segment Cap nor be less than 0%. The Cap puts an upper limit on the Index Change. The Beginning Index Date is the first Monthly Date for an Index Account Segment. The Ending Index Date is the Monthly Date twelve policy months after the Beginning Index Date. Beginning Index Dates and Ending Index Dates are reset on each Segment anniversary.

Excess Index Interest for an Index Account Segment as of its Ending Date is calculated as follows:

(**a** multiplied by **b**) minus **c** where:

a: The **Index Change percentage** as described above.

b: The Segment's adjusted beginning value determined as of the Segment's Beginning Date. We start with any value renewing from a prior Segment Period, after we have applied any Excess Index Interest for that period and deducted any transfers from the Segment occurring at that time. Then we add any net premiums, loan repayments and transfers applied to the Segment on its Beginning Date. Finally, we subtract amounts due to the following activity occurring during the Segment Period:

1. Any amounts deducted for withdrawals;
2. Any amounts transferred for policy loans; and
3. One-half of the amounts taken for Monthly Deductions and Index Account Monthly Charges.

c: Any interest previously credited to the Segment during the Segment Period at the Index Account Guaranteed Minimum Interest Rate.

The Excess Index Interest credited to an Index Account Segment will never be less than zero.



Automatic Transfer Rule

By default, renewing Segments roll over to the same account type (for example S&P 500® Index Account rolls over to S&P 500® Index Account, Global Index Account rolls to the Global Index Account, and the Basic Interest Account rolls to Basic Interest Account) unless the owner gives specific transfer instructions prior to the Segment renewal. The owner can submit the Index Universal Life Insurance Optional Feature Request Form (at issue or any time thereafter) to override the default with a specified Index Account Automatic Transfer Rule (ATR), which allows transfers to happen automatically upon renewal of the Segment. This feature is not available if Dollar Cost Averaging is active.

Example of Account Value totals in each account before and after Automatic Transfer Rule

INDEX ACCOUNT	ACCOUNT VALUE IN RENEWING SEGMENT BEFORE ATR	AUTOMATIC TRANSFER RULE INSTRUCTIONS	ACCOUNT VALUE IN RENEWING SEGMENT AFTER ATR
Global Index Account	\$3,000	25%	\$1,500
S&P 500® Index Account	\$2,000	65%	\$3,900
Basic Index Account	\$1,000	10%	\$600
Total	\$6,000	100%	\$6,000

Dollar Cost Averaging

Dollar cost averaging is a strategy which spreads the allocation of net premium into the index accounts over a period of time. Under dollar cost averaging, we automatically transfer a set dollar amount from the Basic Interest Account to index accounts chosen by the policy owner. (Not available if Automatic Transferring is active). The policy owner may transfer to any combination of index accounts. Transfers to the Index Account(s) will only take place on the monthly policy date. A minimum of \$5,000 is required in the Basic Interest Account. The Minimum Transfer Amount is \$100.



Reinstatement

The owner may elect to reinstate the policy within three years of the date the policy lapses. Evidence of insurability is required to reinstate, and the Insured must qualify for the same class of risk.

If the No Lapse Period has expired, the net premium amount required to reinstate would be equal to:

- > One Monthly Deduction and Index Account Monthly Charge due at the time of termination, plus
- > Two Monthly Deductions and Index Account Monthly Charges due in advance at the time of reinstatement; plus
- > An amount sufficient to increase the Policy Value above any surrender charge.

The amount needed to reinstate the policy during the No Lapse Guarantee Period would be the lesser of the above or:

- > The total Minimum Monthly No Lapse Premium from issue through the month of lapse, plus
- > Two months of Minimum Monthly No Lapse Premium, minus
- > Any premiums already paid net of any withdrawals and loan balance.

The No Lapse Period is not extended by the amount of time the policy was in a lapse status.

The Company will not reinstate a Loan Balance on the contract. The period of time in which the policy was in a lapse status does not count toward the surrender charge period. For example, a policy that lapses in year five and is reinstated in year eight will have 10 years left of surrender charges.



Summary Of Charges

Premium Expense Charge

The following charge is applied to all premium payments, including 1035 Exchanges, prior to the payment being allocated to the Account Options.

Current: 4% in all years (6% in Puerto Rico)

Guaranteed: 6% in all years (8% in Puerto Rico)

Index Account Monthly Charge

The Index Account Monthly Charge is 0.06% (0.72% annually) of the Index Account Value (current and guaranteed). This charge is taken on the Monthly Policy Date through age 120, pro-rata by account value, then pro-rata across segments within each account.

Monthly Deductions

Monthly Deductions will be taken from the Basic Interest Account and the Index Accounts in proportion to the values of those accounts on the Monthly Policy Date. The Monthly Policy Date is the same day in each month as the policy date. Monthly Deductions will be deducted pro-rata by account value, then pro-rata across segments within each account.

On each Monthly Policy Date, a deduction will be made from the Policy Value equal to the sum of the following fees and charges:

MONTHLY POLICY FEE

Current: \$10

Guaranteed Maximum: \$12

MONTHLY COST OF INSURANCE CHARGE

The current monthly Cost of Insurance (COI) charge depends on several factors such as the Face Amount, risk class, age, gender, and duration, as well as the difference between the Policy Value and death benefit. The COI charges will vary each month. Please see the policy for details.



PER UNIT CHARGE

The Per Unit Charge is shown in the policy data pages. On a current basis, this charge applies for the first ten policy years and ten years from the date of any requested increase in Face Amount, decreasing over the ten year period. On a guaranteed basis, this charge remains level through all years. This charge varies by issue age, sex, band and tobacco use. This charge is also applied to any Additional Insured Rider for ten years from rider issue date and ten years from the date of any increase in rider Face Amount.

Any change in the Per Unit Charge will be applied uniformly to all policies with the same Face Amount, age, sex and class of risk that have been in effect for the same length of time.

Rider charges, if any.

Flat extra or table substandard ratings, if any.

We have the right to change current charges and Cost of Insurance rates. We may not charge more than the guaranteed maximum charges or rates. Any changes to charges or rates will be based on our expectations as to future cost factors. Such cost factors may include, but are not limited to, mortality, interest, persistency, expenses, reinsurance costs, and state and federal taxes.

Surrender Charges

The surrender charge is a charge for each \$1,000 of the initial Face Amount and each increase in Face Amount. Surrender charges apply for the first 15 Policy Years and for 15 years from the date of any Face Amount increase. This charge is subtracted from the Policy Value in determining the Cash Surrender Value available to the policy owner. Charges are based on the insured's issue age, gender and risk class. These charges may be significant and should be carefully considered before surrendering the contract. The amount received upon full surrender is the Policy Value less any surrender charges, any policy loan outstanding and any interest due on policy loans.



Opportunity for Enhanced Protection

With several riders* available, clients can select additional options for their policy.

Base Insured Rider

ISSUE AGES:

	NATIONAL AND NY	FLORIDA
Preferred Elite	18-70	18-70
Preferred Plus	18-70	18-70
Preferred	18-75	18-75
Non-Tobacco	18-85	18-75
Preferred Tobacco	18-75	18-75
Tobacco	18-85	18-75

This rider provides additional level term insurance coverage at term insurance rates. The minimum Base Insured Rider (BIR) face amount is \$100,000.

	WITHOUT LTC RIDER	WITH LTC RIDER (LTC ONLY AVAILABLE AT ISSUE)
Maximum BIR face amount	10 times the base policy face amount	Lesser of the base policy face amount or \$1.5 million (\$3 million combined base + BIR)

Termination of the Base Insured Rider is at the insured's age 100 or as specified in the rider. This rider does not build Policy Value and is not subject to surrender charges. Rider coverage may be reduced or cancelled without reducing coverage of or canceling the base policy. This rider will not increase the Target.

*Riders are available at an additional cost. Riders and rider benefits have specific limitations and may not be available in all jurisdictions. For complete details including the terms and conditions of each rider and exact coverage provided, please contact the Company



Additional Insured Rider

ISSUE AGES:

	NATIONAL AND NY	FLORIDA
Preferred Elite	18-70	18-70
Preferred Plus	18-70	18-70
Preferred	18-75	18-75
Non-Tobacco	18-85	18-80
Preferred Tobacco	18-75	18-75
Tobacco	18-85	18-80

This rider provides coverage on a spouse, dependent child, or other individual in whom the owner has an insurable interest. Insurable interest must be explained at the time of application. The minimum purchase amount is \$25,000; the maximum is the lesser of \$1,000,000 or total coverage on the base insured.

FACE AMOUNT BANDS

- > Band1: \$25,000 - \$99,999
- > Band 2: \$100,000 +

This rider may be converted to a permanent policy upon written request prior to the additional insured's 70th birthday. It terminates at the earliest of the base insured's age 121, the additional insured's age 100, the date the rider is converted, or as specified in the rider. Up to five Additional Insured Riders may be added. This rider is not available if the Long Term Care Rider is elected.



Children's Benefit Rider

Issue age of Insured: 18-55. Issue ages of Child: 15 days – 18 years old. This rider provides level term insurance coverage for the insured's children. The minimum purchase amount is \$1,000; the maximum is \$99,000. This rider may be converted to a permanent policy for a Face Amount up to the lesser of five times the rider's Face Amount, or \$50,000, at the earlier of the child's age 25 or the child's marriage. Upon the death of the primary insured, we will provide covered children the option of either a fully paid up term policy to the child's age 25 for the amount of the rider, or conversion of the rider face amount to permanent insurance. If we do not receive a response within 90 days, we will automatically issue a fully paid up term policy for each insured child. The cost for this rider is \$6.00 per thousand annually. This rider is not available if the Long Term Care Rider is elected.

Guaranteed Insurability Benefit Rider

Issue ages: 0-37. This rider provides the option to purchase additional life insurance without evidence of insurability at the same underwriting class that currently applies to the base policy. Regular option dates are policy anniversaries following the insured's 22nd, 25th, 28th, 31st, 34th, 37th, and 40th birthdays. Alternate option dates are available after the insured's marriage, birth or adoption of a child, or college graduation. This rider is not available if the Long Term Care Rider is elected.

Disability Waiver of Monthly Deductions Rider**

Issue ages: 18-55. Subject to certain conditions, this rider waives the policy's Monthly Deductions when we receive proof that, while the rider was in force, the insured became totally disabled (as defined in the rider), the total disability began before the policy anniversary on or following the Insured's Age 65, and the insured's total disability has existed continuously for at least six months. This rider does not waive any Monthly Deduction that comes due more than one year before we receive a written claim, after the insured's recovery from disability, or after termination of the rider; nor does it waive the Index Account Monthly Charge. This rider terminates at the Insured's age 65, unless at that time we have been waiving deductions continuously since before the Insured's Age 60, or as specified in the rider. Not available with the Disability Waiver of Premium Rider or the Long Term Care Rider.



Disability Waiver of Premium Rider***

Issue ages: 18-55. Subject to certain conditions, this rider applies the rider benefit amount shown in the policy as if it were a premium payment into the policy, when we receive proof that while the rider was in force, the insured became totally disabled (as defined in the rider), the insured's total disability began before the policy anniversary on or following the Insured's Age 65, and the insured's total disability has existed continuously for at least six months. This rider will not cover any premiums that were due more than one year before we receive a written claim. The rider terminates at the Insured's Age 65, unless at that time we have been waiving premiums continuously since before the Insured's Age 60, or as specified in the rider. Not available with the Disability Waiver of Monthly Deductions Rider or the Long Term Care Rider.

**It is possible that additional payments will be required to keep a policy in force while the monthly deductions are being waived. For example, loan interest accruing on an outstanding loan may require additional payments.

***It is possible that additional payments will be required to keep a policy in force while the Disability Waiver of Premium Benefit is being paid. For example, an increase in monthly deductions or decrease in Policy Value may require additional payments.

Accidental Death Benefit Rider

Issue ages: 15-55. The minimum rider face amount is \$2,000. For face amounts below \$200,000 the maximum is the lesser of:

- 1) 2 1/2 times base face amount; or
- 2) \$200,000

and

For face amounts of \$200,000 and up the maximum is the lesser of:

- 1) The base face amount; or
- 2) \$300,000

This benefit pays the Face Amount of the rider if the insured's death results directly from an accidental bodily injury, independent from all other causes. The death must occur within 90 days of the accidental bodily injury and the injury must occur on or before the policy anniversary following the insured's 70th birthday. The rider will terminate on the policy anniversary after the insured attains age 70 or as specified in the rider. This rider is not available if the Long Term Care Rider is elected.



Overloan Protection Rider (OPR)

As long as certain requirements are met, the OPR provides the policy owner with an option to prevent a policy lapse from occurring due to excessive loans. If such requirements are met and the policy owner chooses to exercise the option, the policy will become a paid-up policy, keeping the policy in force and preventing loans from being taxable, while still providing a small death benefit to the insured's beneficiaries.

The OPR is automatically included at issue on all Guideline Premium Test policies that are not Modified Endowment Contracts (MEC). There is no charge for this rider unless it is exercised*. The OPR cannot be exercised if the client is receiving LTC benefits. Once the OPR is exercised, there is a one-time charge assessed as a percentage of the Policy Value, based on the age of the insured (see chart below).

AGE	PERCENTAGE
75-90	5%
91	4%
92	3%
93	2%
94-120	1%

Long Term Care Rider

The Long Term Care (LTC) rider is designed to accelerate payment of the Face Amount of the base policy to provide policy owners with certain benefits to help offset expenses that arise in connection with long term care for the insured. The rider provides a benefit for long term care equal to the base Face Amount selected by the policy owner. Available only at issue, the minimum LTC rider specified amount is \$100,000** and the maximum is \$2,000,000 without the base insured rider elected. If both the base insured rider (BIR) and LTC are elected, the BIR cannot be more than the Base Face amount, and the total combined face amount cannot exceed \$3 million. For additional details on the LTC rider, please see the LTC Rider Agent Guide.

*The election to exercise the OPR is irrevocable. Once the Rider Benefit has been exercised, all other riders attached to the policy will terminate and no further policy activity will be allowed. Also, loan interest will continue to accrue and any interest or principal may be repaid.

**Minimum LTC Rider Specified Amount in Vermont is \$112,500; South Dakota, \$150,000.



Living Benefit Riders

Availability of the living benefit riders is subject to state approval.

For complete details of these benefits, please consult the specific rider form.

Terminal Illness Accelerated Death Benefit Rider

This option is designed to provide the policy owner with the option to receive a portion of the policy's death benefit in advance of death, in a lump sum payment, when the insured is certified by a licensed physician as being terminally ill and is expected to die within 12 months of such diagnosis. There are several factors that determine the amount of the benefit we will pay including life expectancy, the interest rate then in effect, and the portion of the death benefit that is accelerated. Any accelerated death benefit payment we make to a policy owner will be less than the amount of the available death benefit that is accelerated.

If the Insured makes a claim for benefits under two or more Accelerated Death Benefit riders at the same time, benefits will first be payable under this rider.

The maximum amount that may be accelerated is the lesser of:

- > 100% of the policy's face amount at time of claim;
- > or \$1,500,000

The minimum amount that may be accelerated is \$5,000.

Some portion of the payments may be taxable, and policy owners are advised to consult with their tax advisors when making a request for an Accelerated Death Benefit.

The base policy and all riders will terminate if 100% of the death benefit is accelerated on a policy. Availability of this option is subject to state approval.



Critical Illness Rider*

If the insured is determined to be Critically Ill a portion of the death benefit can be accelerated in advance of death.

A physician must certify that the insured has suffered a critical health condition such as:

- I. Heart attack (myocardial infarction)—the death of a portion of the heart muscle resulting from inadequate blood supply to the relevant area. The heart attack must have been severe enough to require an inpatient hospital stay and any impairment sustained as a result of the heart attack must be evident for at least 30 days after hospital discharge. Heart attack does not include angina or the chance finding of electrocardiographic (EKG) changes indicative of a previous heart attack.

The diagnosis of heart attack must be based on the presence of all of the following:

- A. Chest pain;
 - B. Associated new EKG changes which support the diagnosis; and
 - C. Elevation of cardiac enzymes above standard laboratory levels
- II. Stroke—a cerebrovascular accident (CVA) or infarction of brain tissue caused by hemorrhage, embolism, or thrombosis lasting more than 24 hours and producing measurable neurological deficit which persists for at least 30 consecutive days following the occurrence of the stroke. Stroke does not include transient ischemic attacks.
 - III. Cancer—a disease manifested by the presence of one or more malignant tumors and characterized by the uncontrolled growth and spread of malignant cells and the invasion of normal tissue. Cancer does not include:
 - A. Any skin cancer, except invasive malignant melanoma into the dermis or deeper;
 - B. Pre-malignant lesions, benign tumors, or polyps; or
 - C. Carcinoma in-situ.
 - IV. End stage renal failure—chronic irreversible and total failure of both kidneys which requires the Insured to undergo renal transplantation or regular renal dialysis. The permanent renal failure must persist for a period of at least 90 days.
 - V. Major organ transplant—the receipt by transplant of any of the following organs or tissues: heart, lungs, liver, kidney, pancreas, or bone marrow. Transplantation means the replacement of the recipient's malfunctioning organ(s) or tissue, with the organ(s) or tissue from a donor suitable under generally acceptable medical procedures.
 - VI. Amyotrophic Lateral Sclerosis (ALS)/ Lou Gehrig's disease.
 - VII. Blindness—permanent and uncorrectable loss of sight in both eyes resulting from diabetic retinopathy. The Blindness must be confirmed by a Physician who is an Ophthalmologist. The corrected visual acuity must be worse than 20/200 in both eyes and the field of vision must be less than 20 degrees in both eyes.
 - VIII. Paralysis—complete and permanent loss of use of two or more limbs through neurological injury producing paralysis resulting from trauma, CVA, polio, ALS, multiple sclerosis or Guillain-Barre syndrome. The Paralysis must be confirmed to have been present by a Physician for a continuous period of at least 180 days from the time the paralysis begins.



Benefits will not be available during the first 30 days the policy is in force unless the critical illness results from accidental injury.

The maximum amount that may be accelerated is the lesser of:

- > 90% of the Death benefit amount at time of claim; or
- > \$500,000.

If less than the maximum amount is accelerated, this option may be exercised up to two additional times after the initial acceleration.

The minimum request amount that may be accelerated is \$2,500.

The amount of the accelerated death benefit payment will be no less than the greater of:

1. \$1,000, and
2. 90% of the difference between the Policy Value, if any, and any Loan Balance.

Some portion of the payments may be taxable, and policy owners are advised to consult with their tax advisors when making a request for an Accelerated Death Benefit.

*Currently, the total face amount, including BIR, cannot exceed \$3 million when the Chronic and/or Critical Illness Riders are included with the policy. Increases will not be allowed to cause the face amount to exceed this limit.



Chronic Illness Rider*

If the insured is determined to be Chronically Ill, a portion of the death benefit can be accelerated in advance of death. A licensed health care practitioner must certify that the insured is unable to perform without substantial assistance from another person, at least two of six activities of daily living (bathing, continence, dressing, eating, toileting and transferring) for a period of 90 consecutive days; or requires substantial supervision by another person for a period of 90 consecutive days to protect himself or herself from threats to health and safety due to severe cognitive impairment.

The maximum amount that we will accelerate in any 12 month period is the minimum of 1) 24% (annually) of the policy's eligible death benefit at time of the claim, or 2) the limitation set by the IRS.

The maximum amount that may be accelerated over the lifetime of the insured is the lesser of:

- > 90% of the available Death benefit amount at time of claim; or
- > A maximum Accelerated Death Benefit amount declared by us. This amount will never be less than \$500,000 and is currently a cumulative amount of \$1,500,000 per insured, including all other accelerated death benefits previously elected or currently under review under all policies, endorsements or riders issued by us or our affiliates.

The minimum request amount that may be accelerated is \$1,000 annually.

The amount of the accelerated death benefit payment will be no less than the greater of:

1. \$300, and
2. 90% of the difference between the Policy Value, if any, and any Loan Balance.

Some portion of the payments may be taxable, and policy owners are advised to consult with their tax advisors when making a request for an Accelerated Death Benefit.

*Currently, the total face amount, including BIR, cannot exceed \$3 million when the Chronic and/or Critical Illness Riders are included with the policy. Increases will not be allowed to cause the face amount to exceed this limit.



Determining the Benefit Amount

Factors taken into account for both chronic and critical illness benefits when determining the amount to payout:

- > The amount of death benefit accelerated and the future premiums that would be due.
- > The Company' assessment of the life expectancy of the insured, which is based on age and overall medical condition at time of claim.
- > Accelerated benefit interest rate in effect (used to determine the present value of future benefits and premiums).
- > Any administrative fees assessed.

The death benefit is reduced based on the factors above to arrive at the final payout amount. Therefore, the more severe/life threatening an insured' condition, the shorter his or her life expectancy and the more benefit the policy owner will receive.

Living Benefits State Variations

Chronic Illness Rider

Connecticut: Chronic Illness Rider is not currently available in this state

Critical Illness Rider

Connecticut: Critical Illness Rider is not currently available in this state

Administrative Charges

An administrative charge will be assessed for each accelerated death benefit request. The charge will be \$350 but will be subject to future increases based on increases in the Consumer Price Index (CPI). Any CPI increases will not exceed 5% per calendar year. For any Chronic Illness Accelerated Death Benefit requests after the first annual payment that are paid pursuant to annual recertifications, we will assess a \$100 administrative charge which will not be subject to any CPI increases.



Living Benefit Rider FAQs

Frequently asked questions about the accelerated death benefit options.

1. What factors are taken into account for both chronic and critical illness options when determining the amount to payout?
 - a. The amount of death benefit accelerated and the future premiums that would be due.
 - b. The Company's assessment of the life expectancy of the insured, which is based on age and overall medical condition at time of claim.
 - c. Accelerated benefit interest rate in effect (used to determine the present value of future benefits and premiums).
 - d. Any administrative fees assessed.

The death benefit is reduced based on the factors above to arrive at the final payout amount. Therefore, the more severe/life threatening a client's condition, the shorter their life expectancy the more benefit the client will receive.

2. How much will a policy owner receive if the insured suffers from a chronic illness or critical illness?
 - a. There is not a set amount. The final number will be determined based on each individual and the factors shown above at the time of the critical or chronic event.
3. Can a "partial" election be taken (instead of the full amount available)?
 - a. Yes. A policy owner does not have to take the full election at the time of the initial claim. If a partial election is made and there is another qualifying critical or chronic illness event in the future while the policy is still inforce, the policy owner can file again for benefits at that time. However, chronic illness benefits may be claimed no more frequently than annually and the critical illness rider will terminate after three claims.
 - b. The \$350 administrative charge applies for each request.
4. What happens if an insured qualifies for both the critical and chronic illness benefits?
 - a. At claim time, the policy owner has the option to file the claim under the critical illness option or the chronic illness option.
5. If an election of 90% is accelerated for a critical or chronic illness, will some life insurance (death benefit) be inforce?
 - a. Yes! This means, at minimum, 10% of the death benefit will remain.

For example, if someone has a \$100,000 death benefit and accelerates 90% due to a critical or chronic illness, the insured still has a \$10,000 death benefit remaining. The less accelerated, the more death benefit remaining. The accelerated payout will be less than the \$90,000 acceleration.



6. What is the effect on the policy when the death benefit is accelerated for Critical or Chronic Illness?
 - a. In addition to reducing the Death Benefit, the Face amount, Policy Value, Loan Balance and MNLPs will all be reduced by the Election percentage.
7. Are any riders included in the amount of death benefit that is accelerated for the LB benefits?
 - a. Yes, the Base Insured Rider (BIR) face amount is added to the base face amount when determining the amount that can be accelerated.
8. Is it possible to get approved for the FFIUL and declined for the critical illness rider?
 - a. Yes. It is also possible to get declined for the Chronic Illness Rider or the Terminal Illness Rider.
9. Are these riders only available at issue, or can they be added after the policy is active?
 - a. Critical Illness Rider, Chronic Illness Rider and Terminal Illness Rider are only available at issue.
10. If a policy owner has LTCR, BIR and Critical Illness, what will happen if the maximum long term care rider has been paid out and then there is a Critical Illness claim?
 - a. LTCR will only accelerate the Base Face Amount (=LTCR Specified Amount). The BIR is not available for acceleration for LTCR. But, the BIR is available for acceleration under the Critical Illness Rider.
11. Are there any other rider restrictions when the Chronic and/or Critical Illness riders are elected?
 - a. Yes, the Chronic Illness rider is not available in conjunction with the Long Term Care Rider.
12. What is the maximum benefit available per insured?
 - a. The maximum death benefit amount that can be accelerated is \$1,500,000, including all other accelerated death benefits previously elected or currently under review under all policies, endorsements or riders issued by us or our affiliates on the life of the insured. Terminal illness accelerated benefits are not included in this total amount.



Base Annual Minimum Premium Rates (per \$1,000)
Face Amounts \$25,000 - \$99,999

ISSUE AGE	MALE			ISSUE AGE	MALE	
	JUVENILE	TOBACCO	NON-TOBACCO		TOBACCO	NON-TOBACCO
0	8.47			43	24.45	19.42
1	8.58			44	25.45	20.11
2	8.70			45	26.45	20.80
3	8.81			46	27.51	21.54
4	8.92			47	28.65	22.31
5	9.04			48	29.83	23.12
6	9.16			49	31.10	24.02
7	9.29			50	32.55	25.00
8	9.43			51	34.02	26.01
9	9.57			52	35.65	27.06
10	9.72			53	37.41	28.23
11	9.87			54	39.29	29.40
12	10.03			55	41.32	30.70
13	10.21			56	43.39	32.13
14	10.40			57	45.63	33.72
15	10.60			58	47.95	35.35
16	10.78			59	50.27	36.97
17	10.97			60	55.68	38.96
18		10.62	9.89	61	64.36	43.25
19		10.75	9.95	62	70.58	45.67
20		10.90	10.02	63	77.30	48.27
21		11.14	10.11	64	84.62	51.05
22		11.35	10.19	65	92.55	54.00
23		11.59	10.28	66	94.29	57.02
24		11.84	10.36	67	95.87	60.27
25		12.14	10.46	68	97.27	63.79
26		12.46	10.69	69	102.55	67.54
27		12.81	10.89	70	107.91	71.60
28		13.19	11.10	71	116.60	78.19
29		13.65	11.39	72	121.49	82.77
30		14.09	11.66	73	126.60	87.71
31		14.64	11.96	74	131.92	93.01
32		15.16	12.33	75	151.01	106.59
33		15.79	12.67	76	157.17	113.15
34		16.45	13.01	77	163.69	119.43
35		17.10	13.44	78	170.64	126.21
36		17.91	13.86	79	178.10	133.56
37		18.78	14.39	80	186.14	141.51
38		19.76	14.93	81	194.85	150.11
39		20.82	15.48	82	204.34	159.42
40		21.87	16.31	83	214.58	169.48
41		22.69	17.40	84	225.45	180.33
42		23.55	18.56	85	236.96	192.02



Base Annual Minimum Premium Rates (per \$1,000)
Face Amounts \$25,000 - \$99,999

ISSUE AGE	FEMALE			ISSUE AGE	FEMALE	
	JUVENILE	TOBACCO	NON-TOBACCO		TOBACCO	NON-TOBACCO
0	8.01			43	22.41	17.60
1	8.09			44	23.26	18.19
2	8.18			45	24.18	18.82
3	8.29			46	25.14	19.45
4	8.40			47	26.17	20.12
5	8.51			48	27.22	20.84
6	8.63			49	28.35	21.59
7	8.75			50	29.61	22.44
8	8.86			51	30.88	23.28
9	8.98			52	32.25	24.22
10	9.10			53	33.74	25.23
11	9.22			54	35.27	26.27
12	9.35			55	36.98	27.38
13	9.48			56	38.81	28.63
14	9.58			57	40.81	29.94
15	9.68			58	42.84	31.26
16	9.75			59	44.82	32.55
17	9.87			60	49.52	34.16
18		9.53	9.18	61	57.30	37.95
19		9.67	9.25	62	62.66	39.98
20		9.82	9.32	63	68.48	42.12
21		10.00	9.42	64	74.80	44.40
22		10.19	9.51	65	81.64	46.86
23		10.39	9.61	66	83.12	49.40
24		10.64	9.70	67	84.47	52.12
25		10.85	9.81	68	85.71	55.06
26		11.14	9.98	69	90.33	58.21
27		11.45	10.15	70	95.23	61.62
28		11.85	10.32	71	104.35	67.36
29		12.22	10.56	72	109.98	71.23
30		12.60	10.76	73	115.60	75.40
31		13.05	10.99	74	120.88	79.91
32		13.56	11.29	75	139.62	91.69
33		14.05	11.54	76	146.07	97.63
34		14.62	11.81	77	152.98	104.05
35		15.17	12.29	78	160.41	110.69
36		15.86	12.84	79	168.41	117.08
37		16.63	13.46	80	176.97	123.97
38		17.38	14.19	81	186.02	131.40
39		18.27	14.77	82	195.55	139.43
40		19.25	15.55	83	205.51	148.18
41		20.49	16.48	84	215.95	157.75
42		21.58	17.02	85	227.07	168.02



Base Annual Minimum Premium Rates (per \$1,000)

Face Amounts \$100,000 and up

ISSUE AGE	MALE			ISSUE AGE	MALE	
	JUVENILE	TOBACCO	NON-TOBACCO		TOBACCO	NON-TOBACCO
0	2.96			43	11.17	10.08
1	3.03			44	12.03	10.74
2	3.11			45	12.80	11.32
3	3.20			46	13.53	11.85
4	3.17			47	14.26	12.38
5	3.17			48	14.99	12.90
6	3.17			49	15.81	13.63
7	3.17			50	17.07	14.54
8	3.17			51	17.93	15.28
9	3.17			52	19.74	16.01
10	3.17			53	21.90	17.00
11	3.17			54	24.46	17.73
12	3.17			55	27.80	18.73
13	3.27			56	30.54	19.99
14	3.37			57	33.39	21.53
15	3.47			58	36.34	23.74
16	3.52			59	39.20	26.18
17	3.66			60	42.66	29.66
18		3.80	3.60	61	45.25	31.38
19		3.85	3.65	62	47.85	32.96
20		3.89	3.70	63	50.79	34.67
21		4.07	3.78	64	53.88	36.43
22		4.14	3.85	65	57.15	38.29
23		4.22	3.93	66	60.61	39.90
24		4.29	3.99	67	64.28	41.62
25		4.47	4.07	68	67.61	43.29
26		4.65	4.36	69	71.08	45.06
27		4.84	4.54	70	84.65	56.05
28		5.00	4.70	71	89.00	59.82
29		5.28	4.98	72	93.38	63.60
30		5.46	5.17	73	97.95	67.71
31		5.78	5.38	74	102.73	72.18
32		5.97	5.68	75	110.27	77.06
33		6.29	5.89	76	115.31	82.67
34		6.59	6.09	77	120.42	87.85
35		6.80	6.41	78	126.11	93.82
36		7.18	6.68	79	132.82	100.71
37		7.59	7.10	80	140.73	108.68
38		8.07	7.48	81	150.07	117.90
39		8.57	7.87	82	161.05	128.57
40		9.06	8.36	83	170.80	140.86
41		9.72	8.93	84	180.88	154.89
42		10.41	9.52	85	191.63	170.63



Base Annual Minimum Premium Rates (per \$1,000)

Face Amounts \$100,000 and up

ISSUE AGE	FEMALE			ISSUE AGE	FEMALE	
	JUVENILE	TOBACCO	NON-TOBACCO		TOBACCO	NON-TOBACCO
0	2.63			43	10.48	9.79
1	2.69			44	11.14	10.34
2	2.75			45	11.81	10.92
3	2.83			46	12.44	11.36
4	2.90			47	13.17	11.88
5	2.99			48	13.79	12.31
6	3.08			49	14.52	12.84
7	3.16			50	15.56	13.63
8	3.17			51	16.30	14.18
9	3.17			52	17.22	15.00
10	3.17			53	18.78	15.87
11	3.17			54	20.91	16.71
12	3.17			55	23.84	17.60
13	3.27			56	26.20	18.87
14	3.37			57	28.92	20.11
15	3.47			58	31.60	21.20
16	3.52			59	34.15	23.18
17	3.66			60	37.27	26.25
18		3.80	3.60	61	39.57	28.08
19		3.85	3.65	62	41.83	29.88
20		3.89	3.70	63	44.31	31.59
21		3.98	3.78	64	46.84	33.33
22		4.04	3.85	65	49.50	34.92
23		4.13	3.93	66	52.29	36.21
24		4.29	3.99	67	55.11	37.53
25		4.37	4.07	68	57.80	39.01
26		4.55	4.26	69	60.47	40.57
27		4.73	4.44	70	73.10	47.42
28		5.00	4.61	71	77.48	50.22
29		5.18	4.88	72	81.84	52.97
30		5.36	5.06	73	86.07	56.03
31		5.58	5.28	74	89.92	59.43
32		5.87	5.58	75	94.30	63.28
33		6.09	5.79	76	99.60	68.24
34		6.38	5.99	77	105.65	73.57
35		6.60	6.30	78	112.77	79.03
36		6.98	6.59	79	121.01	84.14
37		7.40	6.90	80	130.06	90.22
38		7.67	7.28	81	140.00	97.28
39		8.07	7.58	82	150.98	105.24
40		8.47	7.97	83	162.42	114.37
41		9.13	8.53	84	172.03	124.82
42		9.82	9.13	85	182.35	136.42



Base Commission Target Rates (per \$1,000)

ISSUE AGE	MALE			ISSUE AGE	MALE	
	JUVENILE	TOBACCO	NON-TOBACCO		TOBACCO	NON-TOBACCO
0	4.15			43	15.63	14.11
1	4.24			44	16.84	15.04
2	4.36			45	17.92	15.84
3	4.47			46	18.94	16.59
4	4.43			47	19.96	17.33
5	4.43			48	20.98	18.06
6	4.43			49	22.13	19.08
7	4.43			50	23.90	20.36
8	4.43			51	25.07	21.39
9	4.43			52	26.65	22.41
10	4.43			53	28.37	23.79
11	4.43			54	30.24	24.82
12	4.43			55	32.21	26.22
13	4.58			56	34.55	27.98
14	4.71			57	37.15	30.15
15	4.85			58	39.54	31.98
16	4.92			59	41.25	33.13
17	5.12			60	44.02	35.73
18		5.31	5.04	61	47.02	38.55
19		5.39	5.10	62	50.01	41.39
20		5.45	5.18	63	53.01	44.26
21		5.70	5.29	64	56.01	47.11
22		5.80	5.39	65	59.01	49.97
23		5.91	5.50	66	62.00	52.10
24		6.01	5.59	67	65.01	54.25
25		6.26	5.70	68	68.00	56.39
26		6.51	6.10	69	71.00	58.54
27		6.77	6.35	70	73.50	60.67
28		7.00	6.58	71	73.50	62.81
29		7.39	6.97	72	73.50	64.95
30		7.64	7.23	73	73.50	67.10
31		8.09	7.53	74	73.50	69.25
32		8.36	7.95	75	73.50	71.38
33		8.80	8.24	76	73.50	73.50
34		9.22	8.53	77	73.50	73.50
35		9.51	8.97	78	73.50	73.50
36		10.05	9.36	79	73.50	73.50
37		10.63	9.93	80	73.50	73.50
38		11.30	10.47	81	73.50	73.50
39		11.99	11.01	82	73.50	73.50
40		12.68	11.71	83	73.50	73.50
41		13.61	12.50	84	73.50	73.50
42		14.57	13.32	85	73.50	73.50



Base Commission Target Rates (per \$1,000)

ISSUE AGE	FEMALE			ISSUE AGE	FEMALE	
	JUVENILE	TOBACCO	NON-TOBACCO		TOBACCO	NON-TOBACCO
0	3.68			43	14.67	13.70
1	3.77			44	15.59	14.48
2	3.85			45	16.54	15.29
3	3.96			46	17.42	15.90
4	4.06			47	18.44	16.63
5	4.18			48	19.31	17.23
6	4.31			49	20.33	17.98
7	4.42			50	21.78	19.08
8	4.43			51	22.82	19.85
9	4.43			52	24.11	21.00
10	4.43			53	25.79	22.22
11	4.43			54	27.10	23.39
12	4.43			55	28.94	24.64
13	4.58			56	30.98	26.42
14	4.71			57	33.58	28.15
15	4.85			58	35.55	29.56
16	4.92			59	36.70	30.12
17	5.12			60	39.17	32.17
18		5.31	5.04	61	41.97	34.64
19		5.39	5.10	62	44.69	37.17
20		5.45	5.18	63	47.40	39.69
21		5.57	5.29	64	50.11	42.20
22		5.66	5.39	65	52.82	44.73
23		5.78	5.50	66	55.53	46.80
24		6.01	5.59	67	58.24	48.87
25		6.12	5.70	68	60.96	50.94
26		6.37	5.96	69	63.67	53.01
27		6.63	6.22	70	66.38	55.08
28		7.00	6.45	71	69.09	57.15
29		7.26	6.84	72	71.81	59.22
30		7.51	7.09	73	73.50	61.30
31		7.81	7.39	74	73.50	63.37
32		8.22	7.81	75	73.50	65.44
33		8.53	8.11	76	73.50	68.41
34		8.94	8.39	77	73.50	71.38
35		9.24	8.82	78	73.50	73.50
36		9.78	9.22	79	73.50	73.50
37		10.35	9.66	80	73.50	73.50
38		10.74	10.19	81	73.50	73.50
39		11.30	10.61	82	73.50	73.50
40		11.85	11.16	83	73.50	73.50
41		12.78	11.94	84	73.50	73.50
42		13.74	12.78	85	73.50	73.50



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