

AGENT REFERENCE GUIDE

Protection for yours



Providing for others



NSS Life
Family Matters...

1301 Ashwood Drive, Canonsburg, PA 15317 | (724) 731-0094

THE NATIONAL SLOVAK SOCIETY OF THE USA

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** Revised January 2022 **

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THE NATIONAL SLOVAK SOCIETY OF THE USA

The National Slovak Society of the USA is the oldest Slovak fraternal society in the United States. The Society is an organization made up of people just like you who are looking for competitive insurance products, IRAs, and Annuities for their financial security in the future.

Since its inception in 1890, the NSS has tried to meet the needs of Slovak descendants, their families, and friends. Those immigrants that worked in the coal mines, steel mills, and railroads needed support for their families should they die or become disabled. Today, those needs have expanded to include retirement accounts, tax deferred savings programs, and new insurance plans. From those humble beginnings over one hundred years ago, the NSS has grown into a strong fraternal benefit society with assets over a billion dollars.

What we are most proud of in our society are the people who make up the backbone of, not only who we are, but what we do. We are more than life insurance products, annuity programs, assets, or liabilities. The NSS is made up of people who are committed to extending the hand of fraternalism and reaching out to touch the lives of others who, like our ancestors, needed help.

MISSION STATEMENT

To provide our fraternal family members financial security through life insurance and annuity products while offering charitable, cultural, social, and educational opportunities that benefits them and their communities.

OUR MOTTO

“Where, for over one hundred years, fraternal service and financial security have met.”

“Family Matters”

FRATERNAL PROGRAMS

Our fraternal programs allow to preach and practice the gospel of fraternity, charity, and benevolence. Everyone who joins the National Slovak Society automatically becomes an owner in the Society and a member of an assembly located near their residence. These local Assemblies hold meetings, elect officers, plan programs and events, and carry on work for the good of the assembly and community. Activities can include conducting fundraising events, summer picnics, bus trips, and golf and bowling tournaments, plus much, much more.

Fraternal Publications

“National News” – Every month a copy of the “National News” is mailed to each member’s home. This newsletter keeps members informed of upcoming and previously held events on the assembly, region and national levels and lists news about the achievements of our members, both young and old alike.

“Youth Circle Magazine” – This is included periodically in the “National News”, this section highlights the many accomplishments of our young members, as well as publishing the winning entries of contests held throughout the year.

Fraternalist of the Year

The purpose of this award is to recognize those members that have gone that extra “mile” in volunteer fraternal service. Through their tireless volunteer efforts, those around them have benefited significantly and each year we honor one of our members for making a difference in their community.

Youth Achievement

This award is intended to honor one of our youth members each year who has demonstrated outstanding service and fraternal work in various areas such as school and/or work, the community, or the church, as well as their local NSS assembly. The winner will receive a \$500.00 savings bond and have his/her name added to a plaque that is displayed in our Home Office.

PVR Scholarship Foundation

Named after our founder, Peter Vitazoslav Rovnianek, the PVR Scholarship Program was started in 1966. Our National Slovak Society takes pride in the fact that through our scholarship program, supported by the efforts of our membership, we provide financial help to our college bound members. Since its inception, thousands of our members have been awarded scholarships and have gone on to become successful in their chosen fields.

NSS is assisting in the education of our youth of today and the development of our leaders of tomorrow.

Senior Scholarship

This fraternal program is designed to encourage our Senior Members over the age of fifty-five (55) to explore new adventures whether it be in a learning capacity, a hobby or merely trying something new. NSS will provide our members with assistance in pursuing these activities. Once a course is completed, members will be reimbursed half (½) of the tuition up to \$100. A member can submit two applications in one calendar year. It is a great benefit and a good way to spend your leisure time.

May Art Contest

Each May we invite our youth ages 5-16 to utilize their creative art skills and produce an entry for this annual contest. The top three winners in each of our four categories will receive a monetary award and an NSS sweatshirt or jacket. First place winners will be highlighted on the cover of the quarterly Youth Circle Magazine.

Poetry Contest

During the summer months we encourage our youth members to put on those creative thinking caps and produce a unique poem for this contest. There are four categories that are broken down into different age groups appropriately named after famous poets. The top three winners in each category receive a monetary award and a certificate of achievement.

Photograph Contest

Open to members of all ages, this annual contest has been one of our most well received. Each participant can submit an entry into any or all the four categories and prizes are awarded to the top three places in each category with an overall winner designated in this contest. There is a monetary prize awarded to each of the winners.

Christmas Ornament Contest

This contest is open to all members, young and old alike. There are four youth and three adult categories. The winners in both win a monetary award. Once the ornaments have been judged, they are given to a local nursing home. Creating an ornament is not only a fun project but is a gift that touches the lives and hearts of the recipients at the nursing home. The winning entries will appear in the National News and Youth Circle Magazine, as well as on the NSS Website.

Matching Funds

We encourage our members, through their assemblies and regions to participate in charitable (non-profit) projects that benefit not only our own members, but also others in the community. The funds collected are matched dollar for dollar up to \$400.

National Sporting Events

Each year, two national sporting events are conducted for our membership. In late April, we conduct a Bowling Tournament and in Mid-July a Golf Tournament. The tournaments are conducted over a three-day weekend and offer festivities for all ages. When these tournaments are held in an area of a local assembly, we offer the assembly the opportunity to host the Friday Hospitality Night. We encourage our members to invite non-member friends and family to join in these fraternal sporting events as guests. Continued participation after this one-time opportunity would require one to become a member of our fraternal family.

FRATERNAL AFFILIATIONS

As a fraternal benefit society, we are extremely proud of the following organizations in which we hold membership.

American Fraternal Alliance	Wisconsin Fraternal Alliance
California Fraternal Alliance	Fraternal Society of Greater Pittsburgh
Illinois Fraternal Alliance	Pennsylvania Northeast Fraternal
New England Fraternal Alliance	Philadelphia Northeast Fraternal
New Jersey Fraternal Alliance	National Association of Fraternal Insurance Counselors
New York Fraternal Alliance	Friends of Slovakia
Ohio Fraternal Alliance	Slovak Foundation at the University of Pittsburgh
Pennsylvania Fraternal Alliance	Slovak League of America
West Virginia Fraternal Alliance	Western Pennsylvania Slovak Cultural Association

STATE INSURANCE AFFILIATIONS

Currently the National Slovak Society holds licenses in the following states for the sale of our insurance and annuity products.

- | | | |
|-------------|----------------|----------------|
| Alabama | Kentucky | Pennsylvania |
| Arizona | Maryland | South Carolina |
| California | Michigan | Tennessee |
| Colorado | Minnesota | Texas |
| Connecticut | Missouri | Virginia |
| Florida | New Jersey | West Virginia |
| Georgia | New York ** | Wisconsin |
| Illinois | North Carolina | |
| Indiana | Ohio | |

***Currently not accepting any new sales*

NSS Life – Directory Information

<i>Title/Position</i>	<i>Name</i>	<i>Phone Ext.</i>	<i>Email Address</i>
EXECUTIVES			
President/CEO	Joseph Stefka, Jr., FIC	1001	jstefka@nsslife.org
Secretary-Treasurer/CFO	Linda Strom	1007	lstrom@nsslife.org
Executive Assistant/Fraternal	Pam Blum	1010	pblum@nsslife.org
SALES/MARKETING			
Sales Director	Greg Felton, CLU	1003	gfelton@nsslife.org
Home Office Sales	Joe Elliott	1015	jelliott@nsslife.org
Field Development Mgr.	Jeff DeSantes, FIC	1025	jdesantes@nsslife.org
Sales Assistant	Jill Grover	1011	jgrover@nsslife.org
Sales Assistant Admin	Tracey Bastaroli	1020	tbastaroli@nsslife.org
Sales Assistant Admin	Jennie Pernisek	1027	jpernisek@nsslife.org
Underwriter	Cyndi Salat	1002	csalat@nsslife.org
Underwriter	Rick Toth, FIC	1021	rtoth@nsslife.org
Media Coordinator	Ryan Strom	1024	rstrom@nsslife.org
Editor	Lori Crowley	1025	crowleynss@yahoo.com
IT (Information Technology)			
CIO	Alan Burns	1017	aburns@nsslife.org
Web Portal Support	Frank Tomasic	1004	ftomasic@nsslife.org
FINANCIAL			
Controller	Donna Tenney	1006	dtenney@nsslife.org
Supervisor	Lisa Shriver	1005	lshriver@nsslife.org
Accounting	Patti Kropf	1023	pkropf@nsslife.org
Accounting	Michelle Walton	1029	mwalton@nsslife.org
CUSTOMER SERVICE			
Certificate (Policy) Issue	Brigid Delien	1013	bdelien@nsslife.org
Annuity Business	Amanda Felton	1026	afelton@nsslife.org
Annuity Business	Rachel Lischy	1028	rlischy@nsslife.org
Premiums	Riley Partyka	1022	rpartyka@nsslife.org
Claims	Lori Korte	1012	lkorte@nsslife.org
Claims Assistant	Linda Buono	1016	lbuono@nsslife.org
Receptionist	Ginny McMurdy	1000	vmcmurdy@nsslife.org
RECORDS & RETENTION			
Associate	Eric Riepole	1009	eriepole@nsslife.org

Company Fax Numbers	
General Fax	724-731-0145
Sales Fax	724-731-0146
Underwriter Fax - C. Salat	724-949-0235
Underwriter Fax - R. Toth	724-949-0547
Claims Fax	724-949-0413
Controller's Fax	724-949-0479

Plan ahead



Give back



NSS Life
Family Matters...

Certificate (Policy) Guidelines

Basic Objectives

The primary objectives of these National Slovak Society Insurance & Annuity Policy guidelines are:

1. To provide current and future members quality life insurance and annuity products that meets their individual needs and the needs of their beneficiaries.
2. To oversee and manage those member assets entrusted to our care with the highest standard of fiduciary responsibility and to provide them courteous and professional service.
3. To comply with all laws of the Pennsylvania Insurance Department and those states in which we are licensed, as well as the National Association of Insurance Commissioners (NAIC).

Life Insurance & Annuity Products

We currently offer to our clients the following life and annuity products:

<u>Life Insurance</u>	<u>Annuity</u>
Ordinary Whole Life	Optimum 3
20 Pay Whole Life	Preferred 5
Single Premium Life	Preferred 8
Single Premium Life—3 Pay Life	SPIA
10 Year Term Life	Growth Fund
20 Year Term Life	(Non-Profit)
Youth Term Life	
Youth Term Life—Single Pay	
<u>Riders</u>	
Waiver of Premium	IRA
Payor Waiver of Premium	Roth (IRA)
Accidental Death Benefit	SEP
10 Year Term	Coverdell ESA
20 Year Term	

Definition of Agents Under Contract

1. Managing General Agent (MGA) is a licensed agent with reporting responsibilities to the Society and who has responsibility for five (5) or more General Agents and/or Agents. Appointments are at the discretion of NSS.
2. General Agent (GA) is a licensed agent with reporting responsibilities directly to either an MGA or the Society and who has responsibility for at least two (2) Agents. Appointments are at the discretion of NSS.
3. Agent is an individual licensed with reporting responsibilities directly to an MGA, a GA, or the Society. Appointments are at the discretion of NSS.
4. Agents are responsible for maintaining their licenses in states in which they sell. An MGA or GA that has agents selling for them must be licensed in the same states as their agents, to receive override commissions.
5. All licensed agents, under contract and receiving commissions, should be Society members.
6. Managing General Agents (MGA), including their downline, are required to produce a minimum of sixty (60) life or annuity applications in each contract year, with a minimum of \$25,000 in annualized life premium or \$300,000 annuity premium. Failure to meet these minimum production requirements shall terminate the contract.
7. General Agents (GA), including their downline, are required to produce a minimum of ten (10) life and (10) annuity applications in each contract year, with a minimum of \$5,000 in annualized life premium or \$60,000 annuity premium. Failure to meet these minimum production requirements shall terminate the contract.
8. Agents are required to produce a minimum of five (5) life and five (5) annuity applications, in each calendar year with a minimum of \$2,500 in annualized life premium or \$20,000 annuity premium. Failure to meet these production requirements shall terminate the contract.

Agent Commissions & Bonus

1. Only individuals that have been appointed through the NSS Sales Department and hold a current life and annuity license, in the state(s) they are producing, are permitted to sell NSS life and annuity products.
2. Only appointed and licensed agents, under contract, shall be entitled to receive commissions and bonuses. The National Assembly shall establish and review a commission schedule for all agents.
3. No commissions are payable in advance. These are paid as earned.
4. Commission payments are generated twice a month. Must be at a minimum of \$50.01 to be released.
5. Adjustments to commissions owed or recaptured shall be reflected on next or subsequent commission processing.
6. If a life or annuity contract is withdrawn, surrendered, or returned under the "Right to Cancel" provision, within the first twelve (12) months of the issue date, a charge back of the agent's commission will occur. The charge back will be pro-rated monthly and deducted from the agent's next commission check.
7. With respect to any subsequent deposits made to an annuity account for which a commission has been paid, a pro-rated commission charge back will be due to the Society for any withdrawals of \$5,000.00 or more that are made within one year of the deposit. For purposes of this paragraph, any partial withdrawals will be applied against those funds most recently deposited.
8. When there is a death claim, and a deposit has been made to an annuity account for which a commission has been paid in that year, or when a trailer commission has been paid on an annuity account, and the annuitant has died before the end of the policy year, a pro- rated chargeback of that year's commissions will occur.
9. Production Bonus Schedule for life and annuity products:
 - a. Bonus is based on new business premium received between January 1st and December 31st each year.
 - b. For any agent to qualify for the Production Bonus, they must maintain the minimum requirements defined in the Agent's current contract.

Medical Limits and Definitions

Age	0-17	18-40	41-50	51-60	61-70	71-80	81+
Amount							
\$0-\$24,999	N	N	N	N	APS	APS	APS
\$25,000-\$49,999	N	N	N	N	Paramed Blood Urinalysis	Paramed Blood Urinalysis	Paramed Blood Urinalysis
\$50,000-\$99,999	N	N	N	Paramed Blood Urinalysis	Paramed Blood Urinalysis	Paramed Blood Urinalysis EKG	Paramed Blood Urinalysis EKG
\$100,000-\$200,000	N	Paramed Blood Urinalysis	Paramed Blood Urinalysis	Paramed Blood Urinalysis	Paramed Blood Urinalysis EKG	Paramed Blood Urinalysis EKG	Paramed Blood Urinalysis EKG
\$200,001-\$300,000	Question Amount	Paramed Blood Urinalysis	Paramed Blood Urinalysis	Paramed Blood Urinalysis EKG	Paramed Blood Urinalysis EKG	Paramed Blood Urinalysis EKG	Paramed Blood Urinalysis EKG
\$300,001-\$500,000	Contact Home Office	Paramed Blood Urinalysis	Paramed Blood Urinalysis	Paramed Blood Urinalysis EKG	Paramed Blood Urinalysis EKG	Paramed Blood Urinalysis EKG	Paramed Blood Urinalysis EKG
\$500,001-\$999,999	Contact Home Office	Paramed Blood Urinalysis	Paramed Blood Urinalysis EKG	Paramed Blood Urinalysis EKG	Paramed Blood Urinalysis EKG	Paramed Blood Urinalysis EKG	Paramed Blood Urinalysis EKG
\$1,000,000 & Over	Contact Home Office	Paramed Blood Urinalysis	Paramed Blood Urinalysis EKG	Paramed Blood Urinalysis EKG	Paramed Blood Urinalysis EKG	Paramed Blood Urinalysis EKG	Paramed Blood Urinalysis EKG

*** PSA testing done on all Male applicants over Age 50 if a paramedic exam and blood is ordered.**

1. The Society reserves the right to require a medical exam, paramedical exam, urine specimen, blood profile, or to request any other evidence of insurability at any time prior to issuing a life insurance certificate.
2. The Society reserves the right to require an attending physician statement, when necessary, prior to issuing a life insurance certificate.
3. For life insurance applications over \$200,000 where the Proposed Insured is Age 0 – 17, the Home Office is to be contacted.
4. In most cases, any medical tests or exams required for underwriting, will be ordered, and paid for by the Society. Agents are not to order.
5. Medical tests and exams conducted by another insurance company will be accepted provided they are not more than forty-five (45) days old and meet NSS Life’s criteria.
6. Any life insurance application, that is a 1035 Exchange, which includes prior medical tests and exams, and is older than sixty (60) days, must be accompanied by new medical tests and exams and will be subject to all current underwriting requirements.
7. Definition of Non-Nicotine classification: An individual that has not used any nicotine related products within one year.

Non-Medical Requirements

Inspections Reports:

Age	Amount	Type of Report
0 - 85	\$500,000 +	Amplified to include Financial Information

Male and Female Height & Weight Maximum Chart For Standard Rates (over age 15)

Height	Weight
4'8"	150
4'9"	156
4'10"	162
4'11"	168
5'0"	174
5'1"	180
5'2"	186
5'3"	192
5'4"	198
5'5"	204
5'6"	210
5'7"	216
5'8"	222
5'9"	229
5'10"	236
5'11"	243
6'0"	250
6'1"	257
6'2"	264
6'3"	271
6'4"	278
6'5"	286
6'6"	294

MVR – Motor Vehicle Report

Ages	Amount
16 – 25	\$100,000+
26 – 65	\$250,000+
66 +	\$100,000+

* **MVR also done on all proposed insured with history of drug, alcohol abuse, or report of adverse motor vehicle record.**

CRITERIA	PREFERRED
Nicotine	None for 1 Year
Total Cholesterol	230 or less
Total Cholesterol/ HDL Ratio	6.0 or less
Family History	No more than one death of a parent or sibling from cardiovascular disease before age 60.
Max Blood Pressure	135/85 Age 0 – 44 140/90 Ages 45 – Up
Driving History	No DUI in last five years and only two moving violations in the last three years.
Height/Weight	Within NSS Height/Weight range
Drug Dependency	No history of treatments for drugs or alcohol dependency in the last ten years.
Other Impairments	Must not be substandard for any reason, other than flat extras for avocations and aviation. No cancer survivors; except for benign skin cancer.
Citizenship	Must be a U.S. citizen & a permanent resident. May travel for short durations & vacations only.

Reinsurance

Face amounts more than the following amounts are reinsured with Optimum RE of Dallas, TX which is rated A- by A.M. Best. New retention limits effective April 1, 2014.

Ages 0 to 40	\$100,000
Ages 41 to 60	\$75,000
Ages 61 +	\$50,000

Illustrations

All our life and annuity plans have been approved to be illustrated, except for the Youth Term, in those states where the NAIC Illustration Regulations have been adopted and in those states in which the Society is licensed.

Minimum Limits

The face amount of Life insurance for a 1035 Exchange must conform to each plan's minimum requirement.

Annuity Interest Rates

1. Interest rates on all annuity contracts are set by the National Assembly or Executive Committee after reviewing market conditions and discussions with other consultants. The interest rates can be changed at any time by the National Assembly or Executive Committee.
2. Interest is compounded daily and posted on the monthiversary day every month. The declared rates are annual percentage yield (APY.)

Growth Fund

1. This program is for non-profit 501(c)(3) or 501(c)(8) organizations to allow a good interest rate while providing liquidity. The advantage to the Society is that it allows us to gain additional earnings while opening doors to new sales. NSS Growth Fund agreements are not an annuity contract.
2. There are no front or back loading fees or withdrawal penalties.
3. There are no commissions paid on this contract.

Annuity Rollovers & 1035 Exchanges

1. Definition: The transfer of annuity funds from one annuity account to another or the cash surrender value of a life insurance policy to purchase another. The annuity rollover/exchange can be in-house or a 1035 exchange from another company.

2. Full commissions are paid on all 1035 life insurance and annuity rollover/exchanges from another company.
3. We do not process partial 1035 transfers internally or outgoing.

Annuity Waiver of Early Surrender Penalties

Only the National President may approve a waiver of early surrender penalties with proper documentation for the following reasons:

1. Spousal rollover due to death.
2. Proven full disability of the annuitant.
3. Benefits payable to a nursing facility.

Annuity Statements

Annuity statements are mailed to certificate holders annually (January). The annuitant may request a statement of their account at any time. Agents may access member's statements online.

Conversion Discount Credits

1. Youth Term: Premium discount (conversion) credits are granted on any current term plan converted to a Whole Life plan as a fraternal benefit. The premium conversion credit is applied according to the following formula: "\$1.00 per thousand of face amount, times number of years certificate has been in force, up to a maximum of \$100.00, or the first annual premium, whichever is the greatest."
2. 10 Year and 20 Year Term Plan: The conversion privilege provides that conversion can be made at any time prior to age 70. Conversion may be made to any plan of Ordinary Whole Life and 20 Payment Life then being offered. The rate to be charged will be according to the current rate premium scale at the attained age at the time of conversion. The new rate will be at the same underwriting category as existed at the time of issue. New evidence of insurability will not be required. A conversion credit is granted equal to 25% of the first-year premium on the converted certificate.

Dividends

1. All dividends are declared annually by the National Assembly. Dividends are not guaranteed.
2. Members select their dividend option on the application for their policy. If a member does not select an option, the default option shall be "Paid-Up Additions".

3. Those members receiving their dividends in cash will receive a check each year in the anniversary month of their policy.

Premium Waiver 80-50

1. Any member that reaches their eightieth (80th) birthday AND their policy has been in effect for fifty (50) years, (including our merger partners) shall have their premiums paid by the Society as a fraternal benefit.
2. This premium waiver shall become effective on the contract anniversary date following the eightieth (80th) birthday of the member.

Policy Loans

1. The loan ratio of an amount borrowed to Cash Value is outlined in each policy. (Loans are not available on annuity contracts.)
2. The minimum loan that will be allowed is \$100.00.
3. At the time of death, any unpaid loan balance will be deducted from the death benefit.
4. On cash surrenders, any unpaid loan balances will be deducted from the surrendered value.

Life Insurance Premiums and Annuity Deposits

1. NSS Life will only accept cash insurance premium payments or annuity deposits directly from a member when brought into the Home Office.
2. Cash deposits will be subject to federal Anti-Money Laundering procedures.
3. NSS Life will only accept checks from an agent's business account; agent's personal checks are not accepted.
4. NSS strongly prohibits agents from sending a member's insurance premium payment or annuity deposit in cash through any mail or delivery service.
5. Please pay correct amount as billed on your premium notice.
6. First premium payment **MUST** accompany all life insurance applications.
7. All bank draft cases will begin with the second premium payment.

Different



Kind



NSS Life
Family Matters...

Insurance and Annuity Application Instructions Procedures and Processing

Membership Qualifications

Any person who is of Slovak or Slavic birth or non-Slavic descents are eligible for membership in the Society.

When an application has been approved by the National Officers, the National Secretary-Treasurer shall cause the benefit certificate to be issued. Upon making the payment of all fees and premiums required by the National Assembly, the applicant may be formally admitted in accordance with the Constitution and By-Laws of the Society.

New Membership Application

The insurance laws of the Commonwealth of Pennsylvania require that a "New Membership" application be completed on all prospects that are joining the Society for the first time. The regulation states that the prospect first must be a "member" of the Society before he or she can purchase either our insurance or annuity products. All NSS Life and Annuity Applications include a new membership request, except for the ICC19-LA-04 Application for Life Insurance. Therefore, an "Application for New Members" must be completed when using that form (there is no charge or premium for membership).

Completing Application for New Members (for use with ICC19-LA-04 Application)

Complete every item on the application. Each item is required except for Email Address and Work Phone number. Application must be handwritten utilizing ink or by typewriter. If handwritten, please print in a legible fashion. If the Proposed Applicant is under age 18 (age 15 in North Carolina), either the parent or guardian must sign. The insured is the member of NSS.

Completing Insurance and Annuity Applications

Every application must be completed in its entirety, printed in ink or on a typewriter, legible and signed by a Proposed Insured and Agent. If Proposed Insured is under age 18 (age 15 in North Carolina), either the parent or guardian must sign as Adult and/or Member Applicant.

Ask every question contained on applications and answer with what the Applicant or Proposed Insured replies. If the question does not apply, use the initials "N/A"; make sure you fill out every inquiry on the application.

If a mistake is made completing application, DO NOT ERASE. Draw a line thru the error. Replace with the correct information. Proposed Insured or Applicant must initial that question/response.

When calculating premium payment, use either the charts (Life Insurance Descriptions and Rates) contained within this reference guide or use the NSS illustration software.

Deliver or mail the application with the required first modal premium to the Home Office for underwriting. Faxed or emailed applications are not accepted. We cannot draft the initial premium.

When required for underwriting, the Home Office will order any medical exams, tests, or records.

Conditional Receipt

Under the terms of insurability conditional receipt, the insurance coverage becomes effective as of the date of the receipt provided that the application is approved for the plan applied for, the amount of coverage applied for and the premium rate applied for. This receipt is provided to an applicant when he or she pays the initial premium at the time of application.

***Explanation of this Receipt** – The agent must explain how this type of receipt functions. He must inform the applicant that they are covered immediately, or when the medical examination is completed (if exam is required) provided the insurer determines that, at this time or at the time of exam, the applicant qualifies for the policy as applied for. If the applicant qualifies, they do not have to wait for coverage until the policy is issued and delivered. Protection starts immediately.*

Annuity Suitability Questionnaire

NSS requires completion of this form with **ALL** annuity sales, including replacements. A separate suitability form is required for qualified business (Form #IRA – PTE-8424-002 G) and non-qualified business (Form #NQ – ASQ -004 G)

Annuity Disclosure

NSS requires completion of this form with all deferred annuity sales, including replacements.

Transfers and Rollovers

Agreement for Exchange 1035 – Utilized when exchanging policies between companies:

- Life Insurance to Life Insurance
- Life Insurance to Annuity (Non-Qualified)
- Annuity (Non-Qualified) to Annuity (Non-Qualified)

Authorization to Transfer Funds – Utilized when exchanging policies between companies:

- Annuity (Qualified) to Annuity (Qualified)
- Mutual Fund to Annuity (Non-Qualified & Qualified)
- Money Market Account to Annuity (Non-Qualified & Qualified)
- Certificates of Deposits (Non-Qualified & Qualified)

Original Authorization to Transfer should be mailed to NSS Life for processing. Some ceding financial institutions require additional paperwork and/or a medallion signature guarantee on this form. If possible, check with that company before completing the form with your client.

Notice Regarding Replacement of Life Insurance & Annuities –

Utilize when exchanging annuity or life policies between companies:

- Life Insurance for Life Insurance
- Life Insurance for Annuity (Non-Qualified & Qualified)
- Annuity for Annuity (Non-Qualified & Qualified)

When transferring funds for a Non-Qualified Annuity or Life Insurance, The Agreement for Exchange 1035 (updated FORM # AEP(1035) – 006 G, dated 07/15/2017) and the Notice Regarding Replacement must be completed and the original signed forms mailed to NSS Life. If client or agent sends the forms to the company, NSS should receive a copy and a note indicating this.

Compliance with Replacement Requirements

Replacement Regulations are heavily monitored and regulated by the various states that NSS Life does business in, as well as by the Insurance Department. The obvious reason is to protect the policyholder from deciding to replace an otherwise good policy with one that may not provide the same level of protection or could potentially have higher risk charges, surrender charges, etc. These regulations are also in place to discourage the practice of churning. It is imperative that insurance carriers follow the guidelines in verifying if a replacement is taking place. If so, is it in the best interest of the policyholder?

For the most part, if the applicant answers they have no existing Life or Annuity, or yes but not replacing, then no further action is needed. Some states have specific unique guidelines that must be followed.

States that require the notice of existing policies even if not selected include:

- Arizona - no specific replacement form. NSS's replacement form is acceptable.
- Colorado
- Maryland
- New Jersey – see note below
- North Carolina
- Ohio
- South Carolina
- Texas
- Virginia
- Wisconsin

Generally, for these states:

- Producer must submit to the insurer with the application a statement signed by both the applicant and the producer as to whether the applicant has an existing policy or contract.
- If no, no further action is required.
- The producer needs to give an applicant a “Replacement Notice” even if the applicant indicates that replacement of an existing policy or contract is not involved with the application.
- If yes, regardless of whether the applicant indicates that replacement of an existing policy or contract is involved with the application, in every instance where there is an existing life policy, the applicant must receive a replacement notice if they have indicated that they have an existing policy or contract.
- If yes to replacement, detailed information needs to be gathered on NAIC or state specific replacement form.

States that only require the notice when a replacement is indicated:

- California
- Connecticut
- Georgia
- Illinois
- Indiana
- Michigan
- Minnesota
- **Pennsylvania – 75% of business is PA**
- Tennessee
- West Virginia

New Jersey

If the notice is presented electronically, the insurer shall mail the applicant a copy of the signed notice within **three business days** after the application is submitted to the insurer. This practice could be implemented for all states.

Most States

If there are existing life or annuity policies in force (even if not replacing) the producer is required to offer to read the replacement notice aloud and if the applicant declines that offer, their initials are to be placed on the replacement form in the area allocated for that.

Annuity Guide

When submitting new deferred annuity business, these basic forms are always required: AA-05 annuity application; Annuity Disclosure; Annuity Suitability* and W-9 (included in kit online). Other paperwork will be needed for specific circumstances as outlined below.

If Funds are **coming from NON-Qualified Annuity or Life Insurance Contract**, include these forms**:

1. 1035 Exchange Form--**Form # AEP(1035) – 006 G**
2. External Replacement--**Form # RLIA-EXT – 003 G**
3. Copy of client's most recent statement
4. *Non-qualified Annuity Suitability Form. No Opt out if client is age 80 or above.

If Funds are **coming from any other NON-Qualified Source**, such as CD or Money Market, Mutual Funds, etc. include these forms**:

1. Authorization to Transfer Funds-- **Form # ATF - 010 G**
2. Copy of client's most recent statement.
3. *Non-Qualified Annuity Suitability Form. No Opt Out if client is age 80 or above.

If Funds are **coming from Qualified Annuity**, include these forms**:

1. Authorization to Transfer Funds--**Form # ATF - 010 G**
2. External Replacement--**Form # RLIA-EXT – 003 G**
3. Copy of client's most recent statement
4. * QUALIFIED “BEST INTEREST” STATEMENT (PTE 84-24)--
Form # IRA – PTE-8424 – 002 G

If Funds are **coming from any other Qualified account** – such as CD, Money Market, Mutual Funds, Retirement Account, 401K, 403b, 457, etc., include these forms**:

1. Authorization to Transfer Funds--**Form # ATF - 010 G**
2. Copy of client's most recent statement
3. * QUALIFIED “BEST INTEREST” STATEMENT (PTE 84-24)--
Form # IRA – PTE-8424 – 002 G

NSS Internal Transfer for Qualified or Non-Qualified annuities requires these forms:

1. Full/partial annuity withdrawal form-- **Form # F/PAW - 008 G**
2. Internal Replacement Form-- **Form # RLIA-INT – 003 G**
3. Original contract or Lost/Destroyed Policy Affidavit for Cash Surrender

When making any transfer into an EXISTING contract, include W-9 with the other forms.

****Other forms may be required by the ceding company.**

Annuity Application Instructions (Form AA-05)

Assembly/Circle # - To be assigned by Home Office Staff.

Certificate # - To be assigned by Home Office Staff.

Question 1 – 3

- Proposed Annuitant personal information, **all questions must be answered.**

Question 4

- Plan - Select the desired product - Preferred 5, Preferred 8, Preferred Choice (**currently unavailable--do not select**) or Other (blank line). Write in what specific plan is desired on this line such as Optimum 3, SPIA, etc.
- First Premium – Write in the dollar amount paid with this application or expected deposit from rollover. If annuitant plans to make systematic deposits, you can select the Mode of their choice by putting a checkmark in the appropriate box.
- a. Send Premium Notice - If the applicant desires a “Reminder Notice”, select either “No” or “Yes”. If “Yes” is selected, record the desired dollar amount and the frequency of the Notice Reminder.
- b. Specific Account Type - Non-Qualified or Qualified. **One of these must be selected.** If plan is Qualified, you must select one of the following: Traditional IRA, Roth IRA, SEP, 403(b) or Coverdell ESA.
- c. Amount Paid with Application - Record dollar amount accompanying this application plus the anticipated rollover amount from another financial institution, if any.
Rollover Amount - If there is an expected rollover from another financial institution(s), indicate the anticipated amount(s) on this line.

Question 5

- “Owner” – Complete only when the Applicant signing this application is an entity other than the Proposed Annuitant (Trustee).

Question 6

- Beneficiary - List all requested Primary and Contingent (if any) beneficiaries. Please complete all the requested information.
 - Relationship - Please complete field with the appropriate answer such as spouse, son/daughter, brother/sister, friend, charity, etc. If there is no relationship, please write “None”.
 - Share - Indicate how you would like the funds to be divided to each beneficiary based on percentage(s). Each section, Primary and Contingent, must equal 100%
 - **IMPORTANT** - If a Trust is named as a beneficiary, the tax identification number and a full copy (all pages) of the Trust Agreement must be submitted with the application.

Question 7

- Check the proper box to indicate if this annuity is to be replaced or changed by any existing insurance or annuity. If 'Yes', specify the current insurer and policy number. Also, you will need to provide a completed Replacement Form (external or internal) along with the application.

Question 8

- Respond "Yes" or "No" to existing National Slovak Society membership. If response is 'No', application for membership will be automatic.
- Ensure that the Proposed Annuitant reads and understands the section "The undersigned".
- Signed at - Indicates the actual City, State and Date where and when application is taken and completed with Agent. ***This must be completed.***
- Signature of the Proposed Annuitant ***is required***, if an "Owner" (other than Annuitant) exists, said owner ***must sign*** as "Applicant".
- If the Proposed Annuitant is under eighteen (18) years of age (under fifteen (15) years of age in North Carolina), an adult must sign the application on the Member/Adult Signature line.
- Witness signature should be the Agent's signature. It **CANNOT** be the Proposed Annuitant or Beneficiary.

Agent's Statement

All questions must be answered and legible, or application will be returned. Agent's signature, NSS Agent Number, and Printed Name are required.

Annuity Receipt Instructions

Received From - Agent ***must enter*** the Name of Proposed Annuitant or the Proposed Owner that completes application and presents monies.

The sum of - Agent ***must enter*** the amount of funds received.

Receipt for - Agent ***must enter*** Name of Proposed Annuitant.

Date - Agent ***must enter*** the Date funds are received.

Agent - Agent's must sign and write their NSS Agent Number on this line.

GIVE THE COMPLETED RECEIPT TO THE ANNUITANT.

Life Insurance Application Instructions

Form ICC19-LA-04

This Application is whenever:

1. the face amount of insurance is \geq \$50,000
2. applicants who are age \geq 60 no matter what amount of insurance
3. for applicants applying for "Preferred" status rates.

Assembly/Circle # - To be assigned by Home Office Staff.

Certificate # - To be assigned by Home Office Staff.

Proposed Insured

- Proposed Insured personal information. Agent **must enter** all personal information.

Owner

- Proposed Insured ages 17 or younger (ages 14 or younger in North Carolina) and for adults other than the Proposed Insured. If Owner is an Entity, enter the name, a contact person, and their telephone number. If a Trust is the Entity, the tax identification number, a W-9 Form for the Trust and Proposed Insured, and a copy of the Trust Agreement must be submitted with the application.

Beneficiary

- Insurable interest must exist between a named beneficiary and an insured at the time of application. List all requested Primary and Contingent beneficiaries. Please complete **ALL** the requested information (DOB, SS#, address, and telephone number). If additional primary or contingent beneficiaries are requested, list name(s), relationship(s) and share(s) on a separate sheet of paper and have the insured/owner sign and date. Include this with the application.
 - Relationship - Please complete field with the appropriate answer such as spouse, son/daughter, brother/sister etc.
 - Share - Indicate how you would like the funds to be divided to each beneficiary based on percentage(s). Each section, Primary and Contingent, must equal 100%
 - IMPORTANT-- If a Trust is named as a beneficiary, the tax identification number and a full copy (all pages) of the Trust Agreement must be submitted with the application.

COVERAGE INFORMATION

Base Coverage

- Select Plan Name and Face Amount.
- If any, select Riders/Benefits and the amount of each that is to be added to the base policy.
- In the Premium Received area, list all premiums received including Base Plan, Rider and/or Benefit. The total premium listed should be the amount submitted with the application.
 - If Payor Waiver of Premium Benefit is selected, complete and sign the ICC19-NSS LA-19 application-section 1, 5, and 6, and the HIPAA form.
- **Include Automatic Premium Loan:** Check “Yes” to have certificate include Automatic Premium Loan.

Premium Mode Information

- Select the mode of payment for premiums. If monthly, complete a Monthly Bank Draft Authorization Form for direct debit from a checking or savings account. Debit options are the 5th or 20th of the month. If the plan is a Single Premium 3-Pay, a loan promissory note is needed.

Dividend Election

- Select one of the four options. This is required information. If no option is selected, the default will be Paid-Up Additions.

Replacement or Change

- If answer to question “Will the insurance applied for ...” is “Yes”, show name of Company and Policy Number(s). Replacement regulations and forms apply. However, specific states may require a completed replacement form even if there is no replacement.

GENERAL INFORMATION

IMPORTANT - All of the following **MUST** be completed and are required unless indicated otherwise in order to process the application.

- 1) **Foreign Travel, Aviation, and Military:** Answer questions. Give details on any “Yes” answers.
- 2) **Avocation and Sports:** Answer question. Give details on any “Yes” answer.
- 3) **Driving Information:** (a) Proposed Insured’s Driver’s License # and State. (b) Answer question. Give details on any “Yes” answer.
- 4) **Other Insurance:** Answer all questions. Give details on any “Yes” answers.
- 5) **Annual Income Information:** Answer Question. List the annual

income of Proposed Insured and the Proposed Insured's spouse. Also, on children's applications, list parent's or payor's income.

Personal Measurements

Height and weight of Proposed Insured.

Medical Information

Questions 1-10: Answer all questions. Give details for all "Yes" answers by indicating question #, dates, explanation of answer and name, address, phone # of the Doctor and date of last visit. Please place additional information on a separate sheet. Be sure to sign and date this sheet and attach it to the application.

Physician Information

Proposed Insured's Name of Doctor, Address and Phone number.

Fraud Warning

Ensure that the Proposed Insured/Owner reads the Fraud Warning.

Agreement – Authorization - Acknowledgement

Ensure that each person signing the application reads and understands the section.

- Complete Item d) with the deposit amount of first premium.

Authorize

Ensure that the Proposed Insured/Owner reads the Authorization.

Acknowledge

Ensure that the Proposed Insured/Owner acknowledges receipt of:

- a. Notice of Information Practices
- b. MIB Pre Notice

Signed At: Indicate the City, State where the application was taken and completed with the agent. Also, complete the date it was taken.

Proposed Insured: Signature of the Proposed Insured, if eighteen (18) years of age or older (fifteen (15) years of age or older in North Carolina).

Owner: If owner is other than Proposed Insured, signature of Owner. If Insured is under eighteen (18) years of age (under fifteen (15) years of age in North Carolina) and the Owner is other than Parent, Parent is required to sign as Adult and/or Member Applicant.

Witness: Witness signature to be that of a Licensed Agent, Include NSS Agent number. Witness *CANNOT* be the Proposed Insured or Beneficiary.

Adult and/or Member Applicant: Signature of a Parent or Guardian, if Proposed Insured is under eighteen (18) years of age (under fifteen (15) years of age in North Carolina).

Agent’s Statement: Agent to answer statement. If answer to question is “Yes”, replacement regulations will apply.

HIPAA Form Instructions

A HIPAA form (FORM # HIPAA-NSS – 002 G) is required on all applications in all states. Please complete **ONLY** the following information on this form:

1. Name of Proposed Insured/Patient—please print neatly.
2. Date of Birth of Proposed Insured/Patient
3. Signature of Proposed Insured/Patient or Personal Representative
4. Description of Personal Representative’s Authority or Relationship to Patient

ALL OTHER INFORMATION WILL BE COMPLETED BY NSS LIFE UNDERWRITERS.

Conditional Receipt Instructions

- **Received From:** Name of Proposed Insured/Owner that completes application and remits premiums.
- **Application on the life of:** Name of Proposed Insured.
- **The sum of:** Amount of check received.
- **Agent:** Agent’s signature and NSS’s assigned agent number.
- **Date:** Date that agent receives premium payment

This completed form is given to the Proposed Insured/Owner/Payor along with Page 6 of the application.

Life Insurance Application Instructions

Form ICC19-LA-19

This Application is whenever:

1. the face amount of insurance is <\$50,000
2. applicants who are age <60 no matter what amount of insurance

Assembly/Circle # - To be assigned by Home Office Staff.

Certificate # - To be assigned by Home Office Staff.

Proposed Insured

- Proposed Insured personal information. Agent **must enter** all personal information.

Owner

- Proposed Insured ages 17 or younger (ages 14 or younger in North Carolina) and for adults other than the Proposed Insured. If Owner is an Entity, enter the name a contact person and their telephone number. If a Trust is the Entity, the tax identification number, a W-9 Form for the Trust and Proposed Insured, and a copy of the Trust Agreement must be submitted with the application.

Plan

- Write in Life Product Selected, (disregard code line) Face Value Amount, and Payment Amount.
- Select Riders/Benefits (if any) and the amount of each that is to be added to the base policy.
 - If selecting Accidental Death Benefit (ADB) or Term Rider, it is required to enter desired amount of coverage.
 - When there is a rider plan selected, please break out the premium amounts on base and rider plans.
 - If Payor Waiver of Premium Benefit is selected, have payor complete and sign the ICC19-NSS LA-19 application, section 1, 5, and 6. HIPAA form and sign.

Premium Mode Information

- Select one of the mode options: monthly, quarterly, semi-annual, or annual. If plan is a Single Premium 3-Pay, a loan promissory note is needed.

Dividend Election

- Select one of the four options. This is required information. If no option is selected, the default will be Paid-Up Additions.

Replacement or Change

- If answer to question “Will the insurance applied for ...” is “Yes”, provide the name of Company and Policy Number(s). Replacement regulations and forms apply. However, specific states may require a completed replacement form even if there is no replacement.

Beneficiary

- Insurable interest must exist between a named beneficiary and an insured at the time of application. List all requested Primary and Contingent beneficiaries. Please complete **ALL** the requested information (DOB, SS#, address, and telephone number). If additional primary or contingent beneficiaries are requested, list name(s), relationship(s) and share(s) on a separate sheet of paper and have the insured/owner sign and date. Include this with the application.
 - Relationship - Please complete field with the appropriate answer such as spouse, son/daughter, brother/sister etc.
 - Share - Indicate how you would like the funds to be divided to each beneficiary based on percentage(s). Each section, Primary and Contingent, must equal 100%
 - IMPORTANT-- If a Trust is named as a beneficiary, the tax identification number and a full copy (all pages) of the Trust Agreement must be submitted with the application.

Proposed Insured’s 2-Year History

- Respond No or Yes. If “YES”, state details to that response, use an additional paper if needed

Health Questions

- Answer all questions regarding medical information, if “YES”, state details to that response. Attach an extra paper if needed and date and sign.
 - Please note that question 6a has multiple parts. The first part is: In the past five (5) years, has the Proposed insured received diagnosis or treatment from a physician. The answer to this in most cases should be “YES”. Write the details of the visit(s) as shown in 6c. List the doctor’s name, address, and phone number in 6d.

Fraud Warning

Ensure that the Proposed Insured/Owner reads the Fraud Warning.

Authorization

Ensure that the Proposed Insured/Owner reads the Authorization.

Signed At: Indicate the City, State where the application was taken and

completed with the agent. Also, complete the date it was taken.

Proposed Insured: Signature of the Proposed Insured, if eighteen (18) years of age or older (fifteen (15) years of age or older in North Carolina).

Owner: If owner is other than Proposed Insured, signature of Owner. If Insured is under eighteen (18) years of age (under fifteen (15) years of age in North Carolina) and the Owner is other than Parent, Parent is required to sign as Adult and/or Member Applicant.

Witness: Witness signature to be that of a Licensed Agent, Include NSS Agent number. Witness *CANNOT* be the Proposed Insured or Beneficiary.

Adult and/or Member Applicant: Signature of a Parent or Guardian, if Proposed Insured is under eighteen (18) year of age (under fifteen (15) years of age in North Carolina).

Agent's Statement: Agent to answer statement. If answer to question is "Yes", replacement regulations will apply.

HIPAA Form Instructions

A HIPAA form (FORM # HIPAA-NSS – 002 G) is required on all applications in all states. Please complete **ONLY** the following information on this form:

1. Name of Proposed Insured/Patient—please print neatly.
2. Date of Birth of Proposed Insured/Patient
3. Signature of Proposed Insured/Patient or Personal Representative
4. Description of Personal Representative's Authority or Relationship to Patient

ALL OTHER INFORMATION WILL BE COMPLETED BY NSS LIFE UNDERWRITERS

Conditional Receipt Instructions

- **Received From:** Name of Proposed Insured/Owner that completes application and remits premiums.
- **Application on the life of:** Name of Proposed Insured.
- **The sum of:** Amount of check received.
- **Agent:** Agent's signature and NSS's assigned agent number.
- **Date:** Date that agent receives premium payment

This completed form is given to the Proposed Insured/Owner/Payor along with Page 6 of the application.

Investment Growth Fund Applications Application Instructions

Date - Date of Application.

Organization - Name of Non-Profit Organization.

Address - Complete address of Organization.

Federal Tax Identification Number - Non-Profit Organization's Federal Tax Identification Number. No Personal Social Security Numbers will be accepted.

Officer Signatures - Signatures and printed names of both officers, the President and Treasurer.

Seal - Official Seal of the Non-Profit Organization

Phone Number - Phone number of the Organization or a designated Officer

Agent Number – Agent's assigned number with NSS Life.

Miscellaneous Information

General: Life insurance

- Applications should be signed in blue ink. Please write legibly or type.
- NSS life uses "**Age Nearest Birthday**" to calculate the correct premium. After 6 months from Date of Birth, applicant is considered the *next* highest Age.
- You may request us to **backdate** up to six months to conserve age, but this is at the discretion of the underwriter. We do not backdate to a prior year. If backdating, and paying monthly, all back monthly premiums must be paid up front.
- Application **Form #ICC19-LA-04** (6 pages) is always to be used for proposed insureds who are nearest age 60 and older regardless of face amount of insurance and for all ages when amount of insurance is \$50,000 and above. Also use this application if seeking Preferred status, regardless of face amount.
- Application **Form #ICC19-NSS-LA-19** (2 pages) is to be used for proposed insureds under 60 nearest when amount of insurance is under \$50,000. When in doubt, use Form #ICC19-LA-04 application.

- Parent must sign on behalf of children under the age of 18 (age 15 or older in NC) on all applications and forms, even if grandparent is the owner/payor.
- While the applications mention a product code, we no longer use these. Simply write in the name of the product.
- No white out on applications. Draw a line through errors and have Proposed Insured/Owner initial the change.
- Name phone number and address of all treating physicians is to be put on the application along with approximate date of last visit, conditions, medications prescribed and results of visit. If an additional sheet of paper is needed, have Proposed Insured/Owner sign and date it. Fax numbers of the physicians are also helpful if available.
- When providing a list of medications taken, please provide information as to what conditions the medication is treating.
- On HIPAA form, put name and birthdate of Proposed Insured and have the form signed at the bottom by Proposed Insured or Parent. **NO DOCTORS NAME OR DATES OF SERVICE ARE TO BE LISTED ON THIS FORM.** This allows us to photocopy the form for use with multiple doctors if needed.
- **NSS LIFE UNDERWRITING DEPARTMENT WILL ORDER ALL EXAMS AND LABS THAT ARE NEEDED. AGENTS ARE NOT TO ORDER.**
- When application for life insurance on children is \$50,000 or more, we need amounts of insurance on all siblings and parents.
- NSS does not bank draft the first premium, so first premium must accompany the application. The first check is cashed upon receipt with the application and held in "Pending". No further funds will be billed or drafted until the application is approved by Underwriting.
- All original applications, along with the first modal premium (unless 1035 exchange for Single Premium Life), are to be mailed to NSS Life. No faxed or emailed applications are accepted.
- An IRS W-9 form is needed for the Proposed Insured and if there is a different owner, then a form is also needed for the Owner.
- DO NOT copy unrelated forms on the back of other forms. (Ex. Do not copy W-9 on the back of the HIPAA form or back of Replacement form).
- Our Life & Annuity Illustration software is a separate application from the Agent Portal and can be found at:
 - For Desktops - <https://www.viscalc.com/nss>
 - For Mobile Devices - <https://viscalc.com/app/invite/5wxfc5>
- Your NSS Agent ID number is required on all applications. This is not your state(s) license number.

Special: Children's Insurance

There are some specific guidelines that must be followed when writing insurance on children. Especially on face amounts of \$50,000 or more:

- A parent must sign the insurance application for a child. A grandparent can buy and pay for the insurance. If a grandparent wants to own the certificate, a parent should be the listed as beneficiary.
- Need parent's income.
- We need to know the current amount of in-force insurance on the proposed insured and will there be any replacement involved.
- We also need to know the in-force insurance amount on parents and all siblings.

This is a great market for producers and we want this business. Sometimes a cover letter explaining the purpose and goal of the insurance would be helpful to the underwriting process.

Other: Annuity

- On transfers, any copy (recent or older) of a statement showing that this was an IRA or Roth account is needed.
- It is always recommended that you withdraw any RMD prior to transferring funds to NSS Life.
- To properly calculate a required minimum distribution (RMD) on qualified transfers, we would need to know the balance in the account on December 31st of the preceding year.
- You should be aware that some firms appear to have more stringent withdrawal rules. We have seen signature guarantees required on bank CD transfers while other firms may want to see our illustration first and still others may want to speak to the client personally before transferring funds. You may want to advise clients to call and get their money and then forward the check to us to expedite matters.

APPLICATIONS FOR ALL STATES EXCEPT:

California, Florida, Illinois, North Carolina & Ohio

(See specific page for these states)

Annuity Applicants

AA-05	Annuity Application
NQ-ASQ	Non-Qualified Annuity Suitability Questionnaire
IRS-PTE-8424	Qualified "Best Interest" Statement (PTE 84-24)
AN DSCL	Annuity Disclosure
W-9	Request for Taxpayer Identification Number & Certificate
ALL(04-02)-R	Annuity Receipt

Life Insurance Applicants **\$50,000+**, or Applicants Age 60 or older, regardless of value, **AND all applicants for Preferred status**

ICC19-LA-04	Life Insurance Application - 6 Pages
HIPAA-NSS	Authorization for Release of Medical Information
ANM	Application for New Members
MBDA	Monthly Bank Draft Authorization
W-9	Request for Taxpayer Identification Number & Certificate
LA-03R	Conditional Receipt

Life Insurance Applicants (Under \$50,000)

ICC19-LA-19	Life Insurance Application - 2 Pages
HIPAA-NSS	Authorization for Release of Medical Information
RLIA-EXT	Notice Regarding Replacement of Life Insurance & Annuities—External Transfer
MBDA	Monthly Bank Draft Authorization
W-9	Request for Taxpayer Identification Number & Certificate
LA-03R	Conditional Receipt

CALIFORNIA Applications

All the following Forms are required for each Applicant

Annuity Applicants

AA-05	Annuity Application
NQ-ASQ	Non-Qualified Annuity Suitability Questionnaire
IRS-PTE-8424	Qualified "Best Interest" Statement (PTE 84-24)
AN DSCL	Annuity Disclosure
W-9	Request for Taxpayer Identification Number & Certificate
ALL(04-02)-R	Annuity Receipt

Life Insurance Applicants \$50,000+, or Applicants Age 60 or older, regardless of value, AND all applicants for Preferred status

LA-04	Life Insurance Application - 6 Pages
HIPAA-NSS	Authorization for Release of Medical Information
ANM	Application for New Members
MBDA	Monthly Bank Draft Authorization
W-9	Request for Taxpayer Identification Number & Certificate
LA-03R	Conditional Receipt

Life Insurance Applicants (Under \$50,000)

LA-18-CA	Life Insurance Application - 2 Pages
HIPAA-NSS	Authorization for Release of Medical Information
RLIA-EXT	Notice Regarding Replacement of Life Insurance & Annuities—External Transfer
MBDA	Monthly Bank Draft Authorization
W-9	Request for Taxpayer Identification Number & Certificate
LA-03R	Conditional Receipt

FLORIDA Applications

All the following Forms are required for each Applicant

Annuity Applicants

AA-05	Annuity Application
DFS-H1-1980	FL Annuity Suitability Questionnaire IRA
DFS-H1-1981	FL Disclosure & Comparison of Annuity Contracts
AN DSCL	Annuity Disclosure
W-9	Request for Taxpayer Identification Number & Certificate
ALL(04-02)-R	Annuity Receipt

Life Insurance Applicants \$50,000+, or Applicants Age 60 or older, regardless of value, **AND all applicants for Preferred status**

LA-04-FL	Life Insurance Application - 6 Pages
FL-SA	Florida Supplemental Application
HIPAA-NSS	Authorization for Release of Medical Information
ANM	Application for New Members
MBDA	Monthly Bank Draft Authorization
W-9	Request for Taxpayer Identification Number & Certificate
LA-03R	Conditional Receipt

Life Insurance Applicants (Under \$50,000)

LA-18 FL	Life Insurance Application - 2 Pages
FL-SA	Florida Supplemental Application
HIPAA-NSS	Authorization for Release of Medical Information
RLIA-EXT	Notice Regarding Replacement of Life Insurance & Annuities—External Transfer
MBDA	Monthly Bank Draft Authorization
W-9	Request for Taxpayer Identification Number & Certificate
LA-03R	Conditional Receipt

ILLINOIS Applications

All the following Forms are required for each Applicant

Annuity Applicants

AA-05-IL	Annuity Application
NQ-ASQ	Non-Qualified Annuity Suitability Questionnaire
IRS-PTE-8424	Qualified "Best Interest" Statement (PTE 84-24)
AN DSCL	Annuity Disclosure
W-9	Request for Taxpayer Identification Number & Certificate
ALL(04-02)-R	Annuity Receipt

Life Insurance Applicants \$50,000+, or Applicants Age 60 or older, regardless of value, **AND all applicants for Preferred status**

ICC19-NSS-LA-04-IL-OH	Life Insurance Application - 6 Pages
HIPAA-NSS	Authorization for Release of Medical Information
ANM	Application for New Members
MBDA	Monthly Bank Draft Authorization
W-9	Request for Taxpayer Identification Number & Certificate
LA-03R	Conditional Receipt

Life Insurance Applicants (Under \$50,000)

ICC19-NSS-LA-19-IL-OH	Life Insurance Application - 2 Pages
HIPAA-NSS	Authorization for Release of Medical Information
RLIA-EXT	Notice Regarding Replacement of Life Insurance & Annuities—External Transfer
MBDA	Monthly Bank Draft Authorization
W-9	Request for Taxpayer Identification Number & Certificate
LA-03R	Conditional Receipt

NORTH CAROLINA Applications

All the following Forms are required for each Applicant

Annuity Applicants

AA-05-NC	Annuity Application
NQ-ASQ	Non-Qualified Annuity Suitability Questionnaire
IRS-PTE-8424	Qualified "Best Interest" Statement (PTE 84-24)
AN DSCL	Annuity Disclosure
W-9	Request for Taxpayer Identification Number & Certificate
ALL(04-02)-R	Annuity Receipt

Life Insurance Applicants \$50,000+, or Applicants Age 60 or older, regardless of value, AND all applicants for Preferred status

ICC19-LA-04	Life Insurance Application - 6 Pages
HIPAA-NSS	Authorization for Release of Medical Information
ANM	Application for New Members
MBDA	Monthly Bank Draft Authorization
W-9	Request for Taxpayer Identification Number & Certificate
LA-03R	Conditional Receipt

Life Insurance Applicants (Under \$50,000)

ICC19-LA-19	Life Insurance Application - 2 Pages
HIPAA-NSS	Authorization for Release of Medical Information
RLIA-EXT	Notice Regarding Replacement of Life Insurance & Annuities—External Transfer
MBDA	Monthly Bank Draft Authorization
W-9	Request for Taxpayer Identification Number & Certificate
LA-03R	Conditional Receipt

OHIO Applications

All the following Forms are required for each Applicant

Annuity Applicants:

AA-05	Annuity Application
NQ-ASQ	Non-Qualified Annuity Suitability Questionnaire
IRS-PTE-8424	Qualified "Best Interest" Statement (PTE 84-24)
AN DSCL	Annuity Disclosure
RLIA-EXT	Notice Regarding Replacement of Life Insurance & Annuities—External Transfer
W-9	Request for Taxpayer Identification Number & Certificate
ALL(04-02)-R	Annuity Receipt

Life Insurance Applicants \$50,000+, or Applicants Age 60 or older, regardless of value, **AND all applicants for Preferred status**

ICC19-NSS-LA-04-IL-OH	Life Insurance Application - 6 Pages
HIPAA-NSS	Authorization for Release of Medical Information
RLIA-EXT	Notice Regarding Replacement of Life Insurance & Annuities—External Transfer
ANM	Application for New Members
MBDA	Monthly Bank Draft Authorization
W-9	Request for Taxpayer Identification Number & Certificate
LA-03R	Conditional Receipt

Life Insurance Applicants (Under \$50,000)

ICC19-NSS-LA-19-IL-OH	Life Insurance Application - 2 Pages
HIPAA-NSS	Authorization for Release of Medical Information
RLIA-EXT	Notice Regarding Replacement of Life Insurance & Annuities—External Transfer
MBDA	Monthly Bank Draft Authorization
W-9	Request for Taxpayer Identification Number & Certificate
LA-03R	Conditional Receipt

Protection for yours



Providing for others



NSS Life
Family Matters...



NSS Life
Family Matters...

ANNUITY PRODUCTS

Plan	Minimum Guarantee	Take interest only option	Minimum to start/ Maximum deposit per client per year	Additional deposits permitted	Penalty Free Withdrawal/ contract year	Withdrawal surrender charges
Optimum 3	2%	Yes	\$1,000/\$100,000	Yes	10%	See Product Information page
Preferred 5	2%	Yes	\$1,000/\$250,000	Yes	10%	
Preferred 8	2%	Yes	\$1,000/\$250,000	Yes	10%	
SPIA	Varies	No	\$10,000/\$250,000	No	-	

Optimum 3 Annuity

Non-Qualified & Qualified (IRA and Roth IRA)

- Interest rate remains level for the entire three-year contract.
- Minimum Deposit of \$1,000 to open and maintain certificate.
- Deposits must be received within 90 days of opening account.
- No sales charges.
- Minimum of 2% interest guaranteed for contract duration.
- Up to 10% of account value may be withdrawn once per contract year without NSS imposing a penalty. However, IRS penalties may be incurred for withdrawals prior to age 59 ½.
- Total surrenders or withdrawals more than 10% once a contract year during the three (3) contract years will result accordingly as shown in the chart below unless rolled into our Preferred 5 or Preferred 8 contract.
- Client will receive an Option Form 30 days prior to certificate end date. If no option is selected, certificate will automatically continue as a Preferred 5 product.

Withdrawal Penalties

1 st year	6%
2 nd year	5%
3 rd year	4% <i>*waived during the 30-day window</i>
4 th year	3%
5 th year	2%
Thereafter	0%

Preferred 5 Annuity

Non-Qualified & Qualified (IRA, Roth IRA, SEP, & Coverdell ESA)

- Only \$90 per month is required to open the account. However, a minimum of \$1,000 must be deposited by the end of the first year.
- Deposits are flexible.
- No sales charges.
- Minimum of 2% interest guaranteed for the duration of the contract.
- Current interest rate is declared quarterly. Interest is compounded daily and posted monthly.
- Varied income options available at any time.
- Maximum issue age for Coverdell is 18.
- Maximum yearly deposit to a Coverdell certificate is \$2,000.
- Up to 10% of account value may be withdrawn once per contract year without NSS imposing a penalty. However, IRS penalties may be incurred for withdrawals prior to age 59 ½ (except for Coverdell).
- Total surrenders or withdrawals more than 10% once a contract year during the first five (5) contract years will result accordingly as shown in the chart below.

Withdrawal Penalties

1 st year	6%
2 nd year	5%
3 rd year	4%
4 th year	3%
5 th year	2%
Thereafter	0%

Preferred 8 Annuity

Non-Qualified & Qualified (IRA, Roth IRA, SEP, & Coverdell ESA)

- Only \$90 per month is required to open the account. However, a minimum of \$1,000 must be deposited by the end of the first year.
- Deposits are flexible.
- No sales charges.
- Minimum of 2% interest guaranteed for the duration of the contract.
- Current interest rate is declared quarterly. Interest is compounded daily and posted monthly.
- Varied income options available at any time.
- Maximum issue age for Coverdell is 18.
- Maximum yearly deposit to a Coverdell certificate is \$2,000.
- Up to 10% of account value may be withdrawn once per contract year without NSS imposing a penalty. However, IRS penalties may be incurred for withdrawals prior to age 59 ½ (except for Coverdell).
- Total surrenders or withdrawals more than 10% once a contract year during the first eight (8) contract years will result accordingly as shown in the chart below.

Withdrawal Penalties

1 st year	9%
2 nd year	8%
3 rd year	7%
4 th year	6%
5 th year	5%
6 th year	4%
7 th year	3%
8 th year	2%
Thereafter	0%

Single Premium Immediate Annuity

An Immediate Annuity provides an income benefit almost instantly. With an Immediate Annuity, the Annuitant establishes the annuity with a single premium payment.

- Minimum deposit \$10,000
- No sales charges
- Once initial deposit is received, payments to Annuitant begin 30-60 days afterwards. We require one full month of holding, with no changes to account balance, as of the 1st of the month. After these requirements are met, payout will be disbursed accordingly (i.e., monthly).
- The interest rate at the time of purchase is a fixed rate guaranteed throughout the entire term of the annuity.

Annuity Settlement Options

Life Only

- Distribution of the income benefit is guaranteed for the life of the Annuitant only.
- There are no benefits left to a beneficiary upon the death of the Annuitant.

Specified/Certain Period

- The Annuitant has the option to select a period between five (5) and twenty (20) years, to receive their income benefit. This period of time is considered their Distribution Period.
- Upon the completion date of the selected Distribution Period, the Annuitant then ceases to receive an income benefit.
- If the Annuitant should pass away during the Distribution Period, the designated Beneficiary would then receive the income benefit for the remaining Distribution Period.

Life and Period Certain

- NSS Life offers four options for the Proposed Annuitant to select from. The periods of guaranteed income distribution are either 5, 10, 15 or 20 years. The period of time selected is considered their Guaranteed Distribution Period.
- If the Annuitant should die during the Distribution Period, the designated Beneficiary would then receive the same monthly payments throughout the Distribution Period.
- Upon the completion date of the selected Distribution Period, the Annuitant will continue to receive payments for the rest of their life.

However, if the Annuitant dies, after the specified period, there is no income benefit remaining for the designated Beneficiary.

Payments for Life, Joint, and Survivor

- The Society will make payments to, during the continued lifetime of, the primary and the secondary (or “Survivor”) annuitant.
- Payments upon the death of the primary beneficiary will continue during the lifetime of the secondary (or “Survivor”) Annuitant.
- The amount paid will be at 100%, $66\frac{2}{3}\%$ or 50% during the joint lifetime of the primary and secondary Annuitants as specified at the time of purchase.
- Joint and Survivor payment amounts include interest at the rate guaranteed in the Agreement. The interest rate at the time of purchase is a fixed rate guaranteed throughout the entire term of the annuity.

INSURANCE PRODUCTS

Description and Rates

Product Name	Issue Age	Minimum Face Value	Available Riders	Product Features & Notes
Permanent Plans				
Whole Life	0-85	\$10,000	Accidental Death Disability WOP Payor WOP 10-Year Term 20-Year Term	Excellent value for low-cost protection along with cash value accumulation and dividend earning potential
20-Pay Life	0-85	\$5,000	Accidental Death Disability WOP Payor WOP 10-Year Term 20-Year Term	All the benefits of the OWL Plan but paid up in 20 years.
Single Premium Whole Life	0-85	\$5,000	None	All the benefits of the OWL Plan but paid up in a Lump sum payment.
Single Premium Whole Life (3 Pay Option)	0-85	\$5,000	None	All the benefits of the OWL Plan but paid up in three equal installments. The 1st installment is due with application, 2 nd and 3 rd are due on contract anniversary date. Applicant must sign a Promissory Loan Note at the time of application. An 8% annual interest charge will be applied on installments that are more than thirty (30) days past due.
Term Plans				
Youth Term Single Premium	0-22	\$10,000	None	Lump sum payment. Benefits continues to age 30. Qualifies for conversion credits
Youth Term Annual Premium	0-22	\$10,000	None	Premiums are payable to age 25. Benefits continue to age 30. Qualifies for conversion credits.
10-Year Term	18-70	\$25,000	Accidental Death Disability WOP Payor WOP	Premium payments are scheduled to remain level for 10 years. After that time, it becomes an Annual Renewable Term Contract. This plan is convertible to a permanent plan until age 70 and qualifies for conversion credits. Benefits expire at age 95. A \$50 annual fee is required.
20-Year Term	18-60	\$50,000	Accidental Death Disability WOP Payor WOP	Premium payments are scheduled to remain level for 20 years. After that time, it becomes an Annual Renewable Term Contract. This plan is convertible to a permanent plan until age 70 and qualifies for conversion credits. Benefits expire at age 95. A \$50 annual fee is required.

Permanent (Whole Life) policies protect you for as long as you live. Whole life policies develop cash values. If you stop paying the premiums, you can take the cash or you can use the cash value to buy continuing insurance protection for a limited time or a reduced benefit. We offer the following types of Whole Life products:

- Ordinary Whole Life
- 20-Pay Whole Life
- Single Premium Whole Life
- Single Premium Whole Life – 3-Pay Option

Term Life insurance covers you for a set period (term) of one or more years. It pays a death benefit only if you die during that term. Policies can be renewed annually at the current rate and can be converted, before the end of a certain period of time, for a Whole Life Policy. We offer the following types of Term Life products:

- 10-Year Term
- 20-Year Term

Youth Term Life insurance is term insurance offered to children and youths up to age 25 at a flat rate fee premium and remains in force until age 30.

- Level Premium until age 25
- Issue Ages is 0-22 based on Age Nearest Birthday (ANB)
- Convertible at or before age 30 for face value up to \$50,000 of any permanent or Term Life insurance plan available without evidence of insurability.
- Conversion must be within 60 days of the expiration of the certificate.
- Conversion credit of \$1.00 per thousand of insurance X the number of years certificate has been in force (up to a maximum of \$100) to be applied to first year's premium on converted plan.
- If the annual premium on the new plan is less than the total conversion credit, only the annual premium amount will be paid. No conversion credit monies will be carried over to the second year.

YOUTH TERM RATES

Face Value	Annual Pay	Single Pay
\$10,000	\$17	\$125
\$25,000	\$27	\$300
\$50,000	\$50	\$500

Computation for Modes of Premium Payment

- Semi-Annual Rate** = Annual Premium x .52
- Quarterly Rate** = Annual Premium x .265
- Monthly Rate*** = Annual Premium x .09

**Direct Debit requires a \$10.00 minimum monthly premium*

RIDERS

Accidental Death

If death is the result of accidental body injury while the contract is in force, within one hundred eighty (180) days of such injury, the Society will pay, in addition to the face amount of the policy, an additional sum insured to the Beneficiary.

- Rider remains in force until contract anniversary date or age 65.

Available Plans	Issue Ages
Ordinary Whole Life (OWL)	0 to 64
20-Pay Whole Life	0 to 64
10-Year Term	18 to 60
20-Year Term	18 to 60

Disability Waiver of Premium

Benefits are granted providing the rider is part of the premium charged. If the Waiver of Premium is in force, premiums due on the policy will be waived for the remainder of the premium paying period, even for life in some cases, should the insured become totally disabled prior to age 60. Said disability must prevent the insured from working at any occupation for wage or profit and must continue for a period of three (3) months to qualify. Any premiums paid during the three-month period will be refunded to the member once disability has been established. The contract remains in full force with all the options available to the insured exactly as if the member were paying their premiums regularly.

- NSS Life will require proof of continuance of disability. A Social Security award letter would be sufficient proof.
- Rider remains in force until contract anniversary date or 60.

Available Plans	Issue Ages
Ordinary Whole Life (OWL)	0 to 55
20-Pay Whole Life	0 to 55
10-Year Term	20 to 59
20-Year Term	20 to 59

Payor Waiver of Premium

Payor Benefit—The payment of premium, for the contract and riders attached to the contract, will be waived by NSS Life when the following criteria is met:

1. Proof of the death or total disability of the Payor.
2. The death or total disability of the Payor must occur:
 - a. while the contract and this Rider is in force,
 - b. prior to the contract anniversary nearest the 25th birthday of the Insured, and
 - c. prior to the contract anniversary nearest the Payor's 65th birthday
 - d. Disability must last for a continuous period of at least six (6) months.

In the event of death or during the continuance of the total disability of the Payor, premium will be waived to either:

- (1) the contract anniversary nearest the 25th birthday of the Insured; or
- (2) the end of the Premium paying period for the contract, whichever occurs first.

Available Plans	Issue Ages
Ordinary Whole Life (OWL)	Payor 20-59 Insured 0-17
20-Pay Whole Life	Payor 20-59 Insured 0-17

10-Year Term

Term Rider is the 10-Year Term Plan. No certificate fee is charged when selected as a rider.

Available Plans	Issue Ages
Ordinary Whole Life (OWL)	18 to 70
20-Pay Whole Life	18 to 70

20-Year Term

Term Rider is the 20-Year Term Plan. No certificate fee is charged when selected as a rider.

Available Plans	Issue Ages
Ordinary Whole Life (OWL)	18 to 60
20-Pay Whole Life	18 to 60

Whole Life - Female

Annual Premium - Per Thousand

- * Most economical Permanent Plan
- * Issue Ages 0-85, based on Age Nearest Birthday (ANB)
- * Minimum face amount: \$10,000

Premiums Banded for quantity discounts	Band 1	Band 2	Band 3
	\$10,000-\$24,999	\$25,000-\$99,999	\$100,000 +
	T & NT	T, NT, & P	T, NT, & P

- * Level premium payments
- * Premiums payable for life
- * Accrues cash and loan values
- * Non-Forfeiture values
- * Dividends are not guaranteed.
- * No policy fee
- * Matures at age 121
- * Youth ages 0-17 are only Male or Female non-tobacco rates (aggregate)
- * Dividend Options are:
 - Paid up additions
 - Accumulate Interest
 - Dividends in Cash
 - Reduced Premium
- * Riders Available:
 - Accidental Death--issue ages 0-64
 - Disability Waiver of Premium--issue ages 0-55
 - Payor Waiver of Premium--Insured age 0-17 Payor's age 20-59
 - 10 Year Term Rider - \$50 policy fee waived
 - 20 Year Term Rider - \$50 policy fee waived

Whole Life - Female

Annual Premium - Per Thousand

*Payor Waiver of Premium Factors (by age of Payor)
(To be multiplied by the base policy premium)

Age	Non-Tobacco						Preferred						Tobacco						Available Riders			
	\$10,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		\$25,000 - \$99,999		\$100,000 & over		\$10,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		WP		ADB		*PWP	
	FN	FP	FN	FP	FN	FP	FN	FP	FN	FP	FN	FP	FN	FP	FN	FP	FN	FT	FN	FT	FN	FT
0	10.52	4.66	3.52	4.66	3.52	4.66	3.52	4.66	3.52	10.52	4.66	3.52	4.66	3.52	10.52	4.66	3.52	0.38	0.92	0.92	-	-
1	10.60	4.75	3.61	4.75	3.61	4.75	3.61	4.75	3.61	10.60	4.75	3.61	4.75	3.61	10.60	4.75	3.61	0.39	0.90	0.90	-	-
2	10.69	4.85	3.71	4.85	3.71	4.85	3.71	4.85	3.71	10.69	4.85	3.71	4.85	3.71	10.69	4.85	3.71	0.39	0.90	0.90	-	-
3	10.80	4.96	3.82	4.96	3.82	4.96	3.82	4.96	3.82	10.80	4.96	3.82	4.96	3.82	10.80	4.96	3.82	0.39	0.90	0.90	-	-
4	10.92	5.07	3.93	5.07	3.93	5.07	3.93	5.07	3.93	10.92	5.07	3.93	5.07	3.93	10.92	5.07	3.93	0.39	0.90	0.90	-	-
5	11.04	5.19	4.05	5.19	4.05	5.19	4.05	5.19	4.05	11.04	5.19	4.05	5.19	4.05	11.04	5.19	4.05	0.40	0.92	0.92	-	-
6	11.17	5.32	4.18	5.32	4.18	5.32	4.18	5.32	4.18	11.17	5.32	4.18	5.32	4.18	11.17	5.32	4.18	0.40	0.92	0.92	-	-
7	11.30	5.45	4.31	5.45	4.31	5.45	4.31	5.45	4.31	11.30	5.45	4.31	5.45	4.31	11.30	5.45	4.31	0.40	0.94	0.94	-	-
8	11.44	5.58	4.44	5.58	4.44	5.58	4.44	5.58	4.44	11.44	5.58	4.44	5.58	4.44	11.44	5.58	4.44	0.42	0.94	0.94	-	-
9	11.58	5.73	4.58	5.73	4.58	5.73	4.58	5.73	4.58	11.58	5.73	4.58	5.73	4.58	11.58	5.73	4.58	0.42	0.96	0.96	-	-
10	11.73	5.87	4.73	5.87	4.73	5.87	4.73	5.87	4.73	11.73	5.87	4.73	5.87	4.73	11.73	5.87	4.73	0.43	0.98	0.98	-	-
11	11.89	6.03	4.88	6.03	4.88	6.03	4.88	6.03	4.88	11.89	6.03	4.88	6.03	4.88	11.89	6.03	4.88	0.43	1.00	1.00	-	-
12	12.05	6.19	5.04	6.19	5.04	6.19	5.04	6.19	5.04	12.05	6.19	5.04	6.19	5.04	12.05	6.19	5.04	0.44	1.02	1.02	-	-
13	12.23	6.35	5.20	6.35	5.20	6.35	5.20	6.35	5.20	12.23	6.35	5.20	6.35	5.20	12.23	6.35	5.20	0.45	1.02	1.02	-	-
14	12.42	6.53	5.38	6.53	5.38	6.53	5.38	6.53	5.38	12.42	6.53	5.38	6.53	5.38	12.42	6.53	5.38	0.45	1.04	1.04	-	-
15	12.61	6.72	5.56	6.72	5.56	6.72	5.56	6.72	5.56	12.61	6.72	5.56	6.72	5.56	12.61	6.72	5.56	0.47	1.06	1.06	-	-
16	12.82	6.91	5.75	6.91	5.75	6.91	5.75	6.91	5.75	12.82	6.91	5.75	6.91	5.75	12.82	6.91	5.75	0.47	1.06	1.06	-	-
17	13.02	7.11	5.95	7.11	5.95	7.11	5.95	7.11	5.95	13.02	7.11	5.95	7.11	5.95	13.02	7.11	5.95	0.48	1.04	1.04	-	-
18	12.70	6.83	5.66	6.77	5.60	6.77	5.60	6.77	5.60	14.30	8.38	7.22	8.38	7.22	14.30	8.38	7.22	0.46	1.04	1.04	-	-
19	12.86	7.00	5.84	6.94	5.77	6.94	5.77	6.94	5.77	14.55	8.63	7.46	8.63	7.46	14.55	8.63	7.46	0.46	1.02	1.02	-	-
20	13.03	7.16	6.00	7.11	5.94	7.11	5.94	7.11	5.94	14.80	8.88	7.71	8.88	7.71	14.80	8.88	7.71	0.46	0.98	0.98	1.55%	-

Whole Life - Female

Annual Premium - Per Thousand

*Payor Waiver of Premium Factors (by age of Payor)
(To be multiplied by the base policy premium)

Age	Non-Tobacco						Preferred						Tobacco						Available Riders			
	\$10,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		\$25,000 - \$99,999		\$100,000 & over		\$10,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		WP		ADB		*PWP	
	FN	FA	FN	FA	FN	FA	FP	FA	FP	FA	FT	FA	FT	FA	FT	FA	FT	FN	FA	FT	FA	FN
21	13.19	7.34	6.18	7.28	6.12	15.07	9.14	7.98	0.96	1.65%												
22	13.37	7.53	6.36	7.47	6.31	15.36	9.42	8.25	0.94	1.70%												
23	13.56	7.72	6.56	7.67	6.51	15.67	9.72	8.55	0.94	1.90%												
24	13.76	7.92	6.76	7.87	6.71	15.99	10.03	8.85	0.92	2.20%												
25	13.98	8.14	6.98	8.09	6.93	16.32	10.35	9.17	0.92	2.40%												
26	14.21	8.37	7.20	8.31	7.15	16.67	10.68	9.50	0.90	2.55%												
27	14.45	8.61	7.44	8.55	7.39	17.04	11.04	9.85	0.90	2.70%												
28	14.70	8.86	7.69	8.80	7.64	17.42	11.40	10.21	0.92	2.80%												
29	14.97	9.12	7.96	9.06	7.90	17.82	11.77	10.58	0.92	2.90%												
30	15.26	9.40	8.23	9.33	8.17	18.24	12.17	10.96	0.92	3.25%												
31	15.55	9.69	8.52	9.62	8.45	18.67	12.57	11.36	0.94	3.40%												
32	15.87	9.99	8.82	9.92	8.75	19.12	13.00	11.78	0.94	3.65%												
33	16.20	10.31	9.14	10.23	9.06	19.59	13.44	12.21	0.96	4.00%												
34	16.54	10.65	9.47	10.56	9.39	20.08	13.89	12.66	0.96	4.25%												
35	16.91	11.00	9.82	10.91	9.73	20.60	14.38	13.14	0.98	4.50%												
36	17.29	11.38	10.19	11.28	10.09	21.15	14.89	13.63	0.98	4.60%												
37	17.70	11.77	10.58	11.66	10.47	21.74	15.42	14.16	1.00	4.80%												
38	18.12	12.19	10.99	12.06	10.87	22.35	15.99	14.71	1.00	4.90%												
39	18.57	12.62	11.41	12.49	11.29	23.00	16.59	15.30	1.02	5.15%												
40	19.03	13.07	11.86	12.93	11.73	23.69	17.21	15.91	1.04	5.35%												
41	19.52	13.54	12.33	13.39	12.19	24.40	17.87	16.54	1.04	5.55%												

Whole Life - Female

Annual Premium - Per Thousand

*Payor Waiver of Premium Factors (by age of Payor)
(To be multiplied by the base policy premium)

Age	Non-Tobacco						Preferred						Tobacco						Available Riders				
	\$10,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		\$25,000 - \$99,999		\$10,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		WP		ADB		*PWP				
	FN	FW	FN	FW	FP	FW	FP	FW	FT	FW	FT	FW	FT	FN	FW	FT	FW	FT	FN	FW	FT		
42	20.03	14.04	12.82	13.88	13.88	12.67	12.67	13.88	13.88	12.67	12.67	13.88	13.88	12.67	12.67	18.55	17.21	18.55	17.21	0.95	1.20	1.06	5.50%
43	20.57	14.56	13.33	14.38	14.38	13.17	13.17	14.38	14.38	13.17	13.17	14.38	14.38	13.17	13.17	19.26	17.90	19.26	17.90	1.00	1.27	1.08	6.10%
44	21.13	15.09	13.86	14.91	14.91	13.68	13.68	14.91	14.91	13.68	13.68	14.91	14.91	13.68	13.68	20.01	18.62	20.01	18.62	1.07	1.36	1.10	6.20%
45	21.73	15.66	14.42	15.46	15.46	14.23	14.23	15.46	15.46	14.23	14.23	15.46	15.46	14.23	14.23	20.79	19.38	20.79	19.38	1.14	1.46	1.12	6.35%
46	22.34	16.25	15.00	16.03	16.03	14.79	14.79	16.03	16.03	14.79	14.79	16.03	16.03	14.79	14.79	21.60	20.16	21.60	20.16	1.22	1.58	1.14	6.70%
47	23.00	16.87	15.60	16.63	16.63	15.38	15.38	16.63	16.63	15.38	15.38	16.63	16.63	15.38	15.38	22.46	20.99	22.46	20.99	1.30	1.68	1.16	7.10%
48	23.69	17.52	16.25	17.27	17.27	16.01	16.01	17.27	17.27	16.01	16.01	17.27	17.27	16.01	16.01	23.36	21.85	23.36	21.85	1.39	1.81	1.18	7.50%
49	24.41	18.21	16.92	17.93	17.93	16.66	16.66	17.93	17.93	16.66	16.66	17.93	17.93	16.66	16.66	24.30	22.76	24.30	22.76	1.49	1.95	1.20	7.75%
50	25.18	18.93	17.62	18.62	18.62	17.34	17.34	18.62	18.62	17.34	17.34	18.62	18.62	17.34	17.34	25.28	23.70	25.28	23.70	1.62	2.13	1.22	7.75%
51	25.97	19.68	18.36	19.35	19.35	18.05	18.05	19.35	19.35	18.05	18.05	19.35	19.35	18.05	18.05	26.31	24.68	26.31	24.68	1.78	2.35	1.24	7.75%
52	26.80	20.46	19.13	20.10	20.10	18.79	18.79	20.10	20.10	18.79	18.79	20.10	20.10	18.79	18.79	27.41	25.73	27.41	25.73	1.95	2.59	1.26	7.75%
53	27.68	21.29	19.93	20.90	20.90	19.58	19.58	20.90	20.90	19.58	19.58	20.90	20.90	19.58	19.58	28.57	26.83	28.57	26.83	2.14	2.85	1.28	7.75%
54	28.61	22.15	20.78	21.75	21.75	20.40	20.40	21.75	21.75	20.40	20.40	21.75	21.75	20.40	20.40	29.79	27.99	29.79	27.99	2.36	3.16	1.32	7.75%
55	29.59	23.08	21.69	22.64	22.64	21.28	21.28	22.64	22.64	21.28	21.28	22.64	22.64	21.28	21.28	31.08	29.21	31.08	29.21	2.59	3.49	1.34	7.75%
56	30.64	24.05	22.64	23.59	23.59	22.21	22.21	23.59	23.59	22.21	22.21	23.59	23.59	22.21	22.21	32.45	30.51	32.45	30.51	-	-	1.38	7.75%
57	31.74	25.08	23.64	24.58	24.58	23.18	23.18	24.58	24.58	23.18	23.18	24.58	24.58	23.18	23.18	33.88	31.86	33.88	31.86	-	-	1.42	7.75%
58	32.91	26.16	24.70	25.63	25.63	24.21	24.21	25.63	25.63	24.21	24.21	25.63	25.63	24.21	24.21	35.42	33.30	35.42	33.30	-	-	1.46	7.75%
59	34.16	27.32	25.83	26.75	26.75	25.30	25.30	26.75	26.75	25.30	25.30	26.75	26.75	25.30	25.30	37.07	34.91	37.07	34.91	-	-	1.50	7.75%
60	35.49	28.55	27.02	27.93	27.93	26.45	26.45	27.93	27.93	26.45	26.45	27.93	27.93	26.45	26.45	38.82	36.62	38.82	36.62	-	-	1.54	-
61	36.91	29.85	28.28	29.18	29.18	27.67	27.67	29.18	29.18	27.67	27.67	29.18	29.18	27.67	27.67	40.67	38.43	40.67	38.43	-	-	1.58	-
62	38.43	31.24	29.63	30.51	30.51	28.96	28.96	30.51	30.51	28.96	28.96	30.51	30.51	28.96	28.96	42.63	40.34	42.63	40.34	-	-	1.62	-

Whole Life - Female

Annual Premium - Per Thousand

*Payor Waiver of Premium Factors (by age of Payor)
(To be multiplied by the base policy premium)

Age	Non-Tobacco						Preferred						Tobacco						Available Riders				
	\$10,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		\$25,000 - \$99,999		\$100,000 & over		\$10,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		WP		ADB		*PWP		
	FN	FN	FN	FN	FP	FP	FP	FP	FP	FP	FT	FT	FT	FT	FT	FT	FN	FT	FN	FT	FN	FT	
63	40.10	32.74	31.08	31.95	30.34	55.57	44.71	42.35	-	-	-	-	-	-	-	-	-	-	-	-	-	1.66	-
64	41.89	34.35	32.62	33.48	31.82	58.18	46.91	44.44	-	-	-	-	-	-	-	-	-	-	-	-	-	1.72	-
65	43.78	36.05	34.26	35.10	33.38	61.06	49.35	46.65	-	-	-	-	-	-	-	-	-	-	-	-	-	1.76	-
66	45.77	37.83	35.96	36.79	35.01	64.13	51.95	48.99	-	-	-	-	-	-	-	-	-	-	-	-	-	1.82	-
67	47.85	39.68	37.73	38.57	36.71	67.52	54.82	51.58	-	-	-	-	-	-	-	-	-	-	-	-	-	1.86	-
68	50.15	41.75	39.66	40.52	38.55	71.19	57.91	54.36	-	-	-	-	-	-	-	-	-	-	-	-	-	1.92	-
69	52.67	44.03	41.75	42.70	40.55	75.14	61.23	57.32	-	-	-	-	-	-	-	-	-	-	-	-	-	1.96	-
70	55.37	46.46	43.96	45.05	42.67	79.50	64.88	60.61	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
71	58.25	49.05	46.31	47.55	44.93	84.09	68.72	64.17	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
72	61.31	51.79	48.90	50.21	47.45	88.92	72.76	67.91	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
73	64.61	54.74	51.70	53.07	50.17	93.94	76.95	71.80	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
74	68.04	57.80	54.58	56.04	52.98	99.22	81.36	75.89	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
75	71.67	61.01	57.61	59.18	55.94	105.20	86.31	80.46	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
76	75.67	64.57	60.97	62.60	59.17	111.87	91.78	85.49	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
77	80.01	68.40	64.57	66.31	62.66	119.10	97.69	90.89	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
78	84.64	72.48	68.40	70.25	66.36	126.91	104.02	96.66	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
79	89.81	76.94	72.57	74.62	70.46	135.26	110.74	102.77	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
80	95.37	81.77	77.11	79.33	74.87	144.30	117.96	109.33	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
81	101.33	86.93	81.92	84.31	79.52	152.99	124.89	115.62	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
82	108.46	92.97	87.54	90.24	85.04	162.26	132.28	122.32	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
83	117.15	100.32	94.32	97.35	91.60	172.12	140.09	129.40	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

Whole Life - Female

Annual Premium - Per Thousand

*Payor Waiver of Premium Factors (by age of Payor)
(To be multiplied by the base policy premium)

Age	Non-Tobacco				Preferred				Tobacco				Available Riders								
	\$10,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		\$25,000 - \$99,999		\$10,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		WP		ADB		*PWP		
	FN	FT	FN	FT	FP	FT	FN	FT	FP	FT	FN	FT	FN	FT	FN	FT	FN	FT	FN	FT	
84	127.50		109.04	102.32	105.73	99.30	183.21	148.85	137.31												
85	138.71		118.42	110.90	114.61	107.42	195.42	158.43	145.93												

Whole Life - Male

Annual Premium - Per Thousand

- * Most economical Permanent Plan
- * Issue Ages 0-85, based on Age Nearest Birthday (ANB)

* Minimum face amount: \$10,000

Premiums Banded for quantity	Band 1	Band 2	Band 3
	\$10,000-\$24,999	\$25,000-\$99,999	\$100,000 +
	T & NT	T, NT, & P	T, NT, & P

- * Level premium payments
- * Premiums payable for life
- * Accrues cash and loan values
- * Non-Forfeiture values
- * Dividends are not guaranteed.
- * No policy fee
- * Matures at age 121
- * Youth ages 0-17 are only Male or Female non-tobacco rates (aggregate)

* Dividend Options are:

- Paid up additions
- Accumulate Interest
- Dividends in Cash
- Reduced Premium

* Riders Available:

- Accidental Death--issue ages 0-64
- Disability Waiver of Premium--issue ages 0-55
- Payor Waiver of Premium--insured age 0-17 Payor's age 20-59
- 10 Year Term Rider - \$50 policy fee waived
- 20 Year Term Rider - \$50 policy fee waived

Whole Life - Male

Annual Premium - Per Thousand
 *Payor Waiver of Premium Factors (by age of Payor)
 (To be multiplied by the base policy premium)

Age	Non-Tobacco						Preferred						Tobacco						Available Riders			
	\$10,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		\$25,000 - \$99,999		\$100,000 & over		\$10,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		WP		ADB	*PWP		
	MN	MP	MN	MP	MN	MP	MN	MP	MN	MP	MT	MT	MT	MT	MT	MT	MT	T				
0	11.01	5.14	3.99	5.14	3.99	3.99	5.14	5.14	3.99	11.01	11.01	5.14	5.14	3.99	3.99	0.40	0.40	0.92				
1	11.11	5.24	4.10	5.24	4.10	4.10	5.24	5.24	4.10	11.11	11.11	5.24	5.24	4.10	4.10	0.41	0.41	0.90				
2	11.23	5.37	4.22	5.37	4.22	4.22	5.37	5.37	4.22	11.23	11.23	5.37	5.37	4.22	4.22	0.41	0.41	0.90				
3	11.36	5.49	4.35	5.49	4.35	4.35	5.49	5.49	4.35	11.36	11.36	5.49	5.49	4.35	4.35	0.41	0.41	0.90				
4	11.50	5.62	4.48	5.62	4.48	4.48	5.62	5.62	4.48	11.50	11.50	5.62	5.62	4.48	4.48	0.41	0.41	0.90				
5	11.65	5.77	4.62	5.77	4.62	4.62	5.77	5.77	4.62	11.65	11.65	5.77	5.77	4.62	4.62	0.42	0.42	0.92				
6	11.80	5.91	4.76	5.91	4.76	4.76	5.91	5.91	4.76	11.80	11.80	5.91	5.91	4.76	4.76	0.42	0.42	0.92				
7	11.96	6.07	4.91	6.07	4.91	4.91	6.07	6.07	4.91	11.96	11.96	6.07	6.07	4.91	4.91	0.43	0.43	0.94				
8	12.13	6.23	5.07	6.23	5.07	5.07	6.23	6.23	5.07	12.13	12.13	6.23	6.23	5.07	5.07	0.44	0.44	0.94				
9	12.31	6.39	5.23	6.39	5.23	5.23	6.39	6.39	5.23	12.31	12.31	6.39	6.39	5.23	5.23	0.45	0.45	0.96				
10	12.50	6.56	5.40	6.56	5.40	5.40	6.56	6.56	5.40	12.50	12.50	6.56	6.56	5.40	5.40	0.46	0.46	0.98				
11	12.69	6.74	5.57	6.74	5.57	5.57	6.74	6.74	5.57	12.69	12.69	6.74	6.74	5.57	5.57	0.46	0.46	1.00				
12	12.90	6.93	5.75	6.93	5.75	5.75	6.93	6.93	5.75	12.90	12.90	6.93	6.93	5.75	5.75	0.47	0.47	1.02				
13	13.12	7.12	5.94	7.12	5.94	5.94	7.12	7.12	5.94	13.12	13.12	7.12	7.12	5.94	5.94	0.48	0.48	1.02				
14	13.36	7.33	6.14	7.33	6.14	6.14	7.33	7.33	6.14	13.36	13.36	7.33	7.33	6.14	6.14	0.49	0.49	1.04				
15	13.60	7.55	6.35	7.55	6.35	6.35	7.55	7.55	6.35	13.60	13.60	7.55	7.55	6.35	6.35	0.50	0.50	1.06				
16	13.86	7.78	6.57	7.78	6.57	6.57	7.78	7.78	6.57	13.86	13.86	7.78	7.78	6.57	6.57	0.50	0.50	1.06				
17	14.12	8.01	6.80	8.01	6.80	6.80	8.01	8.01	6.80	14.12	14.12	8.01	8.01	6.80	6.80	0.51	0.51	1.04				
18	13.67	7.66	6.45	7.57	6.35	6.35	7.57	7.57	6.35	15.40	15.40	9.29	9.29	8.07	8.07	0.49	0.53	1.04				
19	13.80	7.81	6.60	7.73	6.51	6.51	7.73	7.73	6.51	15.60	15.60	9.51	9.51	8.29	8.29	0.49	0.54	1.02				
20	13.93	7.96	6.77	7.89	6.69	6.69	7.89	7.89	6.69	15.84	15.84	9.75	9.75	8.54	8.54	0.49	0.56	0.98		1.55%		
21	14.07	8.12	6.93	8.06	6.86	6.86	8.06	8.06	6.86	16.08	16.08	10.01	10.01	8.80	8.80	0.50	0.57	0.96		1.65%		

Whole Life - Male

Annual Premium - Per Thousand
 *Payor Waiver of Premium Factors (by age of Payor)
 (To be multiplied by the base policy premium)

Age	Non-Tobacco				Preferred				Tobacco				Available Riders				
	\$10,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		\$25,000 - \$99,999		\$10,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		WP	ADB	*PWP
	MIN	MP	MN	MP	MP	MP	MT	MT	MT	MT	MT	MT	MT	T			
22	14.23	8.31	7.12	8.25	7.06	16.35	10.28	9.08	9.51	0.58	0.94	0.94	0.94	0.58	0.94	1.70%	
23	14.41	8.50	7.32	8.45	7.27	16.64	10.57	9.37	9.51	0.59	0.94	0.94	0.94	0.59	0.94	1.90%	
24	14.62	8.72	7.54	8.67	7.49	16.96	10.89	9.68	9.52	0.61	0.92	0.92	0.92	0.52	0.61	2.20%	
25	14.84	8.95	7.78	8.91	7.73	17.30	11.22	10.02	9.54	0.62	0.92	0.92	0.92	0.54	0.62	2.40%	
26	15.10	9.21	8.04	9.17	7.99	17.66	11.58	10.37	9.55	0.64	0.90	0.90	0.90	0.55	0.64	2.55%	
27	15.38	9.49	8.32	9.44	8.27	18.04	11.95	10.74	9.55	0.65	0.90	0.90	0.90	0.55	0.65	2.70%	
28	15.67	9.78	8.60	9.73	8.55	18.45	12.33	11.12	9.56	0.67	0.92	0.92	0.92	0.56	0.67	2.80%	
29	15.98	10.08	8.90	10.02	8.85	18.88	12.75	11.52	9.58	0.68	0.92	0.92	0.92	0.58	0.68	2.90%	
30	16.27	10.37	9.20	10.32	9.14	19.34	13.17	11.94	9.59	0.70	0.92	0.92	0.92	0.59	0.70	3.25%	
31	16.58	10.67	9.50	10.62	9.44	19.81	13.62	12.38	9.61	0.73	0.94	0.94	0.94	0.61	0.73	3.40%	
32	16.92	11.00	9.82	10.94	9.76	20.30	14.08	12.83	9.64	0.76	0.94	0.94	0.94	0.64	0.76	3.65%	
33	17.26	11.34	10.16	11.27	10.09	20.81	14.56	13.30	9.65	0.78	0.96	0.96	0.96	0.65	0.78	4.00%	
34	17.64	11.70	10.52	11.62	10.44	21.34	15.05	13.78	9.68	0.82	0.96	0.96	0.96	0.68	0.82	4.25%	
35	18.02	12.08	10.89	11.99	10.80	21.88	15.56	14.29	9.71	0.86	0.98	0.98	0.98	0.71	0.86	4.50%	
36	18.44	12.48	11.29	12.38	11.19	22.46	16.09	14.81	9.74	0.91	0.98	0.98	0.98	0.74	0.91	4.60%	
37	18.88	12.91	11.71	12.80	11.60	23.07	16.65	15.36	9.78	0.96	1.00	1.00	1.00	0.78	0.96	4.80%	
38	19.36	13.37	12.16	13.24	12.04	23.72	17.25	15.94	9.80	0.99	1.00	1.00	1.00	0.80	0.99	4.90%	
39	19.87	13.86	12.64	13.71	12.50	24.41	17.87	16.55	9.85	1.06	1.02	1.02	1.02	0.85	1.06	5.15%	
40	20.40	14.37	13.15	14.20	12.99	25.15	18.55	17.21	9.90	1.12	1.04	1.04	1.04	0.90	1.12	5.35%	
41	20.97	14.91	13.68	14.72	13.50	25.95	19.26	17.90	9.96	1.20	1.04	1.04	1.04	0.96	1.20	5.55%	
42	21.55	15.48	14.23	15.26	14.03	26.80	20.03	18.65	1.02	1.28	1.06	1.06	1.06	1.02	1.28	5.50%	
43	22.17	16.06	14.81	15.82	14.59	27.71	20.84	19.43	1.08	1.36	1.08	1.08	1.08	1.08	1.36	6.10%	

Whole Life - Male

Annual Premium - Per Thousand
 *Payor Waiver of Premium Factors (by age of Payor)
 (To be multiplied by the base policy premium)

Age	Non-Tobacco						Preferred						Tobacco						Available Riders			
	\$10,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		\$25,000 - \$99,999		\$100,000 & over		\$10,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		WP		ADB	*PWP		
	MIN	MP	MN	MP	MN	MP	MP	MP	MP	MP	MT	MT	MT	MT	MT	MT	MT	T				
44	22.82	16.68	15.42	16.41	15.17	28.68	21.70	20.26	1.15	1.46	1.10	6.20%										
45	23.50	17.33	16.06	17.04	15.78	29.70	22.61	21.13	1.23	1.57	1.12	6.35%										
46	24.22	18.02	16.72	17.69	16.42	30.79	23.56	22.05	1.32	1.70	1.14	6.70%										
47	24.97	18.74	17.43	18.37	17.10	31.95	24.57	23.02	1.41	1.82	1.16	7.10%										
48	25.77	19.49	18.17	19.09	17.80	33.18	25.64	24.04	1.52	1.97	1.18	7.50%										
49	26.59	20.28	18.93	19.83	18.53	34.50	26.78	25.12	1.63	2.14	1.20	7.75%										
50	27.45	21.09	19.73	20.60	19.28	35.93	27.99	26.27	1.77	2.34	1.22	7.75%										
51	28.35	21.94	20.56	21.41	20.07	37.46	29.29	27.49	1.95	2.60	1.24	7.75%										
52	29.30	22.84	21.43	22.26	20.90	39.10	30.66	28.79	2.14	2.88	1.26	7.75%										
53	30.32	23.80	22.37	23.17	21.79	40.85	32.12	30.16	2.36	3.20	1.28	7.75%										
54	31.44	24.84	23.38	24.15	22.75	42.70	33.65	31.60	2.60	3.56	1.32	7.75%										
55	32.63	25.94	24.45	25.18	23.76	44.64	35.27	33.10	2.87	3.96	1.34	7.75%										
56	33.91	27.14	25.61	26.30	24.85	46.70	37.00	34.68	-	-	1.38	7.75%										
57	35.29	28.40	26.82	27.48	25.99	48.87	38.82	36.32	-	-	1.42	7.75%										
58	36.75	29.75	28.12	28.74	27.20	51.15	40.72	38.04	-	-	1.46	7.75%										
59	38.27	31.13	29.45	30.03	28.45	53.50	42.68	39.83	-	-	1.50	7.75%										
60	39.85	32.57	30.83	31.38	29.75	55.93	44.70	41.76	-	-	1.54	-										
61	41.45	34.02	32.23	32.75	31.07	58.41	46.77	43.76	-	-	1.58	-										
62	43.10	35.52	33.68	34.17	32.45	60.69	48.68	45.54	-	-	1.62	-										
63	44.84	37.09	35.18	35.66	33.89	62.94	50.59	47.22	-	-	1.66	-										
64	46.69	38.75	36.79	37.25	35.42	65.49	52.73	49.14	-	-	1.72	-										
65	48.66	40.53	38.47	38.92	37.03	68.41	55.18	51.39	-	-	1.76	-										

Whole Life - Male

Annual Premium - Per Thousand

*Payor Waiver of Premium Factors (by age of Payor)
(To be multiplied by the base policy premium)

Age	Non-Tobacco						Preferred						Tobacco						Available Riders		
	\$10,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		\$25,000 - \$99,999		\$100,000 & over		\$10,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		WP		ADB	*PWP	
	MIN	MP	MN	MP	MN	MP	MP	MP	MP	MP	MT	MT	MT	MT	MT	MT	MT	MT			
66	50.86	42.50	40.31	40.77	38.80	71.54	57.79	53.82	-	-	-	-	-	-	-	-	-	-	1.82	-	
67	53.21	44.60	42.25	42.78	40.67	74.95	60.62	56.44	-	-	-	-	-	-	-	-	-	-	1.86	-	
68	55.83	46.92	44.39	45.04	42.73	78.76	63.78	59.35	-	-	-	-	-	-	-	-	-	-	1.92	-	
69	58.85	49.59	46.82	47.63	45.09	82.85	67.15	62.47	-	-	-	-	-	-	-	-	-	-	1.96	-	
70	62.03	52.40	49.42	50.39	47.58	87.30	70.81	65.84	-	-	-	-	-	-	-	-	-	-	-	-	
71	65.25	55.22	52.10	53.20	50.24	92.01	74.67	69.39	-	-	-	-	-	-	-	-	-	-	-	-	
72	68.76	58.27	54.99	56.24	53.11	97.14	78.86	73.24	-	-	-	-	-	-	-	-	-	-	-	-	
73	72.83	61.81	58.31	59.74	56.41	102.23	83.02	77.06	-	-	-	-	-	-	-	-	-	-	-	-	
74	77.30	65.63	61.91	63.52	59.96	107.81	87.59	81.26	-	-	-	-	-	-	-	-	-	-	-	-	
75	82.15	69.77	65.78	67.64	63.81	113.34	92.16	85.48	-	-	-	-	-	-	-	-	-	-	-	-	
76	87.38	74.25	69.97	72.04	67.92	119.58	97.32	90.24	-	-	-	-	-	-	-	-	-	-	-	-	
77	92.26	78.46	73.94	76.25	71.89	126.57	103.06	95.51	-	-	-	-	-	-	-	-	-	-	-	-	
78	97.43	82.90	78.11	80.68	76.06	134.10	109.23	101.16	-	-	-	-	-	-	-	-	-	-	-	-	
79	102.25	87.04	82.02	84.84	79.98	142.43	116.00	107.32	-	-	-	-	-	-	-	-	-	-	-	-	
80	107.13	91.26	85.99	89.07	83.96	151.37	123.23	113.88	-	-	-	-	-	-	-	-	-	-	-	-	
81	113.65	96.73	91.08	94.45	88.97	161.03	130.98	120.90	-	-	-	-	-	-	-	-	-	-	-	-	
82	121.71	103.49	97.34	101.07	95.09	171.14	139.03	128.18	-	-	-	-	-	-	-	-	-	-	-	-	
83	132.36	112.30	105.43	109.61	102.93	182.04	147.64	135.92	-	-	-	-	-	-	-	-	-	-	-	-	
84	146.82	124.07	116.13	120.91	113.21	194.24	157.22	144.52	-	-	-	-	-	-	-	-	-	-	-	-	
85	161.69	135.97	126.89	132.20	123.41	208.00	167.92	154.09	-	-	-	-	-	-	-	-	-	-	-	-	

20 Pay Life - Female

Annual Premium - Per Thousand

- * Level Premium Plans for 20 years
- * Issue Ages 0-85, based on Age Nearest Birthday (ANB)
- * Minimum face amount: \$5,000

Premiums Banded for quantity discounts	Band 1	Band 2	Band 3
	\$5,000-\$24,999	\$25,000-\$99,999	\$100,000 +
	T & NT	T, NT, & P	T, NT, & P

- * Accrues cash and loan values
- * Non-Forfeiture values
- * Dividends are not guaranteed.
- * No policy fee
- * Matures at age 121
- * Youth ages 0-17 are only Male or Female non-tobacco rates (aggregate)
- * Dividend Options are:
 - Paid up additions
 - Accumulate Interest
 - Dividends in Cash
 - Reduced Premium

- * Riders Available:
 - Accidental Death--issue ages 0-64
 - Disability Waiver of Premium--issue ages 0-55
 - Payor Waiver of Premium--Insured age 0-17 Payer's age 20-59
 - 10 Year Term Rider - \$50 policy fee waived
 - 20 Year Term Rider - \$50 policy fee waived

20 Pay Life - Female

Annual Premium - Per Thousand

*Payor Waiver of Premium Factors (by age of Payor)
(To be multiplied by the base policy premium)

Age	Non-Tobacco			Preferred			Tobacco			Available Riders	
	\$5,000 - \$24,999	\$25,000 - \$99,999	\$100,000 & over	\$25,000 - \$99,999	\$100,000 & over	\$5,000 - \$24,999	\$25,000 - \$99,999	\$100,000 & over	WP	ADB	*PWP
	FN	FN	FN	FP	FP	FT	FT	FT	FT	T	
0	14.66	8.33	7.15	8.33	7.15	14.66	8.33	7.15	0.69		1.64
1	14.83	8.52	7.33	8.52	7.33	14.83	8.52	7.33	0.69		1.62
2	15.02	8.72	7.54	8.72	7.54	15.02	8.72	7.54	0.69		1.60
3	15.22	8.93	7.75	8.93	7.75	15.22	8.93	7.75	0.70		1.60
4	15.44	9.15	7.97	9.15	7.97	15.44	9.15	7.97	0.70		1.60
5	15.66	9.38	8.20	9.38	8.20	15.66	9.38	8.20	0.71		1.60
6	15.90	9.62	8.44	9.62	8.44	15.90	9.62	8.44	0.71		1.62
7	16.14	9.87	8.68	9.87	8.68	16.14	9.87	8.68	0.71		1.64
8	16.39	10.12	8.93	10.12	8.93	16.39	10.12	8.93	0.73		1.64
9	16.65	10.38	9.19	10.38	9.19	16.65	10.38	9.19	0.74		1.66
10	16.92	10.65	9.47	10.65	9.47	16.92	10.65	9.47	0.74		1.68
11	17.20	10.94	9.75	10.94	9.75	17.20	10.94	9.75	0.74		1.70
12	17.49	11.22	10.03	11.22	10.03	17.49	11.22	10.03	0.75		1.72
13	17.78	11.52	10.33	11.52	10.33	17.78	11.52	10.33	0.75		1.74
14	18.10	11.83	10.64	11.83	10.64	18.10	11.83	10.64	0.76		1.74
15	18.42	12.15	10.95	12.15	10.95	18.42	12.15	10.95	0.77		1.76
16	18.75	12.48	11.28	12.48	11.28	18.75	12.48	11.28	0.88		1.74
17	19.09	12.81	11.61	12.81	11.61	19.09	12.81	11.61	0.91		1.72
18	18.55	12.32	11.11	12.26	11.05	21.14	14.89	13.69	0.88	0.93	1.68
19	18.84	12.62	11.41	12.55	11.34	21.53	15.29	14.08	0.88	0.96	1.64

20 Pay Life - Female

Annual Premium - Per Thousand

*Payor Waiver of Premium Factors (by age of Payor)
(To be multiplied by the base policy premium)

Age	Non-Tobacco				Preferred				Tobacco				Available Riders					
	\$5,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		\$25,000 - \$99,999		\$5,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		WP		ADB	*PWP
	FN	FN	FN	FN	FP	FP	FP	FP	FT	FT	FT	FT	FT	FT	FT	T		
20	19.12	12.90	11.69	11.64	12.84	11.64	11.64	11.64	21.92	15.68	15.68	15.68	15.68	14.48	0.88	0.99	1.60	1.55%
21	19.40	13.20	12.00	11.95	13.15	11.95	11.95	11.95	22.32	16.09	16.09	16.09	16.09	14.89	0.88	1.00	1.54	1.65%
22	19.71	13.52	12.32	12.27	13.47	12.27	12.27	12.27	22.75	16.52	16.52	16.52	16.52	15.32	0.88	1.02	1.50	1.70%
23	20.03	13.85	12.65	12.60	13.80	12.60	12.60	12.60	23.21	16.98	16.98	16.98	16.98	15.77	0.88	1.02	1.46	1.90%
24	20.36	14.19	12.99	12.94	14.14	12.94	12.94	12.94	23.67	17.44	17.44	17.44	17.44	16.22	0.90	1.05	1.42	2.20%
25	20.71	14.54	13.34	13.30	14.50	13.30	13.30	13.30	24.15	17.91	17.91	17.91	17.91	16.70	0.91	1.07	1.40	2.40%
26	21.07	14.91	13.71	13.67	14.86	13.67	13.67	13.67	24.65	18.40	18.40	18.40	18.40	17.18	0.92	1.09	1.38	2.55%
27	21.46	15.30	14.10	14.05	15.25	14.05	14.05	14.05	25.16	18.91	18.91	18.91	18.91	17.69	0.92	1.09	1.38	2.70%
28	21.85	15.70	14.49	14.45	15.65	14.45	14.45	14.45	25.69	19.43	19.43	19.43	19.43	18.20	0.93	1.10	1.36	2.80%
29	22.26	16.11	14.91	14.85	16.06	14.85	14.85	14.85	26.24	19.96	19.96	19.96	19.96	18.72	0.94	1.11	1.36	2.90%
30	22.69	16.54	15.33	15.27	16.48	15.27	15.27	15.27	26.80	20.50	20.50	20.50	20.50	19.26	0.95	1.13	1.36	3.25%
31	23.13	16.98	15.77	15.71	16.91	15.71	15.71	15.71	27.37	21.06	21.06	21.06	21.06	19.81	0.97	1.16	1.34	3.40%
32	23.58	17.43	16.22	16.15	17.36	16.15	16.15	16.15	27.96	21.63	21.63	21.63	21.63	20.38	0.99	1.19	1.34	3.65%
33	24.05	17.90	16.68	16.62	17.83	16.62	16.62	16.62	28.56	22.21	22.21	22.21	22.21	20.96	1.00	1.20	1.34	4.00%
34	24.54	18.38	17.16	17.09	18.31	17.09	17.09	17.09	29.18	22.81	22.81	22.81	22.81	21.55	1.02	1.23	1.34	4.25%
35	25.05	18.88	17.67	17.59	18.80	17.59	17.59	17.59	29.83	23.43	23.43	23.43	23.43	22.16	1.05	1.26	1.32	4.50%
36	25.57	19.41	18.18	18.10	19.32	18.10	18.10	18.10	30.49	24.07	24.07	24.07	24.07	22.79	1.08	1.30	1.32	4.60%
37	26.12	19.95	18.72	18.63	19.85	18.63	18.63	18.63	31.19	24.73	24.73	24.73	24.73	23.44	1.10	1.33	1.32	4.80%
38	26.67	20.50	19.27	19.17	20.39	19.17	19.17	19.17	31.90	25.41	25.41	25.41	25.41	24.11	1.11	1.35	1.32	4.90%
39	27.25	21.07	19.83	19.73	20.96	19.73	19.73	19.73	32.65	26.12	26.12	26.12	26.12	24.81	1.15	1.39	1.30	5.15%

20 Pay Life - Female

Annual Premium - Per Thousand

*Payor Waiver of Premium Factors (by age of Payor)
(To be multiplied by the base policy premium)

Age	Non-Tobacco						Preferred						Tobacco					
	\$5,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		\$25,000 - \$99,999		\$100,000 & over		\$5,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over			
	FN	FN	FN	FN	FP	FP	FN	FN	FN	FP	FP	FT	FT	FT	FT	FT	FT	
40	27.84	21.66	21.66	20.41	21.53	20.30	20.41	21.53	20.30	33.42	26.85	26.85	25.52	25.52	1.17	1.43	1.30	5.35%
41	28.45	22.27	22.27	21.02	22.13	20.89	21.02	22.13	20.89	34.21	27.60	27.60	26.25	26.25	1.25	1.52	1.30	5.55%
42	29.08	22.89	22.89	21.64	22.75	21.51	21.64	22.75	21.51	35.02	28.36	28.36	27.00	27.00	1.32	1.61	1.30	5.50%
43	29.73	23.53	23.53	22.27	23.38	22.13	22.27	23.38	22.13	35.86	29.15	29.15	27.77	27.77	1.39	1.70	1.28	6.10%
44	30.41	24.19	24.19	22.93	24.03	22.77	22.93	24.03	22.77	36.73	29.96	29.96	28.57	28.57	1.48	1.81	1.28	6.20%
45	31.10	24.87	24.87	23.60	24.70	23.44	23.60	24.70	23.44	37.63	30.80	30.80	29.38	29.38	1.58	1.93	1.28	6.35%
46	31.81	25.57	25.57	24.28	25.37	24.11	24.28	25.37	24.11	38.56	31.65	31.65	30.21	30.21	1.68	2.06	1.26	6.70%
47	32.55	26.28	26.28	24.99	26.07	24.80	24.99	26.07	24.80	39.52	32.53	32.53	31.07	31.07	1.78	2.19	1.24	7.10%
48	33.31	27.02	27.02	25.72	26.80	25.52	25.72	26.80	25.52	40.52	33.44	33.44	31.95	31.95	1.90	2.34	1.24	7.50%
49	34.09	27.79	27.79	26.47	27.54	26.25	26.47	27.54	26.25	41.56	34.38	34.38	32.85	32.85	2.02	2.50	1.22	7.75%
50	34.91	28.57	28.57	27.24	28.30	26.99	27.24	28.30	26.99	42.63	35.34	35.34	33.77	33.77	2.18	2.71	1.22	7.75%
51	35.73	29.37	29.37	28.03	29.07	27.75	28.03	29.07	27.75	43.75	36.33	36.33	34.73	34.73	2.38	2.97	1.24	7.75%
52	36.57	30.17	30.17	28.82	29.86	28.53	28.82	29.86	28.53	44.93	37.38	37.38	35.73	35.73	2.59	3.24	1.26	7.75%
53	37.43	31.00	31.00	29.63	30.66	29.32	29.63	30.66	29.32	46.17	38.46	38.46	36.76	36.76	2.82	3.54	1.28	7.75%
54	38.32	31.86	31.86	30.47	31.49	30.14	30.47	31.49	30.14	47.48	39.59	39.59	37.83	37.83	3.08	3.89	1.32	7.75%
55	39.24	32.74	32.74	31.34	32.35	30.98	31.34	32.35	30.98	48.85	40.76	40.76	38.94	38.94	3.36	4.26	1.34	7.75%
56	40.20	33.66	33.66	32.24	33.24	31.86	32.24	33.24	31.86	50.28	41.98	41.98	40.09	40.09	-	-	-	7.75%
57	41.18	34.60	34.60	33.16	34.15	32.75	33.16	34.15	32.75	51.78	43.24	43.24	41.28	41.28	-	-	-	7.75%
58	42.21	35.57	35.57	34.11	35.10	33.68	34.11	35.10	33.68	53.34	44.55	44.55	42.51	42.51	-	-	-	7.75%
59	43.29	36.60	36.60	35.11	36.08	34.64	35.11	36.08	34.64	55.00	45.92	45.92	43.79	43.79	-	-	-	7.75%

20 Pay Life - Female

Annual Premium - Per Thousand

*Payor Waiver of Premium Factors (by age of Payor)
(To be multiplied by the base policy premium)

Age	Non-Tobacco				Preferred				Tobacco				Available Riders			
	\$5,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		\$5,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		WP		ADB	*PWP
	FN	FN	FN	FN	FP	FP	FP	FT	FT	FT	FT	FT	FT	T		
60	44.42	37.65	36.14	35.63	37.10	35.63	56.75	47.37	45.14	-	-	-	-	-	1.54	-
61	45.60	38.76	37.21	36.67	38.16	36.67	58.59	48.88	46.55	-	-	-	-	-	1.58	-
62	46.85	39.91	38.33	37.74	39.27	37.74	60.60	50.53	48.09	-	-	-	-	-	1.62	-
63	48.22	41.17	39.54	38.88	40.46	38.88	62.77	52.30	49.74	-	-	-	-	-	1.66	-
64	49.67	42.49	40.80	40.09	41.71	40.09	65.05	54.16	51.46	-	-	-	-	-	1.72	-
65	51.20	43.87	42.13	41.34	43.01	41.34	67.48	56.13	53.29	-	-	-	-	-	1.76	-
66	52.78	45.30	43.49	42.63	44.36	42.63	70.08	58.26	55.24	-	-	-	-	-	1.82	-
67	54.43	46.78	44.90	43.97	45.76	43.97	72.96	60.65	57.41	-	-	-	-	-	1.86	-
68	56.27	48.40	46.44	45.43	47.30	45.43	76.12	63.26	59.76	-	-	-	-	-	1.92	-
69	58.33	50.21	48.14	47.04	49.00	47.04	79.57	66.10	62.31	-	-	-	-	-	1.96	-
70	60.64	52.23	50.06	48.87	50.93	48.87	83.44	69.27	65.20	-	-	-	-	-	-	-
71	63.07	54.33	52.05	50.77	52.93	50.77	87.56	72.64	68.30	-	-	-	-	-	-	-
72	65.60	56.52	54.11	52.74	55.02	52.74	91.95	76.23	71.61	-	-	-	-	-	-	-
73	68.38	58.89	56.33	54.87	57.28	54.87	96.54	80.00	75.07	-	-	-	-	-	-	-
74	71.31	61.40	58.66	57.10	59.70	57.10	101.44	84.01	78.75	-	-	-	-	-	-	-
75	74.46	64.13	61.11	59.49	62.36	59.49	107.07	88.59	82.94	-	-	-	-	-	-	-
76	78.01	67.24	63.88	62.11	65.31	62.11	113.42	93.72	87.62	-	-	-	-	-	-	-
77	81.92	70.63	66.98	65.10	68.57	65.10	120.37	99.32	92.71	-	-	-	-	-	-	-
78	86.17	74.31	70.39	68.38	72.10	68.38	127.93	105.37	98.18	-	-	-	-	-	-	-
79	91.00	78.40	74.19	72.10	76.10	72.10	136.07	111.83	104.03	-	-	-	-	-	-	-

20 Pay Life - Female

Annual Premium - Per Thousand

*Payor Waiver of Premium Factors (by age of Payor)
(To be multiplied by the base policy premium)

Age	Non-Tobacco			Preferred			Tobacco		
	\$5,000 - \$24,999	\$25,000 - \$99,999	\$100,000 & over	\$25,000 - \$99,999	\$100,000 & over	\$5,000 - \$24,999	\$25,000 - \$99,999	\$100,000 & over	
	FN	FN	FN	FP	FP	FT	FT	FT	
80	96.27	82.91	78.39	80.48	76.17	144.93	118.84	110.36	
81	101.99	87.80	82.92	85.19	80.53	153.47	125.58	116.45	
82	108.93	93.61	88.30	90.89	85.80	162.62	132.81	122.97	
83	117.48	100.78	94.89	97.82	92.17	172.38	140.49	129.90	
84	127.73	109.38	102.74	106.07	99.72	183.38	149.14	137.68	
85	138.86	118.65	111.20	114.85	107.72	195.54	158.64	146.21	

Available Riders			
WP		ADB	*PWP
FT	T		
-	-	-	-
-	-	-	-
-	-	-	-
-	-	-	-
-	-	-	-
-	-	-	-

20 Pay Life - Male

Annual Premium - Per Thousand

- * Level Premium Plans for 20 years
- * Issue Ages 0-85, based on Age Nearest Birthday (ANB)
- * Minimum face amount: \$5,000

Premiums Banded for quantity discounts	Band 1	Band 2	Band 3
	\$5,000-\$24,999	\$25,000-\$99,999	\$100,000 +
	T & NT	T, NT, & P	T, NT, & P

- * Accrues cash and loan values
- * Non-Forfeiture values
- * Dividends are not guaranteed.
- * No policy fee
- * Matures at age 121
- * Youth ages 0-17 are only Male or Female non-tobacco rates (aggregate)

Dividend Options are:

- Paid up additions
- Accumulate Interest
- Dividends in Cash
- Reduced Premium

Riders Available:

- Accidental Death--issue ages 0-64
- Disability Waiver of Premium--issue ages 0-55
- Payor Waiver of Premium--Insured age 0-17 Payor's age 20-59
- 10 Year Term Rider - \$50 policy fee waived
- 20 Year Term Rider - \$50 policy fee waived

20 Pay Life - Male

Annual Premium - Per Thousand

*Payor Waiver of Premium Factors (by age of Payor)
(To be multiplied by the base policy premium)

Age	Non-Tobacco			Preferred			Tobacco			Available Riders		
	\$5,000 - \$24,999	\$25,000 - \$99,999	\$100,000 & over	\$25,000 - \$99,999	\$100,000 & over	\$5,000 - \$24,999	\$25,000 - \$99,999	\$100,000 & over	WP	ADB	*PWP	
	MIN	MIN	MIN	MP	MP	MT	MT	MT	MT	T		
0	15.57	9.25	8.06	9.25	8.06	15.57	9.25	8.06	0.73	1.64	-	
1	15.77	9.46	8.28	9.46	8.28	15.77	9.46	8.28	0.73	1.62	-	
2	16.00	9.70	8.51	9.70	8.51	16.00	9.70	8.51	0.74	1.60	-	
3	16.24	9.94	8.76	9.94	8.76	16.24	9.94	8.76	0.74	1.60	-	
4	16.49	10.20	9.01	10.20	9.01	16.49	10.20	9.01	0.75	1.60	-	
5	16.76	10.46	9.27	10.46	9.27	16.76	10.46	9.27	0.76	1.60	-	
6	17.03	10.73	9.54	10.73	9.54	17.03	10.73	9.54	0.76	1.62	-	
7	17.32	11.01	9.82	11.01	9.82	17.32	11.01	9.82	0.76	1.64	-	
8	17.61	11.31	10.11	11.31	10.11	17.61	11.31	10.11	0.78	1.64	-	
9	17.92	11.61	10.40	11.61	10.40	17.92	11.61	10.40	0.80	1.66	-	
10	18.24	11.92	10.71	11.92	10.71	18.24	11.92	10.71	0.80	1.68	-	
11	18.57	12.24	11.02	12.24	11.02	18.57	12.24	11.02	0.80	1.70	-	
12	18.91	12.57	11.35	12.57	11.35	18.91	12.57	11.35	0.81	1.72	-	
13	19.27	12.91	11.68	12.91	11.68	19.27	12.91	11.68	0.81	1.74	-	
14	19.65	13.26	12.02	13.26	12.02	19.65	13.26	12.02	0.82	1.74	-	
15	20.03	13.62	12.38	13.62	12.38	20.03	13.62	12.38	0.84	1.76	-	
16	20.43	13.99	12.74	13.99	12.74	20.43	13.99	12.74	0.96	1.74	-	
17	20.82	14.37	13.11	14.37	13.11	20.82	14.37	13.11	0.99	1.72	-	
18	20.13	13.76	12.50	13.66	12.40	22.82	16.39	15.12	0.96	1.01	1.68	
19	20.35	14.01	12.75	13.92	12.67	23.14	16.73	15.47	0.96	1.03	1.64	
20	20.59	14.27	13.03	14.20	12.95	23.50	17.11	15.85	0.96	1.06	1.60	
											1.55%	

20 Pay Life - Male

Annual Premium - Per Thousand

*Payor Waiver of Premium Factors (by age of Payor)
(To be multiplied by the base policy premium)

Age	Non-Tobacco			Preferred			Tobacco			Available Riders		
	\$5,000 - \$24,999	\$25,000 - \$99,999	\$100,000 & over	\$25,000 - \$99,999	\$100,000 & over	\$5,000 - \$24,999	\$25,000 - \$99,999	\$100,000 & over	WP	ADB	*PWP	
	MIN	MIN	MIN	MP	MP	MT	MT	MT	MT	T		
21	20.83	14.54	13.31	14.48	13.24	23.86	17.49	16.24	0.96	1.08	1.54	1.65%
22	21.10	14.84	13.61	14.78	13.55	24.25	17.90	16.65	0.96	1.09	1.50	1.70%
23	21.40	15.15	13.93	15.10	13.88	24.66	18.32	17.07	0.96	1.09	1.46	1.90%
24	21.72	15.49	14.28	15.45	14.23	25.11	18.77	17.53	0.97	1.12	1.42	2.20%
25	22.08	15.86	14.65	15.82	14.61	25.58	19.24	18.00	0.98	1.14	1.40	2.40%
26	22.47	16.27	15.05	16.22	15.01	26.08	19.74	18.50	0.99	1.16	1.38	2.55%
27	22.88	16.68	15.47	16.64	15.43	26.59	20.26	19.01	0.99	1.16	1.38	2.70%
28	23.31	17.12	15.90	17.07	15.86	27.13	20.79	19.54	1.00	1.17	1.36	2.80%
29	23.76	17.56	16.35	17.52	16.30	27.70	21.35	20.09	1.00	1.18	1.36	2.90%
30	24.19	18.00	16.79	17.95	16.74	28.29	21.92	20.65	1.01	1.20	1.36	3.25%
31	24.63	18.45	17.23	18.40	17.18	28.90	22.50	21.23	1.04	1.22	1.34	3.40%
32	25.11	18.92	17.71	18.87	17.65	29.51	23.10	21.82	1.06	1.26	1.34	3.65%
33	25.60	19.41	18.19	19.35	18.13	30.14	23.70	22.42	1.07	1.27	1.34	4.00%
34	26.11	19.92	18.69	19.85	18.63	30.77	24.32	23.02	1.09	1.30	1.34	4.25%
35	26.63	20.44	19.21	20.36	19.13	31.42	24.94	23.64	1.12	1.34	1.32	4.50%
36	27.18	20.98	19.75	20.89	19.66	32.09	25.58	24.28	1.15	1.38	1.32	4.60%
37	27.75	21.54	20.31	21.44	20.21	32.79	26.25	24.93	1.18	1.41	1.32	4.80%
38	28.35	22.13	20.89	22.02	20.78	33.52	26.94	25.61	1.19	1.42	1.32	4.90%
39	28.97	22.75	21.50	22.62	21.38	34.27	27.65	26.31	1.22	1.47	1.30	5.15%
40	29.62	23.39	22.14	23.24	22.00	35.07	28.40	27.04	1.25	1.51	1.30	5.35%
41	30.29	24.05	22.79	23.88	22.63	35.91	29.18	27.81	1.33	1.61	1.30	5.55%

20 Pay Life - Male

Annual Premium - Per Thousand

*Payor Waiver of Premium Factors (by age of Payor)
(To be multiplied by the base policy premium)

Age	Non-Tobacco				Preferred				Tobacco				Available Riders				
	\$5,000 - \$24,999		\$25,000 - \$99,999		\$25,000 - \$99,999		\$100,000 & over		\$5,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		WP	ADB	*PWP
	MIN	MIN	MIN	MIN	MP	MP	MP	MP	MT	MT	MT	MT	MT	MT	T		
42	30.97	24.72	23.45	23.28	24.53	23.28	23.28	23.28	36.80	30.00	30.00	30.00	28.61	1.41	1.70	1.30	5.50%
43	31.68	25.41	24.13	23.94	25.20	23.94	23.94	23.94	37.72	30.86	30.86	30.86	29.44	1.49	1.80	1.28	6.10%
44	32.41	26.12	24.83	24.61	25.89	24.61	24.61	24.61	38.69	31.75	31.75	31.75	30.30	1.58	1.92	1.28	6.20%
45	33.16	26.85	25.55	25.32	26.60	25.32	25.32	25.32	39.70	32.67	32.67	32.67	31.20	1.68	2.05	1.28	6.35%
46	33.93	27.61	26.29	26.03	27.32	26.03	26.03	26.03	40.76	33.63	33.63	33.63	32.12	1.80	2.20	1.26	6.70%
47	34.73	28.39	27.06	26.77	28.07	26.77	26.77	26.77	41.88	34.63	34.63	34.63	33.09	1.90	2.34	1.24	7.10%
48	35.56	29.19	27.85	27.52	28.84	27.52	27.52	27.52	43.05	35.67	35.67	35.67	34.09	2.03	2.50	1.24	7.50%
49	36.39	30.01	28.65	28.29	29.61	28.29	28.29	28.29	44.29	36.76	36.76	36.76	35.13	2.17	2.69	1.22	7.75%
50	37.25	30.83	29.46	29.06	30.40	29.06	29.06	29.06	45.62	37.92	37.92	37.92	36.23	2.34	2.91	1.22	7.75%
51	38.12	31.68	30.28	30.67	31.21	30.67	30.67	30.67	47.03	39.14	39.14	39.14	37.39	2.55	3.20	1.24	7.75%
52	39.02	32.55	31.13	32.42	32.04	32.42	32.42	32.42	48.54	40.43	40.43	40.43	38.60	2.78	3.52	1.26	7.75%
53	39.98	33.46	32.03	32.90	33.83	32.90	32.90	32.90	50.14	41.78	41.78	41.78	39.87	3.03	3.86	1.28	7.75%
54	41.00	34.44	32.98	33.83	34.77	33.83	33.83	33.83	51.82	43.18	43.18	43.18	41.19	3.31	4.26	1.32	7.75%
55	42.06	35.45	33.96	34.77	35.78	34.77	34.77	34.77	53.57	44.64	44.64	44.64	42.55	3.62	4.69	1.34	7.75%
56	43.19	36.52	35.00	36.07	36.82	36.07	36.07	36.07	55.42	46.16	46.16	46.16	43.96	-	-	1.38	7.75%
57	44.38	37.63	36.07	37.01	37.91	37.01	37.01	37.01	57.35	47.74	47.74	47.74	45.44	-	-	1.42	7.75%
58	45.64	38.81	37.20	38.34	39.01	38.34	38.34	38.34	59.38	49.39	49.39	49.39	46.96	-	-	1.46	7.75%
59	46.91	39.99	38.34	39.01	40.13	39.01	39.01	39.01	61.46	51.07	51.07	51.07	48.52	-	-	1.50	7.75%
60	48.21	41.20	39.50	40.13	41.24	40.13	40.13	40.13	63.69	52.87	52.87	52.87	50.18	-	-	1.54	-
61	49.50	42.38	40.64	41.24	42.37	41.24	41.24	41.24	65.96	54.69	54.69	54.69	51.86	-	-	1.58	-
62	50.81	43.59	41.79	42.37	44.69	42.37	42.37	42.37	67.94	56.29	56.29	56.29	53.35	-	-	1.62	-

20 Pay Life - Male

Annual Premium - Per Thousand

*Payor Waiver of Premium Factors (by age of Payor)
 (To be multiplied by the base policy premium)

Age	Non-Tobacco			Preferred			Tobacco						
	\$5,000 - \$24,999	\$25,000 - \$99,999	\$100,000 & over	\$25,000 - \$99,999	\$100,000 & over	\$5,000 - \$24,999	\$25,000 - \$99,999	\$100,000 & over	MT	MP	MP	MT	MT
	MIN	MIN	MIN	MP	MP	MT	MP	MP	MT	MP	MP	MT	MT
84	146.97	124.30	116.44	121.15	113.52	194.38	157.45	144.83	-	-	-	-	-
85	161.78	136.14	127.12	132.36	123.63	208.09	168.09	154.31	-	-	-	-	-

Available Riders			
WP	AAB		*PWP
	MT	T	
-	-	-	-
-	-	-	-

SPWL - Female

Annual Premium - Per Thousand

- * Pay One Time
- * Issue Ages 0-90, based on Age Nearest Birthday (ANB)
- * Minimum face amount: \$5,000
- * Matures at age 121
- * Youth ages 0-17 are only Male or Female non-tobacco rates (aggregate)

	Band 1	Band 2	Band 3
Premiums Banded for quantity discounts	\$5,000-\$24,999	\$25,000-\$99,999	\$100,000 +
	T & NT	T, NT, & P	T, NT, & P

- * Accrues cash and loan values
- * Non-Forfeiture values
- * Dividends are not guaranteed.
- * No policy fee
- * Dividend Options are:
 Paid up additions
 Accumulate Interest
 Dividends in Cash
- * Riders Available:
 None

SPWL -3 Pay

- * Same as above except Premium is split into 3 equal payments.
- * First payment is due at time of application.
- * Second and third payments are due on the first and second anniversary dates respectively.
- * Promissory Loan signed by Applicant is required at time of application.
- * The is an 8% charge on payments that are more than 30 days past due.
- * Death Benefit is face amount of certificate less unpaid premiums

SPWL - Female

Annual Premium - Per Thousand

Age	Non-Tobacco			Preferred			Tobacco		
	\$5,000 - \$24,999			\$25,000 - \$99,999			\$100,000 & over		
	FN	FN	FN	FP	FP	FP	FT	FT	FT
0	106.87	101.21	93.98	101.21	93.98	101.21	106.87	101.21	93.98
1	109.70	103.80	96.60	103.80	96.60	103.80	109.70	103.80	96.60
2	112.60	106.57	99.37	106.57	99.37	106.57	112.60	106.57	99.37
3	115.58	109.47	102.26	109.47	102.26	109.47	115.58	109.47	102.26
4	118.64	112.47	105.25	112.47	105.25	112.47	118.64	112.47	105.25
5	121.77	115.57	108.34	115.57	108.34	115.57	121.77	115.57	108.34
6	125.17	118.76	111.52	118.76	111.52	118.76	125.17	118.76	111.52
7	128.64	122.04	114.79	122.04	114.79	122.04	128.64	122.04	114.79
8	132.22	125.43	118.17	125.43	118.17	125.43	132.22	125.43	118.17
9	135.89	128.92	121.64	128.92	121.64	128.92	135.89	128.92	121.64
10	139.68	132.52	125.23	132.52	125.23	132.52	139.68	132.52	125.23
11	143.67	136.22	128.92	136.22	128.92	136.22	143.67	136.22	128.92
12	147.78	140.03	132.71	140.03	132.71	140.03	147.78	140.03	132.71
13	152.01	143.97	136.63	143.97	136.63	143.97	152.01	143.97	136.63
14	156.37	148.03	140.67	148.03	140.67	148.03	156.37	148.03	140.67
15	160.83	152.20	144.80	152.20	144.80	152.20	160.83	152.20	144.80
16	163.31	156.44	149.01	156.44	149.01	156.44	163.31	156.44	149.01
17	165.81	160.76	153.30	160.76	153.30	160.76	165.81	160.76	153.30
18	168.30	164.28	146.78	164.28	150.00	164.28	168.30	160.76	153.30
19	170.86	158.24	150.72	157.49	146.05	157.49	170.86	160.76	153.30
20	173.46	162.19	154.68	161.48	153.98	161.48	173.46	160.76	153.30
21	184.24	166.33	158.81	165.60	158.11	165.60	184.24	160.76	153.30
22	194.78	170.63	163.10	169.91	162.41	169.91	194.78	160.76	153.30
23	205.12	175.10	167.55	174.36	166.85	174.36	205.12	160.76	153.30
24	215.21	179.72	172.16	178.98	171.46	178.98	215.21	160.76	153.30

SPWL - Female

Annual Premium - Per Thousand

	Non-Tobacco			Preferred			Tobacco		
	\$5,000 - \$24,999	\$25,000 - \$99,999	\$100,000 & over	\$25,000 - \$99,999	\$100,000 & over	\$5,000 - \$24,999	\$25,000 - \$99,999	\$100,000 & over	
25	225.67	184.54	176.96	183.78	176.25	268.18	227.94	219.99	
26	230.53	189.56	181.96	188.79	181.24	274.41	234.25	226.25	
27	235.61	194.78	187.16	193.97	186.40	280.87	240.76	232.70	
28	240.84	200.16	192.51	199.32	191.73	287.47	247.41	239.29	
29	246.23	205.71	198.02	204.82	197.20	294.23	254.20	246.02	
30	251.82	211.43	203.71	210.51	202.86	301.19	261.18	252.94	
31	257.58	217.33	209.57	216.35	208.66	308.32	268.32	260.01	
32	263.55	223.39	215.59	222.37	214.65	315.66	275.65	267.27	
33	269.68	229.67	221.82	228.58	220.82	323.18	283.15	274.69	
34	276.00	236.08	228.19	234.94	227.14	330.91	290.84	282.30	
35	282.54	242.70	234.76	241.49	233.65	338.85	298.72	290.10	
36	289.22	249.48	241.49	248.21	240.32	347.02	306.82	298.11	
37	296.11	256.43	248.39	255.09	247.16	355.42	315.14	306.32	
38	303.14	263.52	255.42	262.11	254.13	364.04	323.64	314.73	
39	310.34	270.76	262.61	269.29	261.26	372.86	332.33	323.31	
40	317.71	278.19	269.98	276.65	268.57	381.89	341.20	332.08	
41	325.32	285.84	277.57	284.21	276.08	391.09	350.25	341.02	
42	333.14	293.66	285.34	291.98	283.80	400.46	359.44	350.09	
43	341.21	301.74	293.35	299.98	291.73	410.04	368.80	359.35	
44	349.47	309.98	301.52	308.13	299.83	419.83	378.36	368.78	
45	358.01	318.49	309.95	316.55	308.17	429.84	388.11	378.41	
46	366.72	327.47	318.55	325.15	316.70	440.05	398.03	388.20	
47	375.73	336.10	327.40	333.99	325.47	450.45	408.12	398.15	
48	384.98	345.29	336.51	343.09	334.49	461.05	418.38	408.27	
49	394.44	354.66	345.78	352.35	343.67	471.79	428.76	418.50	
50	404.10	364.17	355.20	361.77	353.01	482.69	439.28	428.88	

SPWL - Female

Annual Premium - Per Thousand

	Non-Tobacco			Preferred			Tobacco		
	\$5,000 - \$24,999	\$25,000 - \$99,999	\$100,000 & over	\$25,000 - \$99,999	\$100,000 & over	\$5,000 - \$24,999	\$25,000 - \$99,999	\$100,000 & over	
	51	413.92	373.86	364.80	371.36	362.51	493.81	450.00	439.44
52	423.91	383.71	374.55	381.12	372.18	505.22	460.96	450.24	
53	434.17	393.80	384.55	391.13	382.10	516.82	472.10	461.21	
54	444.72	404.17	394.82	401.41	392.29	528.70	483.49	472.43	
55	455.52	414.79	405.34	411.94	402.72	540.73	495.01	483.77	
56	466.56	425.63	416.06	422.69	413.37	552.94	506.67	495.25	
57	477.73	436.56	426.89	433.54	424.12	565.18	518.38	506.76	
58	489.15	447.71	437.93	444.61	435.07	577.53	530.15	518.35	
59	500.85	459.16	449.26	455.95	446.30	590.06	542.09	530.10	
60	512.77	470.77	460.74	467.48	457.70	602.70	554.12	541.94	
61	524.98	482.62	472.49	479.26	469.35	615.43	566.23	553.86	
62	537.44	494.74	484.46	491.27	481.23	628.17	578.34	565.78	
63	550.33	507.24	496.80	503.65	493.44	640.97	590.49	577.74	
64	563.44	519.94	509.33	516.23	505.87	653.60	602.48	589.55	
65	576.63	532.70	521.94	528.87	518.35	666.25	614.49	601.35	
66	589.94	545.56	534.65	541.64	530.98	678.93	626.53	613.21	
67	603.19	558.40	547.30	554.35	543.55	692.04	638.96	625.49	
68	616.91	571.62	560.36	567.49	556.53	705.27	651.84	637.88	
69	631.14	585.29	573.90	581.11	569.99	718.50	665.61	650.28	
70	645.51	599.10	587.54	594.88	583.59	732.00	679.67	662.95	
71	659.54	612.95	600.86	608.32	596.87	745.21	693.47	675.31	
72	673.20	627.09	613.82	621.37	609.81	758.10	707.00	687.40	
73	687.04	641.41	626.93	634.68	622.94	770.66	720.24	699.13	
74	700.48	655.37	639.63	648.60	635.67	782.96	733.25	711.41	
75	713.79	669.18	652.17	662.64	648.28	795.68	746.69	724.86	
76	727.49	683.53	665.10	676.99	661.20	808.61	760.35	738.52	

SPWL - Female

Annual Premium - Per Thousand

	Non-Tobacco				Preferred		Tobacco		
	\$5,000 - \$24,999	\$25,000 - \$99,999	\$100,000 & over	\$25,000 - \$99,999	\$100,000 & over	\$5,000 - \$24,999	\$25,000 - \$99,999	\$100,000 & over	
	77	734.86	691.77	673.28	685.48	669.04	814.04	766.83	745.16
78	742.23	700.01	681.46	693.97	676.88	819.47	773.31	751.80	
79	749.60	708.25	689.64	702.46	684.72	824.90	779.79	758.44	
80	756.95	716.49	697.81	710.93	692.56	830.31	786.25	765.07	
81	769.98	730.18	711.56	724.72	706.39	840.99	797.65	776.42	
82	783.99	744.72	726.12	739.55	721.24	851.54	808.95	787.66	
83	799.13	760.46	741.79	755.47	737.10	861.82	819.95	798.58	
84	815.05	777.02	758.22	772.15	753.66	872.33	831.19	809.69	
85	830.22	792.94	774.04	787.93	769.36	882.88	842.44	820.76	
86	837.05	800.90	782.05	796.08	777.65	883.64	844.23	822.56	
87	853.17	817.53	798.62	813.27	794.77	894.47	855.72	833.76	
88	869.60	834.48	815.48	830.80	812.22	906.63	868.52	846.19	
89	884.21	849.77	830.72	846.36	827.74	918.40	880.87	858.08	
90	899.34	865.50	846.37	862.60	843.91	930.22	893.22	869.92	

SPWL - Male

- * Pay One Time
- * Issue Ages 0-90, based on Age Nearest Birthday (ANB)
- * Minimum face amount: \$5,000
- * Matures at age 121
- * Youth ages 0-17 are only Male or Female non-tobacco rates (aggregate)

Premiums Banded for quantity discounts	Band 1	Band 2	Band 3
	\$5,000-\$24,999	\$25,000-\$99,999	\$100,000 +
	T & NT	T, NT, & P	T, NT, & P

- * Accrues cash and loan values
- * Non-Forfeiture values
- * Dividends are not guaranteed.
- * No policy fee
- * Dividend Options are:
 - Paid up additions
 - Accumulate Interest
 - Dividends in Cash
- * Riders Available:
 - None

SPWL -3 Pay

- * Same as above except Premium is split into 3 equal payments.
- * First payment is due at time of application.
- * Second and third payments are due on the first and second anniversary dates respectively.
- * Promissory Loan signed by Applicant is required at time of application.
- * There is an 8% charge on payments that are more than 30 days past due.
- * Death Benefit is face amount of certificate less unpaid premiums

SPWL - Male

Annual Premium - Per Thousand

Age	Non-Tobacco						Preferred			Tobacco						
	\$5,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		\$25,000 - \$99,999		\$100,000 & over		\$5,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over	
	MN	MN	MN	MN	MN	MN	MP	MP	MP	MP	MP	MP	MT	MT	MT	MT
0	119.19	113.22	113.22	105.91	105.91	113.22	113.22	105.91	119.19	113.22	105.91	113.22	113.22	105.91	113.22	105.91
1	122.41	116.18	116.18	108.88	108.88	116.18	116.18	108.88	122.41	116.18	108.88	116.18	116.18	108.88	116.18	108.88
2	125.71	119.32	119.32	112.01	112.01	119.32	119.32	112.01	125.71	119.32	112.01	119.32	119.32	112.01	119.32	112.01
3	129.12	122.56	122.56	115.24	115.24	122.56	122.56	115.24	129.12	122.56	115.24	122.56	122.56	115.24	122.56	115.24
4	132.60	125.92	125.92	118.59	118.59	125.92	125.92	118.59	132.60	125.92	118.59	125.92	125.92	118.59	125.92	118.59
5	136.19	129.39	129.39	122.04	122.04	129.39	129.39	122.04	136.19	129.39	122.04	129.39	129.39	122.04	129.39	122.04
6	140.04	132.96	132.96	125.59	125.59	132.96	132.96	125.59	140.04	132.96	125.59	132.96	132.96	125.59	132.96	125.59
7	144.02	136.65	136.65	129.26	129.26	136.65	136.65	129.26	144.02	136.65	129.26	136.65	136.65	129.26	136.65	129.26
8	148.09	140.45	140.45	133.03	133.03	140.45	140.45	133.03	148.09	140.45	133.03	140.45	140.45	133.03	140.45	133.03
9	152.27	144.36	144.36	136.92	136.92	144.36	144.36	136.92	152.27	144.36	136.92	144.36	144.36	136.92	144.36	136.92
10	156.58	148.38	148.38	140.91	140.91	148.38	148.38	140.91	156.58	148.38	140.91	148.38	148.38	140.91	148.38	140.91
11	161.10	152.52	152.52	145.03	145.03	152.52	152.52	145.03	161.10	152.52	145.03	152.52	152.52	145.03	152.52	145.03
12	165.74	156.79	156.79	149.26	149.26	156.79	156.79	149.26	165.74	156.79	149.26	156.79	156.79	149.26	156.79	149.26
13	170.51	161.16	161.16	153.59	153.59	161.16	161.16	153.59	170.51	161.16	153.59	161.16	161.16	153.59	161.16	153.59
14	175.43	165.64	165.64	158.02	158.02	165.64	165.64	158.02	175.43	165.64	158.02	165.64	165.64	158.02	165.64	158.02
15	180.49	170.21	170.21	162.53	162.53	170.21	170.21	162.53	180.49	170.21	162.53	170.21	170.21	162.53	170.21	162.53
16	182.88	174.85	174.85	167.10	167.10	174.85	174.85	167.10	182.88	174.85	167.10	174.85	174.85	167.10	174.85	167.10
17	185.30	179.53	179.53	171.70	171.70	179.53	179.53	171.70	185.30	179.53	171.70	179.53	179.53	171.70	179.53	171.70
18	187.70	172.13	172.13	164.35	164.35	172.13	172.13	164.35	187.70	172.13	164.35	172.13	172.13	164.35	172.13	164.35
19	190.17	175.83	175.83	168.06	168.06	175.83	175.83	168.06	190.17	175.83	168.06	175.83	175.83	168.06	175.83	168.06
20	192.66	179.72	179.72	171.96	171.96	179.72	179.72	171.96	192.66	179.72	171.96	179.72	179.72	171.96	179.72	171.96
21	203.05	183.66	183.66	175.92	175.92	183.66	183.66	175.92	203.05	183.66	175.92	183.66	183.66	175.92	183.66	175.92
22	213.22	187.84	187.84	180.10	180.10	187.84	187.84	180.10	213.22	187.84	180.10	187.84	187.84	180.10	187.84	180.10

Age	Non-Tobacco				Preferred			Tobacco						
	\$5,000 - \$24,999		\$25,000 - \$99,999		\$25,000 - \$99,999		\$100,000 & over		\$5,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over	
	MIN	MIN	MIN	MIN	MP	MP	MP	MP	MT	MT	MT	MT	MT	MT
23	223.17	192.25	184.51	183.82	191.54	183.82	264.42	233.02	224.86					
24	232.90	196.91	189.18	188.49	196.20	188.49	275.20	239.02	230.83					
25	242.90	201.87	194.13	193.44	201.15	193.44	285.69	245.22	236.99					
26	248.04	207.14	199.38	198.68	206.40	198.68	292.04	251.64	243.37					
27	253.43	212.68	204.89	204.16	211.90	204.16	298.58	258.24	249.92					
28	259.04	218.43	210.61	209.84	217.60	209.84	305.33	265.03	256.66					
29	264.89	224.37	216.51	215.70	223.49	215.70	312.36	272.05	263.63					
30	270.65	230.25	222.37	221.51	229.32	221.51	319.58	279.25	270.76					
31	276.61	236.33	228.42	227.52	235.35	227.52	327.00	286.64	278.08					
32	282.91	242.70	234.75	233.79	241.66	233.79	334.58	294.18	285.55					
33	289.35	249.25	241.26	240.23	248.13	240.23	342.34	301.89	293.18					
34	296.03	256.01	247.96	246.85	254.79	246.85	350.22	309.71	300.92					
35	302.88	262.93	254.83	253.64	261.62	253.64	358.30	317.71	308.84					
36	309.98	270.09	261.95	260.66	268.69	260.66	366.58	325.90	316.95					
37	317.30	277.48	269.28	267.89	275.97	267.89	375.13	334.33	325.29					
38	324.90	285.11	276.85	275.33	283.47	275.33	383.94	343.00	333.86					
39	332.74	293.01	284.67	283.04	291.22	283.04	393.01	351.91	342.66					
40	340.83	301.12	292.71	290.93	299.18	290.93	402.39	361.10	351.73					
41	349.11	309.42	300.93	299.00	307.32	299.00	412.08	370.56	361.06					
42	357.52	317.84	309.27	307.21	315.60	307.21	422.04	380.26	370.63					
43	366.16	326.44	317.78	315.57	324.03	315.57	432.23	390.17	380.40					
44	374.97	335.22	326.48	324.10	332.64	324.10	442.67	400.31	390.39					
45	384.02	344.23	335.40	332.88	341.50	332.88	453.33	410.63	400.57					

SPWL - Male

Annual Premium - Per Thousand

Age	Non-Tobacco			Preferred			Tobacco		
	\$5,000 - \$24,999	\$25,000 - \$99,999	\$100,000 & over	\$25,000 - \$99,999	\$100,000 & over	\$5,000 - \$24,999	\$25,000 - \$99,999	\$100,000 & over	
	MIN	MIN	MIN	MP	MP	MT	MT	MT	
46	393.30	353.44	344.51	350.53	341.83	464.23	421.18	410.95	
47	402.81	362.89	353.86	359.80	351.02	475.41	431.95	421.55	
48	412.55	372.55	363.41	369.27	360.40	486.84	442.95	432.37	
49	422.42	382.29	373.05	378.84	369.88	498.52	454.15	443.39	
50	432.44	392.16	382.82	388.54	379.49	510.51	465.64	454.66	
51	442.55	402.13	392.70	398.35	389.21	522.80	477.36	466.17	
52	452.93	412.33	402.79	408.39	399.16	535.31	489.27	477.85	
53	463.68	422.90	413.25	418.78	409.45	547.99	501.31	489.67	
54	474.96	433.97	424.20	429.66	420.21	560.77	513.44	501.55	
55	486.49	445.26	435.37	440.75	431.19	573.59	525.61	513.48	
56	498.40	456.96	446.90	452.22	442.52	586.52	537.84	525.47	
57	510.49	468.75	458.53	463.80	453.95	599.49	550.11	537.50	
58	522.90	480.87	470.46	475.69	465.68	612.46	562.37	549.52	
59	535.22	492.86	482.27	487.47	477.30	625.27	574.49	561.41	
60	547.69	504.99	494.22	499.43	489.10	637.90	586.44	573.13	
61	559.84	516.78	505.87	511.11	500.63	650.30	598.19	584.68	
62	572.00	528.55	517.52	522.82	512.23	661.12	608.48	594.83	
63	584.07	540.22	529.07	534.42	523.71	671.13	618.00	604.20	
64	596.40	552.10	540.83	546.30	535.47	681.85	628.19	614.24	
65	608.70	563.91	552.49	558.13	547.17	693.39	639.13	625.04	
66	621.66	576.28	564.78	570.56	559.47	704.96	650.29	635.84	
67	634.72	588.78	577.13	583.09	571.86	716.75	662.57	646.84	
68	648.18	601.90	589.82	595.99	584.60	729.08	675.42	658.36	

Age	Non-Tobacco						Preferred			Tobacco						
	\$5,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over		\$25,000 - \$99,999		\$100,000 & over		\$5,000 - \$24,999		\$25,000 - \$99,999		\$100,000 & over	
	MIN	MAX	MIN	MAX	MIN	MAX	MP	MT	MP	MT	MP	MT	MP	MT	MP	MT
69	662.21	616.16	603.00	609.42	597.85	741.44	688.33	669.89								
70	676.35	630.54	616.30	623.00	611.31	753.93	701.38	681.54								
71	689.81	644.27	629.00	636.04	624.17	766.24	714.28	692.97								
72	703.47	658.16	641.79	650.17	637.18	778.65	727.30	704.56								
73	718.10	673.11	655.46	665.57	651.09	790.15	739.43	716.45								
74	732.67	687.95	669.01	680.84	664.83	801.82	751.77	728.74								
75	747.25	702.84	683.10	696.25	678.60	812.79	763.48	740.43								
76	761.71	717.77	698.02	711.44	692.28	824.16	775.63	752.55								
77	766.82	723.74	704.30	717.87	698.93	828.41	780.95	758.02								
78	771.93	729.71	710.58	724.30	705.58	832.66	786.27	763.49								
79	777.04	735.68	716.86	730.73	712.23	836.91	791.59	768.96								
80	782.13	741.63	723.13	737.15	718.88	841.17	796.92	774.41								
81	794.07	754.10	735.67	749.85	731.64	852.06	808.52	785.90								
82	807.37	768.04	749.64	763.96	745.79	862.63	819.78	797.03								
83	822.60	783.91	765.44	779.90	761.66	873.28	831.08	808.12								
84	840.16	802.10	783.45	798.05	779.66	884.20	842.66	819.43								
85	855.75	818.26	799.42	814.01	795.45	895.38	854.47	830.90								
86	863.52	826.98	808.06	822.85	804.24	896.96	857.01	833.32								
87	880.08	844.17	824.94	840.26	821.38	909.01	869.62	845.46								
88	895.18	859.91	840.41	856.37	837.26	921.07	882.20	857.49								
89	907.88	873.22	853.47	869.80	850.49	932.46	894.01	868.71								
90	920.36	886.32	866.25	883.25	863.70	945.00	907.02	881.08								

10 YEAR TERM - Female

Annual Premium - Per Thousand

- * Death benefit only
- * Issue ages: 18-70 *Based on Age Nearest Birthday (ANB)*
- * Policy fee \$50.
- * Policy fee waived when issued as a rider.
- * Expires at age 95
- * Minimum face amount: \$25,000
- * Does not accrue cash value or loan value.

Premiums Banded for quantity discounts	Band 1	Band 2	Band 3
	\$25,000-\$99,999	\$100,000-\$249,999	\$250,000 +
T/NT	T/NT/P	T/NT/P	T/NT/P

- * After initial 10 year term, policy becomes Yearly Renewal Term.
- * This is term to age 95 with level premiums for 10 years and increasing premiums thereafter. This policy is convertible to whole life up to age 70. Except for conversion to a single premium whole life policy, we will allow a conversion credit to be applied toward the initial premium payment for the new contract.
- * Additional option available: At end of initial term, member has the option within 30 days to reapply for a new ten year term plan, assuming that there are no health changes and they are within the issue ages of this plan. A new policy would be issued at the new issue age and premium.
- * Riders available:
 - Waiver of Premium--Issue ages are 20-59
 - Accidental Death Benefit--Issue ages are 18-60

10YR Term - Female

Annual Premium - Per Thousand

Age	Non-Tobacco				Preferred				Tobacco				Available Riders					
	\$25,000 - \$99,999		\$100K - 250K +		\$100K - \$249K		250K +		\$25,000 - \$99,000		\$100K - \$249K		250K +					
	Simplified Issue	FN	FN	FN	FN	FP	FP	FP	FT	Simplified Issue	FT	FT	FT	FT	FP	FN	FT	ADB
18	0.97	0.69	0.53	0.53	0.65	0.47	0.47	0.63	1.11	0.82	0.63	0.63						1.04
19	0.97	0.69	0.53	0.53	0.65	0.47	0.47	0.63	1.11	0.82	0.63	0.63						1.02
20	0.97	0.69	0.53	0.53	0.65	0.47	0.47	0.63	1.11	0.82	0.63	0.63	0.26	0.26	0.26	0.50	0.50	0.98
21	0.97	0.69	0.53	0.53	0.65	0.47	0.47	0.63	1.12	0.83	0.63	0.63	0.27	0.27	0.27	0.52	0.52	0.96
22	0.97	0.69	0.53	0.53	0.65	0.47	0.47	0.63	1.12	0.83	0.63	0.63	0.28	0.28	0.28	0.54	0.54	0.94
23	0.97	0.69	0.53	0.53	0.65	0.47	0.47	0.63	1.13	0.83	0.63	0.63	0.29	0.29	0.29	0.56	0.56	0.94
24	0.97	0.69	0.53	0.53	0.65	0.47	0.47	0.63	1.13	0.83	0.63	0.63	0.30	0.30	0.30	0.58	0.58	0.92
25	0.97	0.69	0.53	0.53	0.65	0.47	0.47	0.63	1.13	0.83	0.63	0.63	0.31	0.31	0.31	0.61	0.61	0.92
26	0.97	0.69	0.53	0.53	0.65	0.47	0.47	0.67	1.16	0.87	0.67	0.67	0.33	0.33	0.33	0.64	0.64	0.90
27	0.98	0.69	0.53	0.53	0.65	0.47	0.47	0.67	1.19	0.90	0.71	0.71	0.34	0.34	0.34	0.66	0.66	0.90
28	0.99	0.69	0.53	0.53	0.65	0.47	0.47	0.67	1.22	0.93	0.74	0.74	0.36	0.36	0.36	0.69	0.69	0.92
29	1.00	0.69	0.53	0.53	0.65	0.47	0.47	0.67	1.25	0.97	0.78	0.78	0.37	0.37	0.37	0.72	0.72	0.92
30	1.00	0.69	0.53	0.53	0.65	0.47	0.47	0.67	1.27	1.00	0.82	0.82	0.39	0.39	0.39	0.75	0.75	0.92
31	1.03	0.72	0.56	0.56	0.67	0.49	0.49	0.67	1.35	1.07	0.88	0.88	0.40	0.40	0.40	0.79	0.79	0.94
32	1.06	0.74	0.59	0.59	0.69	0.51	0.51	0.69	1.42	1.14	0.94	0.94	0.42	0.42	0.42	0.82	0.82	0.94
33	1.08	0.77	0.63	0.63	0.71	0.53	0.53	0.71	1.50	1.21	1.00	1.00	0.44	0.44	0.44	0.86	0.86	0.96
34	1.11	0.80	0.66	0.66	0.73	0.55	0.55	0.73	1.59	1.29	1.06	1.06	0.46	0.46	0.46	0.89	0.89	0.96
35	1.13	0.82	0.69	0.69	0.75	0.57	0.57	0.75	1.67	1.37	1.13	1.13	0.48	0.48	0.48	0.93	0.93	0.98
36	1.17	0.86	0.73	0.73	0.78	0.60	0.60	0.78	1.78	1.46	1.22	1.22	0.50	0.50	0.50	0.97	0.97	0.98
37	1.20	0.89	0.77	0.77	0.80	0.62	0.62	0.80	1.88	1.56	1.31	1.31	0.52	0.52	0.52	1.01	1.01	1.00

10YR Term - Female

Annual Premium - Per Thousand

Age	Non-Tobacco				Preferred				Tobacco				Available Riders			
	Simplified Issue		Fully Underwritten		Simplified Issue		Fully Underwritten		Simplified Issue		Fully Underwritten		WP		ADB	
	FN	FN	FN	FN	FP	FP	FP	FP	FT	FT	FT	FT	FP	FN	FT	FT
38	1.23	0.93	0.81	0.83	0.64	0.64	0.64	2.00	1.66	1.41	1.41	1.41	0.54	0.54	1.06	1.06
39	1.27	0.97	0.85	0.86	0.67	0.67	0.67	2.12	1.76	1.52	1.52	1.52	0.57	0.57	1.10	1.02
40	1.30	1.00	0.89	0.88	0.69	0.69	0.69	2.24	1.87	1.63	1.63	1.63	0.59	0.59	1.15	1.04
41	1.37	1.07	0.96	0.93	0.74	0.74	0.74	2.39	2.02	1.78	1.78	1.78	0.61	0.61	1.20	1.04
42	1.43	1.14	1.02	0.98	0.79	0.79	0.79	2.55	2.18	1.94	1.94	1.94	0.64	0.64	1.25	1.06
43	1.50	1.21	1.10	1.03	0.84	0.84	0.84	2.72	2.35	2.12	2.12	2.12	0.67	0.67	1.30	1.08
44	1.57	1.29	1.17	1.08	0.89	0.89	0.89	2.90	2.54	2.31	2.31	2.31	0.70	0.70	1.36	1.10
45	1.64	1.37	1.25	1.13	0.94	0.94	0.94	3.09	2.73	2.51	2.51	2.51	0.73	0.73	1.41	1.12
46	1.76	1.48	1.36	1.21	1.02	1.02	1.02	3.37	2.99	2.76	2.76	2.76	0.76	0.76	1.47	1.14
47	1.88	1.60	1.48	1.28	1.10	1.10	1.10	3.67	3.28	3.04	3.04	3.04	0.79	0.79	1.53	1.16
48	2.00	1.73	1.61	1.36	1.19	1.19	1.19	3.99	3.59	3.33	3.33	3.33	0.82	0.82	1.59	1.18
49	2.14	1.87	1.75	1.45	1.29	1.29	1.29	4.34	3.92	3.66	3.66	3.66	0.85	0.85	1.65	1.20
50	2.28	2.01	1.90	1.53	1.39	1.39	1.39	4.72	4.29	4.02	4.02	4.02	0.89	0.89	1.72	1.22
51	2.46	2.19	2.08	1.66	1.51	1.51	1.51	5.20	4.75	4.45	4.45	4.45	0.92	0.92	1.78	1.24
52	2.65	2.38	2.26	1.79	1.64	1.64	1.64	5.72	5.25	4.92	4.92	4.92	0.96	0.96	1.85	1.26
53	2.85	2.59	2.47	1.93	1.79	1.79	1.79	6.29	5.81	5.45	5.45	5.45	1.00	1.00	1.92	1.28
54	3.07	2.81	2.69	2.09	1.94	1.94	1.94	6.91	6.42	6.03	6.03	6.03	1.04	1.04	1.99	1.32
55	3.30	3.05	2.93	2.25	2.10	2.10	2.10	7.60	7.10	6.66	6.66	6.66	1.08	1.08	2.06	1.34
56	3.55	3.30	3.17	2.44	2.28	2.28	2.28	8.41	7.88	7.40	7.40	7.40	1.12	1.12	2.14	1.38
57	3.82	3.57	3.42	2.63	2.46	2.46	2.46	9.30	8.75	8.21	8.21	8.21	1.16	1.16	2.22	1.42

10YR Term - Female

Annual Premium - Per Thousand

Age	Non-Tobacco				Preferred				Tobacco				Available Riders						
	\$25,000 - \$99,999		\$100K - \$249K		\$100K - \$249K		250K +		\$25,000 - \$99,000		\$100K - \$249K		250K +						
	Simplified Issue	FN	FN	FN	FN	FP	FP	FP	FT	FT	FT	FT	FT	FT	FP	FN	FT	ADB	
58	4.11	3.87	3.70	3.70	2.84	2.66	2.66	10.28	9.70	9.12	9.12	9.12	9.12	1.20	1.20	1.20	2.30	1.46	
59	4.42	4.18	3.99	3.99	3.07	2.87	2.87	11.37	10.77	10.12	10.12	10.12	10.12	1.24	1.24	1.24	2.38	1.50	
60	4.75	4.52	4.31	4.31	3.31	3.10	3.10	12.57	11.94	11.23	11.23	11.23	11.23	-	-	-	-	1.54	
61	5.21	4.99	4.76	4.76	3.65	3.41	3.41	13.93	13.22	12.41	12.41	12.41	12.41	-	-	-	-	-	
62	5.71	5.50	5.25	5.25	4.03	3.76	3.76	15.43	14.62	13.70	13.70	13.70	13.70	-	-	-	-	-	
63	6.26	6.07	5.79	5.79	4.44	4.13	4.13	17.09	16.18	15.14	15.14	15.14	15.14	-	-	-	-	-	
64	6.86	6.69	6.39	6.39	4.89	4.54	4.54	18.93	17.90	16.72	16.72	16.72	16.72	-	-	-	-	-	
65	7.52	7.37	7.04	7.04	5.39	4.99	4.99	20.97	19.80	18.46	18.46	18.46	18.46	-	-	-	-	-	
66	8.38	8.21	7.86	7.86	6.01	5.57	5.57	22.91	21.63	20.17	20.17	20.17	20.17	-	-	-	-	-	
67	9.33	9.14	8.77	8.77	6.70	6.21	6.21	25.01	23.61	22.03	22.03	22.03	22.03	-	-	-	-	-	
68	10.38	10.17	9.79	9.79	7.47	6.93	6.93	27.32	25.79	24.07	24.07	24.07	24.07	-	-	-	-	-	
69	11.56	11.32	10.93	10.93	8.33	7.73	7.73	29.83	28.16	26.29	26.29	26.29	26.29	-	-	-	-	-	
70	12.86	12.60	12.19	12.19	9.28	8.61	8.61	32.57	30.74	28.71	28.71	28.71	28.71	-	-	-	-	-	

10 YEAR TERM - Male**Annual Premium - Per Thousand**

- * Death benefit only
- * Issue ages: 18-70 *Based on Age Nearest Birthday (ANB)*
- * Policy fee \$50.
- * Policy fee waived when issued as a rider.
- * Expires at age 95
- * Minimum face amount: \$25,000
- * Does not accrue cash value or loan value.

	Band 1	Band 2	Band 3
Premiums Banded for quantity discounts	\$25,000-\$99,999	\$100,000-\$249,999	\$250,000 +
	T/NT	T/NT/P	T/NT/P

- * After initial 10 year term, policy becomes Yearly Renewal Term.
- * This is term to age 95 with level premiums for 10 years and increasing premiums thereafter. This policy is convertible to whole life up to age 70. Except for conversion to a single premium whole life policy, we will allow a conversion credit to be applied toward the initial premium payment for the new contract.
- * Additional option available: At end of initial term, member has the option within 30 days to reapply for a new ten year term plan, assuming that there are no health changes and they are within the issue ages of this plan. A new policy would be issued at the new issue age and premium.
- * Riders available:
 - Waiver of Premium--Issue ages are 20-59
 - Accidental Death Benefit--Issue ages are 18-60

10YR Term - Male

Annual Premium - Per Thousand

Age	Non-Tobacco				Preferred				Tobacco				Available Riders							
	\$25,000 - \$99,999		\$100K - \$249K		250K +		\$100K - \$249K		250K +		\$25,000 - \$99,000		\$100K - \$249K		250K +		Fully Underwritten			
	Simplified Issue		Fully Underwritten		Fully Underwritten		Fully Underwritten		Fully Underwritten		Simplified Issue		Fully Underwritten		Fully Underwritten		Fully Underwritten			
	MN	MN	MN	MN	MP	MP	MP	MP	MP	MP	MT	MT	MT	MT	MT	MT	MP	MN	MT	ADB
18	1.21	0.84	0.67	0.67	0.80	0.80	0.61	0.61	0.80	0.80	1.50	1.16	0.94	0.94	0.94	-	-	-	-	1.04
19	1.21	0.84	0.67	0.67	0.80	0.80	0.61	0.61	0.80	0.80	1.50	1.16	0.94	0.94	0.94	-	-	-	-	1.02
20	1.21	0.84	0.67	0.67	0.80	0.80	0.61	0.61	0.80	0.80	1.50	1.16	0.94	0.94	0.94	0.15	0.15	0.15	0.15	0.98
21	1.21	0.84	0.67	0.67	0.80	0.80	0.61	0.61	0.80	0.80	1.50	1.16	0.94	0.94	0.94	0.16	0.16	0.16	0.16	0.96
22	1.21	0.84	0.67	0.67	0.80	0.80	0.61	0.61	0.80	0.80	1.50	1.16	0.94	0.94	0.94	0.17	0.17	0.17	0.17	0.94
23	1.21	0.84	0.67	0.67	0.80	0.80	0.61	0.61	0.80	0.80	1.50	1.16	0.94	0.94	0.94	0.17	0.17	0.17	0.17	0.94
24	1.21	0.84	0.67	0.67	0.80	0.80	0.61	0.61	0.80	0.80	1.50	1.16	0.94	0.94	0.94	0.18	0.18	0.18	0.18	0.92
25	1.21	0.84	0.67	0.67	0.80	0.80	0.61	0.61	0.80	0.80	1.50	1.16	0.94	0.94	0.94	0.19	0.19	0.19	0.19	0.92
26	1.21	0.84	0.67	0.67	0.80	0.80	0.61	0.61	0.80	0.80	1.51	1.18	0.96	0.96	0.96	0.20	0.20	0.20	0.20	0.90
27	1.21	0.84	0.67	0.67	0.80	0.80	0.61	0.61	0.80	0.80	1.52	1.20	0.98	0.98	0.98	0.20	0.20	0.20	0.20	0.90
28	1.21	0.84	0.67	0.67	0.80	0.80	0.61	0.61	0.80	0.80	1.53	1.22	0.99	0.99	0.99	0.21	0.21	0.21	0.21	0.92
29	1.21	0.84	0.67	0.67	0.80	0.80	0.61	0.61	0.80	0.80	1.54	1.24	1.01	1.01	1.01	0.22	0.22	0.22	0.22	0.92
30	1.21	0.84	0.67	0.67	0.80	0.80	0.61	0.61	0.80	0.80	1.55	1.25	1.02	1.02	1.02	0.23	0.23	0.23	0.23	0.92
31	1.22	0.85	0.69	0.69	0.81	0.81	0.62	0.62	0.81	0.81	1.64	1.32	1.09	1.09	1.09	0.24	0.24	0.24	0.24	0.94
32	1.23	0.86	0.71	0.71	0.81	0.81	0.62	0.62	0.81	0.81	1.72	1.40	1.16	1.16	1.16	0.26	0.26	0.26	0.26	0.94
33	1.24	0.87	0.73	0.73	0.82	0.82	0.63	0.63	0.82	0.82	1.81	1.47	1.24	1.24	1.24	0.27	0.27	0.27	0.27	0.96
34	1.25	0.88	0.75	0.75	0.82	0.82	0.63	0.63	0.82	0.82	1.91	1.55	1.32	1.32	1.32	0.28	0.28	0.28	0.28	0.96
35	1.25	0.89	0.77	0.77	0.82	0.82	0.63	0.63	0.82	0.82	2.00	1.63	1.40	1.40	1.40	0.29	0.29	0.29	0.29	0.98
36	1.30	0.94	0.83	0.83	0.86	0.86	0.67	0.67	0.86	0.86	2.11	1.73	1.50	1.50	1.50	0.31	0.31	0.31	0.31	0.98

10YR Term - Male

Annual Premium - Per Thousand

Age	Non-Tobacco				Preferred				Tobacco				Available Riders							
	\$25,000 - \$99,999		\$100K - \$249K		250K +		\$100K - \$249K		250K +		\$25,000 - \$99,000		\$100K - \$249K		250K +					
	Simplified Issue		Fully Underwritten		Fully Underwritten		Fully Underwritten		Fully Underwritten		Simplified Issue		Fully Underwritten		Fully Underwritten		WP			
	MN	MN	MN	MN	MP	MP	MP	MP	MP	MT	MT	MT	MT	MT	MT	MP	MN	MT	ADB	
37	1.35	0.98	0.89	0.89	0.89	0.89	0.71	2.21	1.84	1.61	1.84	1.61	1.84	1.61	0.32	0.32	0.32	0.32	0.59	1.00
38	1.41	1.03	0.96	0.96	0.93	0.93	0.74	2.32	1.95	1.72	1.95	1.72	2.06	1.84	0.36	0.36	0.36	0.36	0.65	1.02
39	1.46	1.08	1.03	1.03	1.00	1.00	0.82	2.56	2.18	1.97	2.18	1.97	2.37	2.16	0.40	0.40	0.40	0.40	0.72	1.04
40	1.51	1.13	1.10	1.10	1.06	1.06	0.88	2.77	2.36	2.16	2.36	2.16	2.58	2.36	0.42	0.42	0.42	0.42	0.76	1.06
41	1.60	1.22	1.18	1.18	1.12	1.12	0.94	2.99	2.58	2.36	2.58	2.36	2.81	2.58	0.44	0.44	0.44	0.44	0.80	1.08
42	1.69	1.32	1.27	1.27	1.24	1.24	1.07	3.48	3.05	2.82	3.05	2.82	3.31	3.08	0.47	0.47	0.47	0.47	0.84	1.10
43	1.79	1.42	1.36	1.36	1.30	1.30	1.14	3.75	3.31	3.08	3.31	3.08	3.68	3.43	0.52	0.52	0.52	0.52	0.94	1.12
44	1.90	1.53	1.45	1.45	1.40	1.40	1.25	4.14	3.68	3.43	3.68	3.43	4.08	3.81	0.55	0.55	0.55	0.55	0.99	1.14
45	2.00	1.65	1.55	1.55	1.62	1.62	1.47	5.02	4.53	4.23	4.53	4.23	5.03	4.70	0.58	0.58	0.58	0.58	1.04	1.16
46	2.15	1.80	1.69	1.69	1.74	1.74	1.60	6.08	5.58	5.22	5.58	5.22	6.08	5.70	0.61	0.61	0.61	0.61	1.10	1.18
47	2.30	1.96	1.84	1.84	1.87	1.87	1.74	7.10	6.63	6.30	6.63	6.30	7.10	6.70	0.64	0.64	0.64	0.64	1.16	1.20
48	2.46	2.13	2.00	2.00	2.03	2.03	1.90	8.10	7.67	7.30	7.67	7.30	8.10	7.70	0.67	0.67	0.67	0.67	1.22	1.22
49	2.63	2.31	2.18	2.18	2.21	2.21	2.07	9.10	8.62	8.25	8.62	8.25	9.10	8.70	0.71	0.71	0.71	0.71	1.24	1.24
50	2.81	2.51	2.37	2.37	2.39	2.39	2.25	10.10	9.68	9.30	9.68	9.30	10.10	9.70	0.74	0.74	0.74	0.74	1.26	1.26
51	3.04	2.75	2.60	2.60	2.60	2.60	2.46	11.10	10.86	10.45	10.86	10.45	11.10	10.70	0.78	0.78	0.78	0.78	1.28	1.28
52	3.29	3.01	2.85	2.85	2.81	2.81	2.67	12.10	11.86	11.45	11.86	11.45	12.10	11.70	0.82	0.82	0.82	0.82	1.30	1.30
53	3.56	3.29	3.12	3.12	3.12	3.12	2.93	13.10	12.86	12.45	12.86	12.45	13.10	12.70	0.84	0.84	0.84	0.84	1.32	1.32
54	3.85	3.60	3.41	3.41	3.41	3.41	3.23	14.10	13.86	13.45	13.86	13.45	14.10	13.70	0.88	0.88	0.88	0.88	1.34	1.34
55	4.16	3.93	3.73	3.73	3.73	3.73	3.55	15.10	14.86	14.45	14.86	14.45	15.10	14.70	0.94	0.94	0.94	0.94	1.36	1.36

10YR Term - Male

Annual Premium - Per Thousand

Age	Non-Tobacco						Preferred						Tobacco						Available Riders											
	\$25,000 - \$99,999			\$100K - \$249K			250K +			\$100K - \$249K			250K +			\$25,000 - \$99,000			\$100K - \$249K			250K +			Fully Underwritten					
	Simplified Issue						Fully Underwritten						Simplified Issue						Fully Underwritten						Fully Underwritten					
	MN	MP	MT	MN	MP	MT	MN	MP	MT	MN	MP	MT	MN	MP	MT	MN	MP	MT	MN	MP	MT	MN	MP	MT	MN	MP	MT	MN	MP	MT
56	4.56	4.31	4.09	4.72	4.48	4.90	3.09	2.93	12.02	11.29	10.61	0.86	0.86	0.86	1.57	1.38														
57	4.99	4.72	4.48	5.17	4.90	5.37	3.38	3.20	13.29	12.51	11.75	0.90	0.90	0.90	1.64	1.42														
58	5.46	5.17	4.90	5.66	5.37	5.87	3.71	3.50	14.70	13.86	13.02	0.93	0.93	0.93	1.71	1.46														
59	5.98	5.66	5.37	6.20	5.87	6.47	4.06	3.83	16.25	15.35	14.43	0.97	0.97	0.97	1.78	1.50														
60	6.54	6.20	5.87	6.82	6.47	7.13	4.45	4.18	17.97	17.00	15.98	-	-	-	-	1.54														
61	7.15	6.82	6.47	7.50	7.13	7.86	4.90	4.60	19.43	18.34	17.21	-	-	-	-	-														
62	7.81	7.50	7.13	8.24	7.86	8.65	5.40	5.05	20.99	19.78	18.53	-	-	-	-	-														
63	8.52	8.24	7.86	9.06	8.65	9.53	5.94	5.55	22.69	21.33	19.95	-	-	-	-	-														
64	9.31	9.06	8.65	9.96	9.53	10.60	6.54	6.10	24.52	23.01	21.48	-	-	-	-	-														
65	10.16	9.96	9.53	11.06	10.60	11.79	7.20	6.70	26.49	24.81	23.12	-	-	-	-	-														
66	11.28	11.06	10.60	12.28	11.79	13.11	8.02	7.46	28.74	26.92	25.08	-	-	-	-	-														
67	12.53	12.28	11.79	13.90	13.63	14.58	8.93	8.31	31.17	29.20	27.21	-	-	-	-	-														
68	13.90	13.63	13.11	15.44	15.13	16.21	9.94	9.25	33.80	31.67	29.51	-	-	-	-	-														
69	15.44	15.13	14.58	16.79	16.21	17.13	11.07	10.29	36.66	34.35	32.01	-	-	-	-	-														
70	17.13	16.79	16.21	18.32	17.99	18.71	12.32	11.45	39.76	37.26	34.71	-	-	-	-	-														

20 YEAR TERM - Female**Annual Premium - Per Thousand**

- * Death benefit only
- * Issue ages: 18-60 *Based on Age Nearest Birthday (ANB)*
- * Policy fee \$50.
- * Policy fee waived when issued as a rider.
- * Expires at age 95
- * Minimum face amount: \$50,000
- * Does not accrue cash value or loan value.

Premiums Banded for quantity discounts	Band 1	Band 2	Band 3
	T/NT	\$50,000-\$99,999	\$100,000-\$249,999
		T/NT/P	T/NT/P

- * After initial 20 year term, policy becomes Yearly Renewal Term.
- * This is term to age 95 with level premiums for 20 years and increasing premiums thereafter. This policy is convertible to whole life up to age 70. Except for conversion to a single premium whole life policy, we will allow a conversion credit to be applied toward the initial premium payment for the new contract.
- * Additional option available: At end of initial term, member has the option within 30 days to reapply for a new ten year term plan, assuming that there are no health changes and they are within the issue ages of this plan. A new policy would be issued at the new issue age and premium.
- * Riders available:
 - Waiver of Premium--Issue ages are 20-59
 - Accidental Death Benefit--Issue ages are 18-60

20YR Term - Female

Annual Premium - Per Thousand

Age	Non-Tobacco				Preferred				Tobacco				Available Riders					
	\$50,000 - \$99,999		\$100K - \$249K		\$100K - \$249K		250K +		\$50,000 - \$99,000		\$100K - \$249K		250K +					
	Simplified Issue		Fully Underwritten		Fully Underwritten		Fully Underwritten		Simplified Issue		Fully Underwritten		Fully Underwritten		WP			
	FN	FN	FN	FN	FP	FP	FP	FP	FT	FT	FT	FT	FT	FT	FP	FN	FT	ADB
18	1.02	0.73	0.57	0.57	0.65	0.65	0.50	0.50	1.12	0.82	0.82	0.64						1.04
19	1.02	0.73	0.57	0.57	0.65	0.65	0.50	0.50	1.12	0.82	0.82	0.64						1.02
20	1.02	0.73	0.57	0.57	0.65	0.65	0.50	0.50	1.12	0.82	0.82	0.64			0.26	0.26	0.50	0.98
21	1.02	0.74	0.57	0.57	0.65	0.65	0.50	0.50	1.13	0.86	0.86	0.68			0.27	0.27	0.52	0.96
22	1.02	0.74	0.57	0.57	0.65	0.65	0.50	0.50	1.16	0.89	0.89	0.71			0.28	0.28	0.54	0.94
23	1.02	0.75	0.57	0.57	0.65	0.65	0.50	0.50	1.19	0.93	0.93	0.75			0.29	0.29	0.56	0.94
24	1.02	0.75	0.57	0.57	0.65	0.65	0.50	0.50	1.22	0.97	0.97	0.79			0.30	0.30	0.58	0.92
25	1.02	0.75	0.57	0.57	0.65	0.65	0.50	0.50	1.25	1.00	1.00	0.82			0.31	0.31	0.61	0.92
26	1.02	0.76	0.59	0.59	0.66	0.66	0.51	0.51	1.31	1.05	1.05	0.88			0.33	0.33	0.63	0.90
27	1.02	0.76	0.60	0.60	0.67	0.67	0.52	0.52	1.36	1.10	1.10	0.94			0.34	0.34	0.66	0.90
28	1.02	0.76	0.61	0.61	0.68	0.68	0.52	0.52	1.42	1.15	1.15	1.00			0.36	0.36	0.69	0.92
29	1.02	0.76	0.62	0.62	0.69	0.69	0.53	0.53	1.48	1.21	1.21	1.06			0.37	0.37	0.72	0.92
30	1.02	0.76	0.63	0.63	0.69	0.69	0.53	0.53	1.54	1.26	1.26	1.13			0.39	0.39	0.75	0.92
31	1.07	0.81	0.67	0.67	0.73	0.73	0.56	0.56	1.66	1.36	1.36	1.22			0.40	0.40	0.78	0.94
32	1.12	0.85	0.71	0.71	0.77	0.77	0.59	0.59	1.78	1.46	1.46	1.31			0.42	0.42	0.81	0.94
33	1.17	0.90	0.75	0.75	0.80	0.80	0.63	0.63	1.91	1.57	1.57	1.41			0.44	0.44	0.85	0.96
34	1.23	0.95	0.80	0.80	0.84	0.84	0.66	0.66	2.05	1.68	1.68	1.52			0.46	0.46	0.88	0.96
35	1.28	1.00	0.84	0.84	0.88	0.88	0.69	0.69	2.19	1.80	1.80	1.63			0.47	0.47	0.92	0.98

20YR Term - Female

Annual Premium - Per Thousand

Age	Non-Tobacco				Preferred				Tobacco				Available Riders					
	\$50,000 - \$99,999		\$100K- \$249K		\$100K- \$249K		250K +		\$50,000 - \$99,000		\$100K- \$249K		250K +					
	Simplified Issue		Fully Underwritten		Fully Underwritten		Fully Underwritten		Simplified Issue		Fully Underwritten		Fully Underwritten		WP			
	FN	FN	FN	FN	FP	FP	FP	FP	FT	FT	FT	FT	FT	FT	FP	FN	FT	ADB
36	1.35	1.05	0.90	0.90	0.93	0.74	0.74	2.37	1.96	1.78	1.78	1.78	1.78	1.78	0.49	0.49	0.96	0.98
37	1.42	1.11	0.97	0.97	0.98	0.79	0.79	2.55	2.14	1.94	1.94	1.94	1.94	1.94	0.51	0.51	0.99	1.00
38	1.49	1.16	1.04	1.04	1.03	0.84	0.84	2.75	2.33	2.12	2.12	2.12	2.12	2.12	0.54	0.54	1.03	1.00
39	1.57	1.22	1.11	1.11	1.08	0.89	0.89	2.97	2.54	2.31	2.31	2.31	2.31	2.31	0.56	0.56	1.07	1.02
40	1.64	1.27	1.18	1.18	1.13	0.94	0.94	3.22	2.81	2.53	2.53	2.53	2.53	2.53	0.58	0.58	1.12	1.04
41	1.75	1.38	1.28	1.28	1.20	1.01	1.01	3.56	3.10	2.79	2.79	2.79	2.79	2.79	0.60	0.60	1.16	1.04
42	1.87	1.49	1.39	1.39	1.28	1.07	1.07	3.92	3.42	3.08	3.08	3.08	3.08	3.08	0.62	0.62	1.20	1.06
43	1.99	1.61	1.50	1.50	1.36	1.14	1.14	4.33	3.77	3.40	3.40	3.40	3.40	3.40	0.65	0.65	1.25	1.08
44	2.12	1.74	1.62	1.62	1.44	1.22	1.22	4.77	4.16	3.75	3.75	3.75	3.75	3.75	0.67	0.67	1.29	1.10
45	2.25	1.88	1.75	1.75	1.52	1.32	1.32	5.27	4.59	4.14	4.14	4.14	4.14	4.14	0.70	0.70	1.34	1.12
46	2.44	2.06	1.92	1.92	1.65	1.44	1.44	5.82	5.07	4.57	4.57	4.57	4.57	4.57	0.73	0.73	1.39	1.14
47	2.64	2.26	2.10	2.10	1.79	1.58	1.58	6.41	5.60	5.05	5.05	5.05	5.05	5.05	0.76	0.76	1.45	1.16
48	2.86	2.47	2.30	2.30	1.94	1.74	1.74	7.07	6.17	5.57	5.57	5.57	5.57	5.57	0.79	0.79	1.50	1.18
49	3.09	2.70	2.52	2.52	2.12	1.91	1.91	7.77	6.79	6.13	6.13	6.13	6.13	6.13	0.82	0.82	1.56	1.20
50	3.34	2.95	2.75	2.75	2.32	2.09	2.09	8.54	7.46	6.73	6.73	6.73	6.73	6.73	0.86	0.86	1.62	1.22
51	3.66	3.21	3.00	3.00	2.54	2.29	2.29	9.38	8.19	7.40	7.40	7.40	7.40	7.40	0.89	0.89	1.69	1.24
52	4.01	3.49	3.27	3.27	2.78	2.50	2.50	10.31	9.01	8.14	8.14	8.14	8.14	8.14	0.93	0.93	1.76	1.26
53	4.40	3.80	3.56	3.56	3.06	2.75	2.75	11.32	9.90	8.94	8.94	8.94	8.94	8.94	0.96	0.96	1.83	1.28

20YR Term - Female

Annual Premium - Per Thousand

Age	Non-Tobacco				Preferred				Tobacco				Available Riders							
	\$50,000 - \$99,999		\$100K - \$249K		\$100K - \$249K		250K +		\$50,000 - \$99,000		\$100K - \$249K		250K +							
	Simplified Issue		Fully Underwritten		Fully Underwritten		Fully Underwritten		Simplified Issue		Fully Underwritten		Fully Underwritten		WP		ADB			
	FN	FN	FN	FN	FP	FP	FP	FP	FT	FT	FT	FT	FT	FT	FP	FN	FN	FT	FT	
54	4.83	4.13	4.49	3.88	3.38	3.75	3.04	12.43	10.88	9.83	10.88	9.83	10.88	9.83	1.00	1.00	1.00	1.90	1.90	1.32
55	5.32	4.96	4.96	4.22	4.18	4.65	3.77	13.63	11.93	10.79	13.63	10.79	11.93	10.79	1.04	1.04	1.04	1.98	1.98	1.34
56	5.87	5.47	5.47	4.66	4.65	5.15	4.19	14.93	13.07	11.82	14.93	11.82	13.07	11.82	1.09	1.09	1.09	2.07	2.07	1.38
57	6.48	6.03	6.03	5.68	5.19	5.82	4.68	16.30	15.58	14.10	16.30	14.10	15.58	14.10	1.13	1.13	1.13	2.16	2.16	1.42
58	7.18	6.66	6.66	6.27	5.82	6.27	5.25	17.77	17.00	15.39	17.77	15.39	17.00	15.39	1.17	1.17	1.17	2.24	2.24	1.46
59	7.98	7.44	7.44	6.91	6.53	6.91	5.90	19.37	18.53	16.79	19.37	16.79	18.53	16.79	1.22	1.22	1.22	2.33	2.33	1.50
60	8.90	8.90	8.90	8.90	8.90	8.90	8.90	21.10	18.53	16.79	21.10	18.53	16.79	18.53	-	-	-	-	-	1.54

20 YEAR TERM - Male

Annual Premium - Per Thousand

- * Death benefit only
- * Issue ages: 18-60 *Based on Age Nearest Birthday (ANB)*
- * Policy fee \$50.
- * Policy fee waived when issued as a rider.
- * Expires at age 95
- * Minimum face amount: \$50,000
- * Does not accrue cash value or loan value.

	Band 1	Band 2	Band 3
Premiums Banded for quantity discounts	\$50,000-\$99,999	\$100,000-\$249,999	\$250,000 +
	T/NT	T/NT/P	T/NT/P

- * After initial 20 year term, policy becomes Yearly Renewal Term.
- * This is term to age 95 with level premiums for 20 years and increasing premiums thereafter. This policy is convertible to whole life up to age 70. Except for conversion to a single premium whole life policy, we will allow a conversion credit to be applied toward the initial premium payment for the new contract.
- * Additional option available: At end of initial term, member has the option within 30 days to reapply for a new ten year term plan, assuming that there are no health changes and they are within the issue ages of this plan. A new policy would be issued at the new issue age and premium.
- * Riders available:
 - Waiver of Premium--Issue ages are 20-59
 - Accidental Death Benefit--Issue ages are 18-60

20YR Term - Male

Annual Premium - Per Thousand

Age	Non-Tobacco				Preferred				Tobacco				Available Riders							
	\$50,000 - \$99,999 Simplified Issue		\$100K- \$249K + 250K +		\$100K- \$249K + 250K +		\$50,000 - \$99,999 Simplified Issue		Fully Underwritten				Fully Underwritten							
	MN	MIN	MIN	MP	MP	MP	MP	MT	MT	MT	MT	MP	MP	MP	MP	MIN	MIN	MT	MT	ADB
18	1.23	0.88	0.70	0.82	0.82	0.64	1.66	1.66	1.36	1.13	-	-	-	-	-	-	-	-	-	1.04
19	1.23	0.88	0.70	0.82	0.82	0.64	1.66	1.66	1.36	1.13	-	-	-	-	-	-	-	-	-	1.02
20	1.23	0.88	0.70	0.82	0.82	0.64	1.66	1.66	1.36	1.13	0.15	0.15	0.15	0.15	0.15	0.15	0.15	0.15	0.27	0.98
21	1.23	0.88	0.70	0.82	0.82	0.64	1.66	1.66	1.37	1.13	0.16	0.16	0.16	0.16	0.16	0.16	0.16	0.16	0.29	0.96
22	1.23	0.88	0.70	0.82	0.82	0.64	1.66	1.66	1.37	1.13	0.17	0.17	0.17	0.17	0.17	0.17	0.17	0.17	0.30	0.94
23	1.23	0.88	0.70	0.82	0.82	0.64	1.66	1.66	1.38	1.13	0.17	0.17	0.17	0.17	0.17	0.17	0.17	0.17	0.31	0.94
24	1.23	0.88	0.70	0.82	0.82	0.64	1.66	1.66	1.38	1.13	0.18	0.18	0.18	0.18	0.18	0.18	0.18	0.18	0.32	0.92
25	1.23	0.88	0.70	0.82	0.82	0.64	1.66	1.66	1.38	1.13	0.19	0.19	0.19	0.19	0.19	0.19	0.19	0.19	0.34	0.92
26	1.24	0.88	0.72	0.82	0.82	0.65	1.73	1.73	1.43	1.19	0.20	0.20	0.20	0.20	0.20	0.20	0.20	0.20	0.35	0.90
27	1.24	0.88	0.73	0.82	0.82	0.65	1.79	1.79	1.48	1.24	0.20	0.20	0.20	0.20	0.20	0.20	0.20	0.20	0.37	0.90
28	1.25	0.88	0.74	0.82	0.82	0.65	1.86	1.86	1.53	1.30	0.21	0.21	0.21	0.21	0.21	0.21	0.21	0.21	0.38	0.92
29	1.25	0.88	0.75	0.82	0.82	0.65	1.92	1.92	1.58	1.36	0.22	0.22	0.22	0.22	0.22	0.22	0.22	0.22	0.40	0.92
30	1.25	0.88	0.76	0.82	0.82	0.65	1.99	1.99	1.63	1.42	0.23	0.23	0.23	0.23	0.23	0.23	0.23	0.23	0.42	0.92
31	1.30	0.93	0.81	0.86	0.86	0.69	2.10	2.10	1.74	1.53	0.24	0.24	0.24	0.24	0.24	0.24	0.24	0.24	0.43	0.94
32	1.35	0.98	0.85	0.89	0.89	0.72	2.22	2.22	1.86	1.63	0.25	0.25	0.25	0.25	0.25	0.25	0.25	0.25	0.45	0.94
33	1.40	1.03	0.90	0.93	0.93	0.75	2.34	2.34	1.98	1.75	0.26	0.26	0.26	0.26	0.26	0.26	0.26	0.26	0.48	0.96
34	1.45	1.08	0.95	0.97	0.97	0.79	2.46	2.46	2.11	1.87	0.28	0.28	0.28	0.28	0.28	0.28	0.28	0.28	0.50	0.96
35	1.50	1.13	1.00	1.00	1.00	0.82	2.59	2.59	2.24	2.00	0.29	0.29	0.29	0.29	0.29	0.29	0.29	0.29	0.52	0.98
36	1.59	1.21	1.09	1.06	1.06	0.88	2.79	2.79	2.42	2.17	0.30	0.30	0.30	0.30	0.30	0.30	0.30	0.30	0.54	0.98

20YR Term - Male

Annual Premium - Per Thousand

Age	Non-Tobacco				Preferred				Tobacco				Available Riders			
	\$50,000 - \$99,999 Simplified Issue		\$100K- \$249K + 250K +		\$100K- \$249K + 250K +		\$50,000 - \$99,999 Simplified Issue		Fully Underwritten		Fully Underwritten		Fully Underwritten		Fully Underwritten	
	MN	MIN	MIN	MP	MP	MP	MT	MT	MT	MT	MP	MP	MP	MP	MT	MT
37	1.69	1.28	1.18	1.11	0.94	3.01	2.61	2.36	0.32	0.32	0.32	0.32	0.32	0.57	1.00	
38	1.79	1.36	1.28	1.17	1.00	3.24	2.81	2.56	0.33	0.33	0.33	0.33	0.60	1.00		
39	1.89	1.45	1.38	1.23	1.06	3.49	3.03	2.77	0.35	0.35	0.35	0.35	0.62	1.02		
40	2.00	1.53	1.49	1.29	1.13	3.82	3.33	3.00	0.36	0.36	0.36	0.36	0.65	1.04		
41	2.15	1.68	1.62	1.40	1.23	4.22	3.68	3.32	0.38	0.38	0.38	0.38	0.68	1.04		
42	2.30	1.85	1.76	1.50	1.32	4.68	4.08	3.67	0.40	0.40	0.40	0.40	0.72	1.06		
43	2.47	2.03	1.91	1.62	1.43	5.19	4.53	4.08	0.42	0.42	0.42	0.42	0.75	1.08		
44	2.65	2.23	2.08	1.75	1.55	5.77	5.03	4.54	0.44	0.44	0.44	0.44	0.79	1.10		
45	2.83	2.44	2.25	1.88	1.69	6.41	5.60	5.05	0.47	0.47	0.47	0.47	0.83	1.12		
46	3.10	2.66	2.46	2.06	1.85	7.13	6.22	5.62	0.49	0.49	0.49	0.49	0.87	1.14		
47	3.38	2.90	2.69	2.25	2.02	7.94	6.93	6.26	0.52	0.52	0.52	0.52	0.92	1.16		
48	3.71	3.16	2.94	2.46	2.21	8.83	7.71	6.96	0.54	0.54	0.54	0.54	0.97	1.18		
49	4.09	3.45	3.21	2.69	2.42	9.81	8.58	7.74	0.57	0.57	0.57	0.57	1.02	1.20		
50	4.50	3.75	3.50	2.94	2.65	10.90	9.53	8.61	0.60	0.60	0.60	0.60	1.08	1.22		
51	4.95	4.14	3.87	3.25	2.92	12.09	10.58	9.56	0.63	0.63	0.63	0.63	1.14	1.24		
52	5.46	4.56	4.26	3.61	3.23	13.40	11.73	10.60	0.67	0.67	0.67	0.67	1.21	1.26		
53	6.04	5.03	4.70	4.00	3.60	14.83	12.98	11.74	0.70	0.70	0.70	0.70	1.28	1.28		
54	6.72	5.54	5.19	4.48	4.04	16.39	14.36	12.99	0.74	0.74	0.74	0.74	1.35	1.32		
55	7.49	6.14	5.72	5.03	4.54	18.05	15.82	14.32	0.78	0.78	0.78	0.78	1.43	1.34		

