

# PURELIFE-PLUS\_

Marketed by

Flexible Premium Life Insurance to Age 121

Portable, Permanent Individual Life Insurance for the Employee and Family

Policy Form: ICC18-PRFNG-NI-18

## **Product Highlights**

Permanent Life Insurance to Age 121

Minimal Cash Value Premiums Dedicated Primarily to Purchase Life Insurance

Level Premium Guarantees Coverage for a Significant Period of Time

Unique Limited Right to Partial Refund of Premium if Future Premium Required to Continue Coverage Increases

No Surrender Charges Apply

Accelerated Death Benefit Due to Terminal Illness Included

Convenient Premium Payments Through Payroll Deduction

> Portable When You Leave Employment

Accidental Death Benefit Included for Selected Ages

Accelerated Death Benefit Due to Chronic Illness Included **For Employee Only** 



Application for Life Insurance

Express Issue | Monthly Pay

FOR USE ONLY IN Texas

### Portable, Permanent, Individual Life Insurance for Employees and Their Families

As an employee, you can apply for valuable life insurance protection on you and your family under eligibility guidelines established for your employer. Your employer has conveniently agreed to permit you to pay premiums through payroll deduction. This is a summary only. Policy provisions prevail. This brochure is not a contract or an offer to contract.

**Minimal Cash Values** Buy this policy for its life insurance protection, not its cash value. The primary benefit is life insurance. Payment of the Table Premium produces a small cash value (Benchmark Cash Value).

**Permanent Life Insurance Coverage** Unlike group term life insurance, PureLife-plus is a personally owned, permanent individual life insurance policy to age 121 that can never be canceled or reduced as long as you pay the necessary premiums, even if your health changes.

**Guaranteed Period** Continuous, timely, and uninterrupted payment of the Table Premium guarantees coverage for the Guaranteed Period shown. Texas Life (We) cannot legally predict the premium required to continue coverage after the Guaranteed Period. It may be lower, the same, or higher than the Table Premium. However, if the premium to continue coverage is ever higher, We guarantee a limited right to a partial refund of premium (described below).

**Guaranteed Limited Right to Partial Refund of Premium** If a premium higher than the Table Premium is ever required to continue coverage after the Guaranteed Period, you have the choice to:

- a. Pay the higher premium(s) required to continue coverage; or,
- b. Surrender the policy and receive a partial refund of premium equal to 120 times the minimum monthly premium due at issue (ten years worth of Table Premium). You are eligible for this refund if the actual cash value equals or exceeds the Benchmark Cash Value and you have taken no prior partial surrenders.

**Portable** Once issued, continued employment is not a condition to continue coverage. Coverage is guaranteed as long as required premiums are paid, even after you retire or terminate employment. When employment ends, you can pay equivalent monthly premiums directly or by bank draft (for monthly direct payments we add a monthly fee not to exceed \$2.00). Other modes are available.

Accelerated Death Benefit Due to Terminal Illness Rider This policy includes, at no additional premium, an Accelerated Death Benefit Due to Terminal Illness Rider (Form ICC07-ULABR-07). See details on next page.

**Individual and Family Coverage is Easy to Apply For** Subject to age and amount restrictions, you may apply for an individual policy on your life or your spouse's life (see chart next page for spouse's minimum/maximum amounts). An individual policy is

also available on each of your children ages 15 days — 26, and even on each of your grandchildren ages 15 days — 18. Proof of insurability is required. Most policies are issued based upon the answers to three work and health related application questions.

**Optional Benefits** According to the guidelines established for your employer, your application will include the following benefit for an additional cost depending upon your issue age.

Accidental Death Benefit This benefit to age 65 (Issue Ages 17-59) doubles the coverage when death occurs by accidental bodily injury within 180 days of an accident. Maximum in-force limits and exclusions apply. (Form ICC07-ULCL-ADB-07).

Accelerated Death Benefit Rider For Chronic Illness For Employee Only This benefit provides an accelerated death benefit if an insured becomes chronically ill as defined in the rider. (Form ICC15-ULABR-CI-15). See details on next page.

**Interim Insurance:** Interim insurance will be in force on the application date if these conditions are met: (1) the insurance is purchased through payroll deduction; (2) the Salary Deduction Authorization is signed; and, (3) the proposed insured is insurable at standard rates under Our rules and usual practice. Interim insurance remains in effect until the earlier of: (a) the Policy Date; (b) the date We decline the application; (c) the date We notify the applicant that s/he is ineligible for interim insurance; or, (d) the 180th day after the application date.

Policy Mechanics and Other Important Details Premiums are flexible. However, we highly recommend payment of the Table Premium during the Guaranteed Period, and no partial surrenders or policy loans. Table Premium produces a small cash value (Benchmark Cash Value). Paying a lesser premium results in an actual cash value which is less than Benchmark Cash Value, causing the policy to lapse. Premiums less a premium load create cash value to pay monthly administrative loads and cost of insurance. Cash value is currently credited at the guaranteed interest rate of 3.00% per year. We may, at any time, credit higher than the guaranteed interest rate. Likewise, We may charge cost of insurance rates which are less than the policy's maximum rates, but only when actual cash value equals or exceeds Benchmark Cash Value. No surrender charges apply. Loads include 10.00% of premium, \$2.03 per month and monthly administrative loads. Two year suicide and contestable clauses apply. The policy loan rate is 7.40% in advance. Surrenders and loans may be deferred for up to six months.

# TEXASLIFE INSURANCE

### A Summary of the Accelerated Death Benefit Rider

### Terminal Illness - included at no additional cost

The policy includes an Accelerated Death Benefit Due to Terminal Illness Rider. If the Insured has a terminal illness, in lieu of the insurance proceeds otherwise payable at death, you may elect to claim an accelerated benefit while the Insured is still alive. The single sum benefit is 92% of the insurance proceeds less an administrative fee of the lesser of \$150 or 7% of the insurance proceeds. Terminal Illness is an injury or sickness diagnosed and certified by a qualifying physician that, despite the appropriate medical care, is reasonably expected to result in death within 12 months. This benefit is intended to qualify for favorable income tax treatment and may not be subject to federal income tax. (See Important Notices below.)

### Chronic Illness - included with an additional premium, for employee only

For an additional premium of 10% of the base policy premium, this policy may include an Accelerated Death Benefit Due to Chronic Illness Rider. If the Insured has a chronic illness, in lieu of the insurance proceeds otherwise payable at death, you may elect to claim an accelerated benefit while the Insured is still alive. The single sum benefit is 92% of the insurance proceeds less an administrative fee of the lesser of \$150 or 7% of the insurance proceeds. Chronic Illness means the Insured permanently: (a) is unable to perform, without substantial assistance from another individual, at least two Activities of Daily Living due to a loss of functional capacity and will need services for the rest of his or her life; or (b) requires substantial supervision to protect the Insured from threats to health and safety due to severe cognitive impairment and will need services for the rest of his or her life. Activities of Daily Living include: bathing, continence, dressing, eating, toileting, and transferring. Severe cognitive impairment means deterioration or loss of intellectual capacity that: (1) places the Insured in jeopardy of harming himself or herself or others, and therefore, the Insured requires substantial supervision by another person; and (2) is measured by clinical evidence and standardized tests which reliably measure impairment in: (a) short or long term memory; (b) orientation to people, places or time; and (c) deductive or abstract reasoning.

This benefit will be calculated and paid as a lump sum only. This lump sum is intended to serve as a per diem accelerated death benefit as described under Section 101(g) of the Internal Revenue Code. You may be able to exclude certain portions of this accelerated death benefit (specifically, the greater of: (a) the lump sum equivalent of the per diem amount; or (b) the actual cost incurred for Services provided in the year the Accelerated Death Benefit is paid) from your taxable income. Your benefit for Chronic Illness will be calculated in accordance with the rider and you may, in some circumstances, be paid more than the excludable per diem amount.

### **Important Notices**

Tax laws related to the acceleration of life insurance benefits are complex. The information presented in this Summary is general in nature. You should consult a qualified tax or legal advisor to determine the effect of receiving this benefit. Texas Life Insurance Company and its agents do not provide tax or legal advice.

Receipt of any accelerated death benefit under your policy may affect your, your spouse's and your family's eligibility for medical assistance (Medicaid), Aid to Families with Dependent Children (AFDC), Supplemental Social Security Income (SSI), and drug assistance programs. You should consult with a qualified tax or legal advisor and the relevant social service agencies to determine how receiving the benefit may affect your, your spouse's, and your family's eligibility for public assistance.

An accelerated death benefit is not long term care insurance. This summary provides a general description of any accelerated death benefit under your policy. Your policy and riders contain certain exclusions, limitations, and exceptions. Please refer to your policy and rider for details. The right to accelerate benefits under any accelerated death benefit does not extend to any Child Term Life Insurance Rider. However, if the accelerated death benefit under any rider is paid, any coverage provided under the Child Term Life Insurance Rider attached to this policy becomes a paid up term insurance policy on each covered child.

This paid up coverage on each child will terminate on each covered child's 25th birthday. Payment under any accelerated death benefit rider terminates the policy and all other optional benefits/riders and reduces all insurance proceeds, cash values and loan values to zero.

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### **Representation of benefit payable - Terminal or Chronic Illness**

The following chart shows the effect of exercising an accelerated benefit on the base policy. This example is using a \$50,000 policy with a \$2,000 policy loan balance and all premiums are current. This chart is for representation purposes only. Your benefits may be higher or lower, depending on your face amount of coverage, any unpaid policy loan balance, and any overdue premiums.

		Terminal	Chronic		
		Illness		Illness	
Death Benefit		\$50,000		\$50,000	
Policy Loan Balance	-	\$2,000	-	\$2,000	
Available for Acceleration	=	\$48,000	=	\$48,000	
Acceleration Percentage	x	92%	x	92%	
Gross Benefit	=	\$44,160	=	\$44,160	
Administration Fee	-	\$150	-	\$150	
Overdue Premiums	-	\$0	-	\$0	
Accelerated Benefit Payable	=	\$44,010	Π	\$44,010	

Note: The benefit will be paid for either Terminal Illness or Chronic Illness. In no instance will benefits be paid under both riders.

### **OPTIONAL BENEFITS MONTHLY COST:**

Exi	Express Issue Amounts of Coverage Available on Spouse										
Spouse's	Minimum	Maximum									
Issue Age	Face Amount	Face Amount									
17-34	\$25,000	\$50,000									
35-39	15,000	50,000									
40-49	10,000	50,000									
50-60	10,000	25,000									
61 & Older	N/A	N/A									

### Monthly Administrative Loads Per \$1,000 of Face Amount for Issue Ages Shown

Issue Age $\longrightarrow$	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Highest Load	0.1975	0.1975	0.2067	0.2067	0.2167	0.2167	0.2167	0.2167	0.2167	0.2159	0.2150	0.2225	0.2184	0.2117	0.2017
Lowest Load	0.0292	0.0234	0.1892	0.1950	0.1642	0.1717	0.1792	0.1884	0.1992	0.0009	0.0250	0.0142	0.0609	0.1192	0.0009
Zero After Year	6	6	5	5	5	5	5	5	5	6	6	6	6	6	7
									r	r			r		
Issue Age $\longrightarrow$	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29
Highest Load	0.1917	0.1792	0.1742	0.1734	0.1734	0.1750	0.1917	0.1959	0.2050	0.2067	0.2084	0.2175	0.2267	0.2267	0.2359
Lowest Load	0.0534	0.0959	0.1250	0.1392	0.1525	0.1617	0.1109	0.1100	0.0600	0.0600	0.0584	0.0084	0.1984	0.2134	0.2067
Zero After Year	7	7	7	7	7	7	7	7	7	7	7	7	6	6	6
Issue Age $\longrightarrow$	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44
Highest Load	0.2417	0.2384	0.2500	0.2600	0.2675	0.2850	0.2909	0.3000	0.3209	0.3534	0.3825	0.4209	0.4767	0.5359	0.5950
Lowest Load	0.2034	0.0467	0.0167	0.2184	0.2084	0.1475	0.1317	0.1075	0.0392	0.2684	0.1859	0.0684	0.3667	0.2350	0.1042
Zero After Year	6	7	7	6	6	6	6	6	6	5	5	5	4	4	4
Issue Age $\longrightarrow$	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59
Highest Load	0.6617	0.7275	0.7834	0.8467	0.9184	1.0067	1.1084	1.2342	1.3567	1.4350	1.5042	1.5750	1.6542	1.7417	1.8142
Lowest Load	0.6300	0.5509	0.4942	0.4267	0.3450	0.2417	0.1125	1.1984	1.1592	1.1684	1.1934	1.2217	1.2484	1.2742	1.3225
Zero After Year	3	3	3	3	3	3	3	2	2	2	2	2	2	2	2
Issue Age $\longrightarrow$	60	61	62	63	64	65	66	67	68	69	70				
Highest Load	1.9175	2.0117	2.1084	2.2075	2.3109	2.4184	2.5400	2.6734	2.8159	2.9534	3.0742				
Lowest Load	1.3500	1.3950	1.4484	1.5092	1.5767	1.6525	1.7284	1.8067	1.8934	1.8875	1.7592				
Zero After Year	2	2	2	2	2	2	2	2	2	2	2				

### (NON-TOBACCO CLASS)

### MONTHLY ADMINISTRATIVE LOADS PER \$1,000 OF FACE AMOUNT FOR ISSUE AGES SHOWN (TOBACCO CLASS)

$\text{Issue Age} \longrightarrow$	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Highest Load	0.3267	0.3242	0.3225	0.3209	0.3367	0.3342	0.3575	0.3575	0.3584	0.3675	0.3767	0.3850	0.3925	0.4600	0.4542
Lowest Load	0.3092	0.0067	0.0342	0.0625	0.0200	0.0517	0.3392	0.0017	0.0259	0.0150	0.0067	0.0059	0.0134	0.2392	0.2917
Zero After Year	4	5	5	5	5	5	4	5	5	5	5	5	5	4	4
					-	-	-		-			-	-		
Issue Age $\longrightarrow$	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46
Highest Load	0.4659	0.4659	0.4650	0.5000	0.5159	0.5484	0.5600	0.5950	0.6567	0.7009	0.7625	0.8725	0.9317	1.0159	1.0875
Lowest Load	0.2959	0.3359	0.3800	0.3242	0.3267	0.2875	0.3125	0.2609	0.1325	0.0550	0.6934	0.5359	0.4892	0.3984	0.3342
Zero After Year	4	4	4	4	4	4	4	4	4	4	3	3	3	3	3
					-				-				-		
Issue Age $\longrightarrow$	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61
Highest Load	1.1575	1.2250	1.3442	1.4142	1.5342	1.6867	1.8000	1.8800	1.9542	2.0392	2.1075	2.1942	2.2434	2.3075	2.4300
Lowest Load	0.2800	0.2350	0.0942	0.0559	1.4884	1.4517	1.4617	1.5125	1.5775	1.6409	1.7309	1.8117	1.9417	2.0675	2.1467
Zero After Year	3	3	3	3	2	2	2	2	2	2	2	2	2	2	2
					-				-						
$\text{Issue Age} \longrightarrow$	62	63	64	65	66	67	68	69	70						
Highest Load	2.5217	2.5917	2.6484	2.7000	2.7609	2.8300	2.8967	2.9625	3.0192						
Lowest Load	2.2692	2.2692	2.2084	2.1534	2.0884	2.0150	1.9434	1.8725	1.8117						
Zero After Year	2	2	2	2	2	2	2	2	2						

# TEXASLIFE INSURANCE EMPLOYEE MONTHLY PREMIUMS

# PureLife-plus — Standard Risk Table Premiums — Non-Tobacco — Express Issue

										GUARANTEED
		Monthly	y Premiu	ms for Li	ife Insura	nce Face	Amount	s Shown		PERIOD
					les Added O					Age to Which
Issue			Ad			t (Ages 17-	59)			Coverage is
Age		ar				( 0	ness (All Ag	res)		Guaranteed at
(ALB)	\$10,000	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000	\$250,000	\$300,000	Table Premium
15D-1	\$10,000	\$20,000	\$00,000	\$10,000	\$100,000	\$100,000	0200,000	\$200,000	\$500,000	83
2-3										83
4-10										79
11-16		11 40	20 55	20.70	20.05	57.15	17E 4F	02.75	119.05	75 72
17-20 21-22		$11.40 \\ 11.68$	$20.55 \\ 21.10$	$29.70 \\ 30.53$	$38.85 \\ 39.95$	$57.15 \\ 58.80$	75.45 77.65	93.75 96.50	$112.05 \\ 115.35$	73 73
23-25		11.95	21.65	31.35	41.05	60.45	79.85	99.25	118.65	71
26		12.23	22.20	32.18	42.15	62.10	82.05	102.00	121.95	72
27		12.50	22.75	33.00	43.25	63.75	84.25	104.75	125.25	72
28		12.50	22.75	33.00	43.25	63.75	84.25	104.75	125.25	71
29		12.78	23.30	33.83	44.35	65.40 67.05	86.45	107.50	128.55	71
30-31 32		13.05 13.60	23.85 24.95	34.65 36.30	45.45 47.65	67.05 70.35	88.65 93.05	110.25 115.75	131.85 138.45	70 70
33		13.00 14.15	24.95 26.05	37.95	49.85	73.65	97.45	110.75 121.25	136.45 145.05	70
34		14.70	27.15	39.60	52.05	76.95	101.85	126.75	151.65	72
35		15.53	28.80	42.08	55.35	81.90	108.45	135.00	161.55	73
36		16.08	29.90	43.73	57.55	85.20	112.85	140.50	168.15	73
37		16.63	31.00	45.38	59.75	88.50	117.25	146.00	174.75	73
38 39		$17.45 \\ 18.55$	$32.65 \\ 34.85$	47.85 51.15	63.05 67.45	$93.45 \\ 100.05$	$123.85 \\ 132.65$	154.25 165.25	$184.65 \\ 197.85$	74 75
39 40	9.21	18.55 19.65	34.85 37.05	51.15 54.45	67.45 71.85	100.05 106.65	132.05 141.45	105.25 176.25	197.85 211.05	75 76
41	9.76	21.03	39.80	58.58	77.35	114.90	152.45	190.00	227.55	77
42	10.53	22.95	43.65	64.35	85.05	126.45	167.85	209.25	250.65	78
43	11.30	24.88	47.50	70.13	92.75	138.00	183.25	228.50	273.75	80
44	12.07	26.80	51.35	75.90	100.45	149.55	198.65	247.75	296.85	81
$45 \\ 46$	$12.95 \\ 13.83$	$29.00 \\ 31.20$	$55.75 \\ 60.15$	$82.50 \\ 89.10$	$109.25 \\ 118.05$	$162.75 \\ 175.95$	$216.25 \\ 233.85$	269.75 291.75	$323.25 \\ 349.65$	82 83
40	13.83	33.13	64.00	94.88	118.05	175.50	249.25	311.00	372.75	83
48	15.48	35.33	68.40	101.48	134.55	200.70	266.85	333.00	399.15	84
49	16.47	37.80	73.35	108.90	144.45	215.55	286.65	357.75	428.85	85
50	17.68	40.83	79.40	117.98	156.55					86
51	19.11	44.40	86.55	128.70	170.85					87
52 53	20.87 22.63	48.80 53.20	95.35 104.15	141.90 155.10	188.45 206.05					<u> </u>
55 54	22.03 23.84	55.20 56.23	110.20	155.10 164.18	200.05 218.15					90 90
55	24.94	58.98	115.70	172.43	229.15					91
56	26.04	61.73	121.20	180.68	240.15					91
57	27.25	64.75	127.25	189.75	252.25					91
58	28.57	68.05	133.85	199.65	265.45					91
$\frac{59}{60}$	$29.78 \\ 30.63$	$71.08 \\ 73.20$	$139.90 \\ 144.15$	208.73 215.10	277.55 286.05					91 91
61	32.28	77.33	144.13 152.40	213.10 227.48	302.55					91
62	34.04	81.73	161.20	240.68	320.15					92
63	35.91	86.40	170.55	254.70	338.85					92
64	37.89	91.35	180.45	269.55	358.65					92
65 66	39.98 49.90	96.58	190.90	285.23	379.55					92
$\begin{array}{c} 66 \\ 67 \end{array}$	$42.29 \\ 44.82$									92 92
67 68	44.82 47.57			ļ						92
69	50.43									93
70	53.29									93
				-			-			premiums. After the
Guarant	eed Period, t	he premiums	can be lowe	r, the same,	or higher tha	n the Table I	Premium. Se	e the brochu	re under "Pe	rmanent Coverage".

# PureLife-plus — Standard Risk Table Premiums — Tobacco — Express Issue

										GUARANTEED
		Monthly	y Premiu	ms for Li	ife Insura	nce Face	Amount	s Shown		PERIOD
		-		Includ	les Added C	lost for				Age to Which
Issue			A	ccidental De	eath Benefi	t (Ages 17-	59)			Coverage is
Age		ar		ited Death I			<i>,</i>	rog		Guaranteed at
(ALB)	\$10.000	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000	\$250,000	\$300.000	Table Premium
(ALB) 15D-1	\$10,000	\$25,000	\$50,000	\$15,000	\$100,000	\$150,000	\$200,000	\$250,000	\$300,000	83
2-3										83
4-10										79
11-16										75
17-20		16.08	29.90	43.73	57.55	85.20	112.85	140.50	168.15	70 70
21-22 23-25		16.63 17.45	31.00 32.65	45.38 47.85	59.75 63.05	88.50 93.45	117.25 123.85	146.00 154.25	174.75 184.65	70 69
23-25 26		$17.45 \\ 17.73$	32.03 33.20	47.85 48.68	63.05 64.15	95.45 95.10	125.85 126.05	154.25 157.00	184.05 187.95	69 69
20 27		18.00	33.75	49.50	65.25	96.75	128.25	159.75	191.25	68
28		18.28	34.30	50.33	66.35	98.40	130.45	162.50	194.55	68
29		18.55	34.85	51.15	67.45	100.05	132.65	165.25	197.85	68
30-31		20.75	39.25	57.75	76.25	113.25	150.25	187.25	224.25	69
32		21.30	40.35	59.40	78.45	116.55	154.65	192.75	230.85	69 60
33 34		$21.58 \\ 21.85$	$40.90 \\ 41.45$	60.23 61.05	$79.55 \\ 80.65$	$118.20 \\ 119.85$	$156.85 \\ 159.05$	$195.50 \\ 198.25$	234.15 237.45	69 68
34 35		21.85	41.45	65.18	86.15	119.85	170.05	212.00	257.45	69
36		24.05	45.85	67.65	89.45	133.05	176.65	220.25	263.85	69
37		25.43	48.60	71.78	94.95	141.30	187.65	234.00	280.35	70
38		26.25	50.25	74.25	98.25	146.25	194.25	242.25	290.25	70
39		27.90	53.55	79.20	104.85	156.15	207.45	258.75	310.05	70
40	13.50	30.38	58.50	86.63	114.75	171.00	227.25	283.50	339.75	72
41 42	$14.27 \\ 15.26$	$32.30 \\ 34.78$	$62.35 \\ 67.30$	92.40 99.83	$122.45 \\ 132.35$	182.55 197.40	242.65 262.45	302.75 327.50	$362.85 \\ 392.55$	73 74
42 43	15.20 16.80	34.78 38.63	75.00	99.83 111.38	132.35 147.75	197.40 220.50	202.43 293.25	327.50 366.00	438.75	74 76
44	17.68	40.83	79.40	117.98	156.55	233.70	310.85	388.00	465.15	77
45	18.89	43.85	85.45	127.05	168.65	251.85	335.05	418.25	501.45	78
46	19.99	46.60	90.95	135.30	179.65	268.35	357.05	445.75	534.45	79
47	21.09	49.35	96.45	143.55	190.65	284.85	379.05	473.25	567.45	79
48	22.19	52.10	101.95	151.80	201.65	301.35	401.05	500.75	600.45	80
49 50	23.95 25.16	56.50 59.53	110.75 116.80	165.00 174.08	219.25 231.35	327.75	436.25	544.75	653.25	82 82
$\frac{50}{51}$	25.10 27.03	64.20	110.80 126.15	174.08 188.10	251.55 250.05					83
52	29.34	69.98	137.70	205.43	273.15					85
53	31.21	74.65	147.05	219.45	291.85					87
54	32.75	78.50	154.75	231.00	307.25					87
55 50	34.29	82.35	162.45	242.55	322.65					87
56 57	36.05 37.70	$86.75 \\ 90.88$	$171.25 \\ 179.50$	255.75 268.13	$340.25 \\ 356.75$					87 87
57 58	$37.70 \\ 39.68$	90.88 95.83	179.50 189.40	268.13 282.98	356.75 376.55					87 87
59	41.33	99.95	197.65	295.35	393.05					87
60	42.51	102.90	203.55	304.20	404.85					87
61	45.37	110.05	217.85	325.65	433.45					88
62	48.01	116.65	231.05	345.45	459.85					88
63 64	50.54 52.07	122.98	243.70 256.25	364.43	485.15					88
64 65	53.07 55.71	129.30 135.90	256.35 269.55	383.40 403.20	510.45 536.85					<u>89</u> 89
66	55.71 58.57	199.90	203.00	400.20	000.00					89 89
67	61.65									89
68	64.84									89
69	68.25									89
70	71.88									90

# TEXASLIFE INSURANCE EMPLOYEE MONTHLY PREMIUMS

#### PureLife-plus — Standard Risk Table Premiums — Non-Tobacco — Express Issue GUARANTEED Life Insurance Face Amounts for Monthly Premiums Shown PERIOD Prem Includes Added Cost for Age to Which Accidental Death Benefit (Ages 17-59) For Coverage is Issue \$10,000 and Accelerated Death Benefit for Chronic Illness (All Ages) Age Guaranteed at (ALB) \$18.00 \$20.00 \$24.00 \$28.00 \$30.00 \$32.00 \$35.00 \$40.00 Table Premium Face 15D-1 83 2-383 4-10 797511 - 1675,820 17-2043,033 48,498 59,427 70,356 81,289 89,480 103,143 7373,608 78,913 21 - 2241,778 47,083 57,687 68,313 86,870 100,133 7371,52197,304 7123 - 2540,58945,748 56,057 66.366 76.676 84,411 44,487 69.549 74.56394,612 722639,474 54,51264.53782,081 722738,417 43,293 53,050 62,813 67,684 72,561 79,879 92,074 67,684 712838,417 43,293 53,05062,813 72,56179,879 92,074 2937,411 42,162 61,164 65,920 70,666 77,791 89,668 7151,66359,607 64.234 68,866 87.385 30 - 3136.453 41.088 50.34875.811 7039.097 56,71965,52970 32 34,691 47.908 61.12472,137 83,150 58.29937,292 54,097 7133 33,089 45,694 62.50068,803 79,307 55,723 31,627 35,645 43,67551,707 59,739 65,76475,804 723435 33.428 40.961 48,494 52,26056.02761.677 71.093 73 29,66236 28,482 32,098 39.331 46,56550.18153,803 59,220 68.265 7337 27.392 30.870 37.827 44.78348.261 51.74056.95765.656 7338 29,19545,642 62,089 74 25,90735,77442,35248,93153,8643924,15727,22133,359 39,49442,56345,62950,23157,899 7540 9.2122,630 25,50331.25036,998 39,871 42,74547.055 54,239 7641 9.76 20.97323,636 28.95934,288 36.951 39,614 43.609 50,267 77 4210.5319,023 21,43726.26931,10033,51535.93439,55445,5927811.3024,034 28,45436,188 41,713 80 4317,404 19,61430,663 32,873 44 12.07 16,039 18,076 22,149 26,222 28,259 30,299 33,351 38,442 81 24,062 4512.9514,720 16,58920.327 25,93827,806 30,608 35,281824613.8313,602 15,32918,78322,237 23,96425,68828,282 32,600 83 4714.6012,754 14,373 17,612 20,851 22,470 24,090 $2\overline{6,520}$ 30,566 83 48 15.4811,905 13,41716,438 19,46420,976 22,48724.75528,53684 4916.4711,076 12,483 15,29618,109 19,51520,923 23,03126,5488510,206 11,504 14,096 19,282 86 5017.6816,687 17,985 21,225 24,466 5119.11 10,52812,901 15,27316,460 17.646 19,42522,391 87 5220.8711,683 13,830 14.90515,97817,58920,27588 $12,\!635$ 5322.63 10,67390 13,617 14,598 16,070 18,524 10,075 5423.8411,929 12,854 13,78115,17017,48590 5524.9411,349 12,231 13,112 14,435 16,638 91 56 26.0410,824 11,665 12,50613,76715.86891 10,300 11,100 11,900 13,100 91 5727.2515,10058 28.5710,544 11,304 12,441 14,342 91 5929.78 10,080 10,807 11,897 13,71391 60 30.6311,540 13,302 91 10,48332.28 10,906 91 61 12,57162 34.04 10,302 11,875 92 63 11,216 9235.91926437.89 10,59365 39.98 10,006 92 66 42.29 92 67 44.82 92 92 68 47.5769 50.43937053.2993 PureLife-plus is permanent life insurance to Attained Age 121 that can never be cancelled as long as you pay the necessary premiums. After the Guaranteed Period, the premiums can be lower, the same, or higher than the Table Premium. See the brochure under "Permanent Coverage".

# TEXASLIFE INSURANCE EMPLOYEE MONTHLY PREMIUMS

										GUARANTEED
		Lif	e Insurai	nce Face	Amounts	for Month	nly Premi	ums Sho	wn	PERIOD
	Prem			]	Includes Ad	ded Cost for	r			Age to Which
Issue	For			Accider	ntal Death I	Benefit (Age	s 17-59)			Coverage is
Age	\$10,000		and Ac			t for Chroni	,	ll Ages)		Guaranteed at
(ALB)	Face	\$26.00	\$28.00	\$30.00	\$35.00	\$40.00	\$45.00	\$50.00	\$55.00	Table Premium
15D-1		+=0100	+-0100	+++++++++++++++++++++++++++++++++++++++	+00000		+	+++++++		83
2-3										83
4-10										79
11-16 17-20		49.041	46,565	50,181	59,220	69 965	77,313	86,348	95,389	75 70
17-20 21-22		42,941 41,305	40,505 44,783	50,181 48,261	59,220 56,957	$68,265 \\ 65,656$	77,313 74,344	80,348 83,044	95,389 91,740	70 70
23-25		39,063	42,352	45,642	53,864	62,089	70,313	78,537	86,761	69
26		38,369	41,600	44,826	52,909	60,986	69,064	77,141	85,214	69
27		$37,\!699$	40,874	44,050	51,985	59,921	67,858	75,794	83,729	68
28		37,052	40,172	43,292	51,088	58,893	66,693	74,493	82,294	68
29		36,433	39,494	42,563	50,231	57,899	65,567	73,237	80,905	68
30-31		32,091	34,798	37,501	44,257	51,014	57,771	64,528	71,284	69
32 33		$31,170 \\ 30,722$	$33,793 \\ 33,312$	36,418 35,900	42,980 42,368	$49,541 \\ 48,833$	$56,103 \\ 55,310$	$62,665 \\ 61,773$	$69,226 \\ 68,241$	69 69
33 34		30,722 30,294	33,312 32,845	35,900 35,396	42,508 41,774	48,833 48,151	55,310 54,529	61,773 60,906	68,241 67,284	69 68
35		28,312	30,688	33,076	39,037	44,995	50,949	56,913	62,873	69
36		27,237	29,530	31,824	37,562	43,292	49,026	54,760	60,493	69
37		$25,\!621$	27,778	29,936	35,330	40,720	46,117	$51,\!511$	56,904	70
38		24,740	26,818	28,907	34,115	39,318	44,532	49,740	54,943	70
39		23,149	25,098	27,047	31,921	36,797	41,669	46,541	51,414	70
40	13.50	21,110	22,890	24,669	29,110	33,556	38,001	42,445	46,890	72
41 42	$14.27 \\ 15.26$	19,759 18,256	21,423 19,793	23,087 21,328	27,247 25,176	31,407 29,017	$35,563 \\ 32,860$	$39,726 \\ 36,703$	43,886 40,546	73 74
42 43	16.80	16,230 16,323	15,755 17,698	19,073	23,170 22,509	25,017 25,946	29,382	32,818	36,255	74
44	17.68	15,393	16,687	17,985	21,225	24,466	27,706	30,943	34,187	77
45	18.89	14,273	15,475	16,678	19,685	22,687	25,690	28,696	31,701	78
46	19.99	13,388	14,516	15,643	18,462	21,280	24,099	26,917	29,736	79
47	21.09	12,606	13,668	14,728	17,384	20,038	22,692	25,344	27,999	79
48	22.19	11,911	12,914	13,917	16,425	18,934	21,439	23,945	26,455	80
49 50	23.95	10,944	11,867	12,789	15,092	17,397	19,701	22,005	24,309	82 82
$\frac{50}{51}$	$25.16 \\ 27.03$	10,367	$11,240 \\ 10,392$	$12,113 \\ 11,199$	14,297 13,217	16,478 15,235	$18,660 \\ 17,252$	20,843 19,270	23,025 21,288	82 83
51 52	29.34		10,002	10,244	12,089	13,936	15,781	17,627	19,473	85
53	31.21				11,309	13,036	14,762	16,489	18,215	87
54	32.75				10,738	12,378	14,017	$15,\!656$	17,296	87
55	34.29				10,222	11,783	13,343	14,904	16,463	87
56	36.05					11,169	12,649	14,128	15,607	87
57 58	$37.70 \\ 39.68$					$10,650 \\ 10,085$	$12,060 \\ 11,422$	13,470 12,758	$14,880 \\ 14,093$	87 87
58 59	39.68 41.33					10,080	11,422 10,938	12,758 12,219	14,093 13,498	87
59 60	41.55 42.51						10,358 10,618	12,213	13,498 13,102	87
61	45.37						, -	11,074	12,233	88
62	48.01							10,435	11,527	88
63	50.54								10,923	88
64	53.07								10,379	89
65 66	55.71 58.57									89 80
$\frac{66}{67}$	$58.57 \\ 61.65$									89 89
68	64.84									89
69	68.25									89
70	71.88									90

# PureLife-plus — Standard Risk Table Premiums — Tobacco — Express Issue

# PureLife-plus — Standard Risk Table Premiums — Non-Tobacco — Express Issue

										GUARANTEED
		Monthly	y Premiu	ms for Li	ife Insura	nce Face	Amount	s Shown		PERIOD
				Includ	les Added (	Cost for				Age to Which
Issue			Ad	ccidental D	eath Benefi	t (Ages 17-	59)			Coverage is
Age										Guaranteed at
(ALB)	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000	Table Premium
15D-1	,	,	,	8.00	,	,		,	13.75	83
2-3				8.25					14.25	83
4-10				8.50					14.75	79
11-16				8.75	10.45	14.17		17 55	15.25	75
17-20 21-22				$10.75 \\ 11.00$	$12.45 \\ 12.75$	$14.15 \\ 14.50$	$15.85 \\ 16.25$	$17.55 \\ 18.00$	$19.25 \\ 19.75$	73 73
23-25				11.00	13.05	14.85	16.65	18.45	20.25	71
26				11.50	13.35	15.20	17.05	18.90	20.20 20.75	72
27				11.75	13.65	15.55	17.45	19.35	21.25	72
28				11.75	13.65	15.55	17.45	19.35	21.25	71
29				12.00	13.95	15.90	17.85	19.80	21.75	71
30-31				12.25	14.25	16.25	18.25	20.25	22.25	70
32				12.75	14.85	16.95	19.05	21.15	23.25	70 71
33 34				$13.25 \\ 13.75$	$\begin{array}{r}15.45\\16.05\end{array}$	$17.65 \\ 18.35$	$19.85 \\ 20.65$	22.05 22.95	24.25 25.25	71 72
34 35		9.60	12.05	13.75	16.95	19.40	20.05	22.95	26.75	73
36		9.90	12.05 12.45	15.00	17.55	20.10	22.65	24.30 25.20	20.75 27.75	73
37		10.20	12.85	15.50	18.15	20.80	23.45	26.10	28.75	73
38		10.65	13.45	16.25	19.05	21.85	24.65	27.45	30.25	74
39		11.25	14.25	17.25	20.25	23.25	26.25	29.25	32.25	75
40	8.65	11.85	15.05	18.25	21.45	24.65	27.85	31.05	34.25	76
41	9.15	12.60	16.05	19.50	22.95	26.40	29.85	33.30	36.75	77
42	9.85	13.65	17.45	21.25	$25.05 \\ 27.15$	28.85 21.20	32.65	36.45	40.25	78 80
43 44	10.55 11.25	14.70 15.75	$\frac{18.85}{20.25}$	23.00 24.75	27.15	31.30 33.75	35.45 38.25	39.60 42.75	43.75 47.25	80 81
45	12.05	16.95	20.25 21.85	24.15	31.65	36.55	41.45	46.35	51.25	82
46	12.85	18.15	23.45	28.75	34.05	39.35	44.65	49.95	55.25	83
47	13.55	19.20	24.85	30.50	36.15	41.80	47.45	53.10	58.75	83
48	14.35	20.40	26.45	32.50	38.55	44.60	50.65	56.70	62.75	84
49	15.25	21.75	28.25	34.75	41.25	47.75	54.25	60.75	67.25	85
50	16.35	23.40	30.45	37.50						86
51 52	$17.65 \\ 19.25$	$25.35 \\ 27.75$	$33.05 \\ 36.25$	40.75 $44.75$						87 88
53	20.85	30.15	39.45	44.75						90
$53 \\ 54$	20.85 21.95	31.80	41.65	51.50						90 90
55	22.95	33.30	43.65	54.00						91
56	23.95	34.80	45.65	56.50						91
57	25.05	36.45	47.85	59.25						91
58	26.25	38.25	50.25	62.25						91
59 60	27.35	39.90 40-05	52.45	65.00						91
60 61	28.05	40.95	53.85	66.75						91 91
62 61										91 92
63	-									92
64										92
65										92
66										92
67				ļ						92
68 60										92 02
69 70										93 93
	plue is porr	anont life inc	urance to A	tained Age	191 that as n	nover be eer	collod og long	as vou par 4	ho nococco	premiums. After the
									•	rmanent Coverage".
Guaranti	oou i ciiou, ti	ic promuins	Can be lowe	, one same,	or monor the	ar one rable l	i i cini uni. 56	e ine broenur	c under i el	monente coverage .

PureLife-plus — Standard Risk Table Premiums — Tobacco — Express Issue

#### **GUARANTEED** Monthly Premiums for Life Insurance Face Amounts Shown PERIOD Includes Added Cost for Age to Which Accidental Death Benefit (Ages 17-59) Coverage is Issue Age Guaranteed at \$10,000 \$15,000 \$20,000 \$25,000 \$30,000 \$35,000 \$40,000 \$45,000 \$50,000 Table Premium (ALB) 15D-1 83 2-383 4-10 797511-16 17-2015.0017.5520.1022.6525.2027.757021 - 2215.5018.1520.8023.4526.1028.757023 - 2516.2519.0521.8524.6527.4530.2569 22.20 27.9030.7569 2616.5019.3525.0522.5528.352716.7519.6525.4531.2568 31.7568 2817.0019.9522.9025.8528.802920.2523.2526.2529.2532.2568 17.2522.6526.0529.4532.85 36.2530 - 3119.2569 23.2526.7530.25 69 32 19.7533.7537.2523.5527.1069 33 20.0030.6534.2037.7523.8527.4520.2531.0534.6538.2568 3435 13.8017.6521.5025.3529.20 33.05 36.9040.7569 36 14.2518.2522.2526.2530.2534.2538.2542.2569 37 15.0019.2523.5027.7532.0036.2540.5044.757041.85 28.6533.05 38 15.4519.8524.2537.4546.25703916.3521.0525.7530.4535.1539.8544.5549.257040 12.5517.7022.8528.0033.1538.3043.4548.6053.757241 13.2518.7524.2529.7535.2540.7546.2551.7557.257332.004214.1520.1026.0537.95 43.9049.8555.8061.757422.2028.8535.50 42.15764315.5548.8055.4562.1068.7544 16.3523.40 30.4537.5044.5551.6058.6565.7072.75 77 4517.4525.0532.6540.25 47.8555.4563.0570.6578.25784618.4526.5534.65 42.7550.8558.9567.0575.1583.257947 19.4528.0536.65 45.2553.8562.4571.05 79.65 88.2579 48 20.4529.5538.6547.7556.8565.9575.0584.15 93.2580 4922.0531.9541.8551.7561.6571.5581.45 91.35101.258223.1544.05 54.5082 5033.60 5124.8536.1547.4558.7583 5226.9539.30 51.65 64.00 85 53 28.6541.85 68.25 87 55.0543.95 5430.0557.8571.7587 5531.4546.05 60.6575.2587 56 33.05 48.4563.85 79.25 87 50.7066.85 87 5734.5583.00 58 36.3553.4070.4587.50 87 5937.8555.6573.4591.25 87 87 60 38.8557.1575.4593.7561 88 62 88 63 88 64 89 89 65 66 89 67 89 89 68 69 89 7090 PureLife-plus is permanent life insurance to Attained Age 121 that can never be cancelled as long as you pay the necessary premiums. After the Guaranteed Period, the premiums can be lower, the same, or higher than the Table Premium. See the brochure under "Permanent Coverage".

# PureLife-plus — Standard Risk Table Premiums — Non-Tobacco — Express Issue

										GUARANTEE
		Lif	e Insurai	nce Face	Amounts	for Mont	hly Prem	iums Sho	wn	PERIOD
	Prem			]	Includes Ad	lded Cost fo	or			Age to Which
Issue	For					Benefit (Age				Coverage is
				neeraer	Itai Death I	Jenenit (Alge	.5 11-00)			0
Age	\$10,000 East	¢10.00	¢00.00	¢94.00	¢00.00	¢20.00	¢20.00	¢25.00	¢40.00	Guaranteed at Table Drawier
ALB) 15D-1	Face	\$18.00	\$20.00	\$24.00	\$28.00	\$30.00	\$32.00	\$35.00	\$40.00	Table Premiur 83
2-3										83
4-10										79
11-16										75
17-20		46,324								73
21-22		45,000								73
23-25		43,750	49,306							71
26 27		42,568	47,973 46 711							72 72
27		41,448 41,448	46,711 46,711							72
20 29		40,385	45,513							71
20 30-31		39,375	40,915 44,375							70
32		37,500	42,262							70
33		35,796	40,341	49,432						71
34		34,240	38,587	47,283						72
35		32,143	36,225	44,388						73
36		30,883	34,804	42,648						73
37		29,717	33,491	41,038	48,585	10 55 1				73
38 20		28,125	31,697	38,840	45,983	49,554	10 501			74
39 40	8.65	$26,250 \\ 24,610$	29,584 27,735	$36,250 \\ 33,985$	42,917 40,235	$46,250 \\ 43,360$	$49,584 \\ 46,485$			75 76
40	9.15	22,827	25,725	31,522	37,319	40,218	43,116	47,464		77
42	9.85	20,724	23,356	28,619	33,882	36,514	39,145	43,093	49,672	78
43	10.55	18,976	21,386	26,205	31,025	33,434	35,844	39,458	45,482	80
44	11.25	17,500	19,723	24,167	28,612	30,834	33,056	36,389	41,945	81
45	12.05	16,072	18,113	22,194	26,276	28,316	30,358	33,419	38,521	82
46	12.85	14,859	16,746	20,519	24,293	26,180	28,066	30,897	$35,\!614$	83
47	13.55	$13,\!938$	15,708	19,248	22,788	24,558	26,328	28,983	33,408	83
48	14.35	13,017	14,670	17,976	21,281	22,934	24,587	27,066	31,199	84
49	15.25	12,116	13,654	16,731	19,808	21,347	22,885	25,192	29,039	85
$50 \\ 51$	$16.35 \\ 17.65$	$11,171 \\ 10,228$	$12,589 \\ 11,526$	$15,426 \\ 14,124$	$18,263 \\ 16,721$	$19,681 \\ 18,020$	21,100 19,318	23,227 21,267	24,513	86 87
51 52	19.25	10,220	10,438	12,795	15,148	16,324	15,510 17,500	19,265	24,313 22,206	88
53	20.85			11,693	13,845	14,920	15,995	17,608	20,296	90
54	21.95			11,041	13,071	14,087	15,102	16,625	19,163	90
55	22.95			10,508	12,439	13,406	14,372	15,821	18,237	91
56	23.95			10,024	11,867	12,789	13,710	15,093	$17,\!397$	91
57	25.05				11,294	12,172	13,049	14,365	16,558	91
58	26.25	· ·			10,730	11,563	12,396	13,646	15,730	91
59 60	$27.35 \\ 28.05$				10,259	$11,056 \\ 10,756$	11,853 11,532	13,048 12.694	15,040 14,632	91 01
60 61	20.00					10,700	11,032	12,694	14,632	91 91
62										92
63	-									92
64										92
65										92
66										92
67										92
68										92
69 70										93
70			surance to At							93

			•							GUARANTEEI
		Lif	e Insura	nce Face	Amounts	for Month	ılv Premi	iums Sho	wn	PERIOD
	Prem					ded Cost for	•			Age to Which
T						Benefit (Age				
Issue	For			Accider	itai Death r	benent (Age	s 17-59)			Coverage is
Age	\$10,000	<b>*</b>	<b>A</b>	<b>A</b>	<b></b>	<b>*</b> • • • • •	<b></b>	<b>*</b>	<b>A</b>	Guaranteed at
(ALB)	Face	\$26.00	\$28.00	\$30.00	\$35.00	\$40.00	\$45.00	\$50.00	\$55.00	Table Premium
15D-1 2-3										83 83
4-10										79
11-16										75
17-20		46,569								70
21-22		44,812	48,585							70
23-25		42,411	45,983	49,554						69
26 27		41,667	45,176 44,397	48,685						69 68
27 28		40,949 40,255	44,397 43,645	47,845 47,034						68 68
20 29		39,584	43,045 42,917	46,250						68
30-31		34,927	37,868	40,809	48,162					69
32		33,929	36,786	39,643	46,786					69
33		33,451	36,268	39,085	46,127					69
34		32,987	35,764	38,542	45,487					68
35		30,845	33,442	36,039	42,533	49,026				69
$\frac{36}{37}$		29,688	32,188	34,688	40,938	47,188				69 70
37		27,941 26,989	30,295 29,262	32,648 31,535	38,530 37,216	44,412 42,898	48,580			70 70
39		20,989 25,266	25,202 27,394	29,522	34,841	42,838	43,330 45,479			70
40	12.55	23,059	25,001	26,942	31,797	36,651	41,505	46,360		72
41	13.25	21,591	23,410	25,228	29,773	34,318	38,864	43,410	47,955	73
42	14.15	19,958	21,639	$23,\!319$	27,522	31,723	35,925	40,127	44,328	74
43	15.55	17,858	19,361	20,865	24,625	28,384	32,143	35,903	$39,\!662$	76
44	16.35	16,844	18,263	19,681	23,227	26,774	30,319	33,866	37,412	77
45 46	17.45	15,625	16,940	18,257	21,547	24,836	28,125	31,415	34,704	78
46 47	18.45 19.45	14,661 13,809	15,896 14,971	17,130 16,134	20,217 19,041	23,303 21,948	26,389 24,855	29,476 27,762	32,562 30,669	79 79
47	19.45 20.45	13,809 13,050	14,971 14,149	10,134 15,248	19,041 17,995	21,948 20,742	24,855 23,490	21,702 26,237	28,984	79 80
49	22.05	11,995	13.006	14,016	16,541	19,065	21,591	24,117	26,642	82
50	23.15	11,364	12,320	13,278	15,670	18,063	20,455	22,847	,	82
51	24.85	10,509	11,394	12,279	14,492	16,704	18,916	21,129	23,341	83
52	26.95		10,426	11,235	13,260	15,284	17,308	19,332	$21,\!357$	85
53	28.65			10,512	12,406	14,300	16,193	18,087	19,982	87
54	30.05				11,781	13,579	15,378	17,177	18,975	87
55 56	31.45 33.05				11,216 10,634	12,929 12,257	14,641 13,880	16,353 15,504	18,065 17,127	87 87
$50 \\ 57$	33.05 34.55				10,034 10,140	12,257 11,688	13,880 13,236	15,504 14,784	17,127 16,331	87 87
58	36.35	-				11,000	12,537	14,003	15,469	87
59	37.85					10,604	12,009	13,413	14,817	87
60	38.85					10,315	$11,\!681$	$13,\!047$	$14,\!413$	87
61										88
62										88
63 64										88
64 65										<u>89</u> 89
66										89 89
67										89
68										89
69										89
70										90

# PureLife-plus – Standard Risk Table Premiums – Tobacco – Express Issue

Beneficiary (Employee is beneficiary unless otherwise stated here)

nce 1901   900 WASHINGTON   POST OFFICE BOX 83C		3-0830			FOR HOMI Plan Name:			
1st Deduction Date:	Employ	ver:			Policy Numb	-		
Proposed Insured(s)	Sex	Birth Date	$Age^1$	Within the past has the Propos age 17 or old tobacco in a	12 months ed Insured der used	Face Amount <sup>2</sup>	Premium	
Employee Name								
Last	M/F			🗆 Yes 🛛	] No			
First	ЛІ							
Social Sec No								
Hire Date								
Beneficiary (Spouse is beneficiary u	inless otherwise	stated here)			Relatior	nship:		
Spouse Name								
Last	M/F			🗆 Yes 🛛	∃ No			
First	ЛІ							
Social Sec No								
Current Occupation								
Beneficiary (Employee is beneficiary	/ unless otherw	ise stated here)			Relatior	nship:		
Children's Names (not required i	f applying onl	y for Child Term	n Rider)					
	M/F			□ Yes [	] No			
Social Sec No								
Beneficiary (Employee is beneficiary	/ unless otherw	ise stated here)			Relatior	nship:		
	M/F			□ Yes □	] No			
Social Sec No								
Beneficiary (Employee is beneficiary	/ unless otherw	ise stated here)		1	Relatior	nship:	1	
	M/F			🗆 Yes 🛙	] No			
Social Sec No								
Beneficiary (Employee is beneficiary	/ unless otherw	ise stated here)		1	Relationship:			
	M/F			□ Yes □	∃ No			
Social Sec No								

Social Sec No	M/F			🗆 Yes 🛛	No		
Beneficiary (Employee is beneficiary unless	otherv	vise stated here)			Relatior	nship:	
Select Riders to be added:		,	Add C	hild Term Rider prem	nium, if app	blied for: \$	
Child Term for \$10,000 added to policy of:					Total pr	emium: \$	
□ Accidental Death <sup>3</sup> □ Waiver Premi	um <sup>3</sup>	🛛 Chronic III	ness				
Payroll is per:  Week Bi-Week Bi-Week	(	Semi-Month		I Month □ SI	kip		
Home Address							
Street/P.O. Box:			City	/:	State:	: Zip:	
Phone — Day: ( )	Eve	ning: ( )		Personal E-mai	Address:		
Will proposed coverage replace or change a	ny exis	sting insurance or a	nnuity	policy? (If "Yes", id	entify		
and complete replacement form.) Compa	ny:			Policy No:		🛛 Yes 🛛	∃ No
(1) Age as of Issue Date. (2) or Face Am	ount p	ourchased by premit	um shov	wn, if less. (3) For i	ssue ages 1	.7-59.	

# TEXASLIFE INSURANCE Since

Relationship:

1. During the last six months, has the proposed insured:			Employee	Spouse	Children			
			Yes No	Yes No	Yes No			
a. Been actively at work on a full time basis, performing usual duties? If "No" furnish details below.					N/A			
b. Been absent from work due to illness or medical treatment for a period of more than five consecutive working days? If "Yes" furnish details below.					N/A			
c. Been disabled or received tests, treatment or care of any kind in a hospital or nursing home or received chemotherapy, hormonal therapy for cancer, radiation therapy, dialysis treatment, or treatment for alcohol or drug abuse? If "Yes" furnish details below.								
QUES NO.	PROPOSED INSURED	DET	AILS					
REPRESENTATIONS: I represent to the best of my knowledge and belief that all statements and answers in this application are complete, true and correctly recorded, and are made as a consideration for the insurance applied for. I understand that Texas Life Insurance Company will rely on my statements and answers as being true and complete in deciding whether to issue insurance on the proposed insured(s). Insurance is effective under the policy only when it is delivered to the owner, if the full first premium is paid in cash and all of the statements in this application remain correct and complete.  Any person who knowingly presents a false statement in an application for insurance may be guilty of a criminal offense and subject to penalties under state law.								
X K X Spouse Signature (or Child over 18) if to be insured								
Agent only:To the best of my knowledge the insurance applied for $\Box$ is $\Box$ is not to replace existing insurance or annuity.X $\Box$								
Enroller/Agen	t Signature Print Enrolle	er/Agent Name Agt No. Date	Cit	у	State			

# TEXASLIFE INSURANCE COMPANY

### Applicant and Agent Statement on Existing Insurance

Does any Proposed Insured have existing insurance or annuities (*including coverage with Texas Life*)?  $\Box$  Yes  $\Box$  No If "Yes", complete the Existing Insurance Form <u>even if replacement is not</u> <u>contemplated</u>. "Existing Insurance" does not include group term policies paid entirely by the employer or any non-renewable term policy due to expire within 5 years.

Χ\_

Date

Χ\_\_\_\_\_

Enroller/Agent Signature

Applicant Signature

Print Enroller/Agent Name

Agt No.

### **Agent Certification**

### AGENT STATEMENT

I certify that I have: (a) delivered to the Applicant the Sales Brochure Series form 18M049-ICC EXP-K-M-3AD and the Privacy Notice; and, (b) presented only guaranteed policy benefits and costs. Below list any other sales material used, if any (include form no).

X \_\_\_\_\_ Enroller/Agent Signature

Date

Form: 04M006-RPLT R08-11

# TEXASLIFE INSURANCE EXISTING INSURANCE FORM

I do not want this notice read aloud to me. (Applicants must initial only if they do not want the notice read aloud.)

**Note**: The law requires we give you the option to have this notice read to you aloud. If an agent is not present, but you would like the notice read aloud, call your agent, or call the Home Office at 1-800-283-9233, extension 6814.

### Section I. Existing Insurance or Annuities

### Replacement of Life Insurance or Annuities Important Notice -- Four pages This document must be signed by the applicant and the producer and a copy left with the applicant

You are contemplating the purchase of a life insurance policy or annuity contract. In some cases this purchase may involve discontinuing or changing an existing policy or contract. If so, a replacement is occurring. Financed purchases are also considered replacements.

A replacement occurs when a new policy or contract is purchased and, in connection with the sale, you discontinue making premium payments on the existing policy or contract, or an existing policy or contract is surrendered, forfeited, assigned to the replacing insurer, or otherwise terminated or used in a financial purchase.

A financed purchase occurs when the purchase of a new life insurance policy involves the use of funds obtained by the withdrawal or surrender of or by borrowing some or all of the policy values, including accumulated dividends, of an existing policy, to pay all or part of any premium or payment due on the new policy. A financed purchase is a replacement.

You should carefully consider whether a replacement is in your best interests. You will pay acquisition costs and there may be surrender costs deducted from your policy or contract. You may be able to make changes to your existing policy or contract to meet your insurance needs at less cost. A financed purchase will reduce the value of your existing policy or contract and may reduce the amount paid upon the death of the insured.

We want you to understand the effects of replacements before you make your purchase decision and ask that you answer the following questions and consider the questions on the back of this form.

Yes No Are you considering discontinuing making premium payments, surrendering, forfeiting, assigning to the insurer, or otherwise terminating your existing policy or contract?
 Yes No Are you considering using funds from your existing policies or contracts to pay premiums due on the new policy or contracts?

### If you answered "No" to BOTH questions, skip Section II and complete Section III.

Form: 10M042

### Section II. Replacing Existing Insurance or Annuities

If you answered YES to either of the above questions, list each existing policy or contract you are contemplating replacing (include the name of the insurer, the insured, and the contract number if available) and whether each policy will be replaced or used as a source of financing:

	Insurer Name	Policy Number	Insured/Annuitant	Replaced (R) or Financed (F)
1				🗆 R 🗆 F
2				🗆 R 🗆 F
3				

Make sure you know the facts. Contact your existing company or its agent for information about the old policy or contract. [If you request one, an in force illustration, policy summary or available disclosure documents must be sent to you by the existing insurer.] Ask for and retain all sales material used by the agent in the sales presentation. Be sure that you are making an informed decision. The existing policy or contract is being replaced because:

### Section III. Signatures

I certify that the responses herein are, to the best of my knowledge, accurate:

Х\_\_\_\_\_

Applicant Signature and Printed Name

**Agent Statement.** I certify that in this solicitation of insurance I used only company-approved sales materials and, pursuant to Company policy and law, left with the applicant an original or copy of all sales material used in the solicitation.

Χ\_

Agent Signature and Printed Name

Date

Date

**Continued Next Page** 

A replacement may not be in your best interest, or your decision could be a good one. You should make a careful comparison of the costs and benefits of your existing policy or contract and the proposed policy or contract. One way to do this to ask the company or agent that sold you your existing policy or contract to provide you with information concerning your existing policy or contract. This may include an illustration of how your existing policy or contract is working now and how it would perform in the future based on certain assumptions. Illustrations should not, however, be used as a sole basis to compare policies or contracts. You should discuss the following with your agent to determine whether replacement or financing your purchase makes sense:

#### PREMIUMS

Are they affordable?

Could they change?

You're older-are premiums higher for the proposed new policy?

How long will you have to pay premiums on the new policy? On the old policy?

#### POLICY VALUES

New policies usually take longer to build cash values and to pay dividends.

Acquisition costs for the old policy may have been paid, you will incur costs for the new one.

What surrender charges do the policies have?

What expense and sales charge will you pay on the new policy?

Does the new policy provide more insurance coverage?

#### INSURABILITY

If your health has changed since you bought your old policy, the new one could cost you more, or you could be turned down.

You may need a medical exam for a new policy.

Claims on most new policies for up to the first two years can be denied based on inaccurate statements.

Suicide limitations may begin anew on the new coverage.

#### IF YOU ARE KEEPING THE OLD POLICY AS WELL AS THE NEW POLICY

How are premiums for both policies being paid?

How will the premiums on your existing policy be affected?

Will a loan be deducted from death benefits?

What values from the old policy are being used to pay premiums?

### IF YOU ARE SURRENDERING AN ANNUITY OR INTEREST-SENSITIVE LIFE PRODUCT

Will you pay surrender charges on your old contract?

What are the interest rate guarantees for the new contract?

Have you compared the contract charges or other policy expenses?

#### OTHER ISSUES TO CONSIDER FOR ALL REPLACEMENTS

What are the tax consequences of buying the new policy?

Is this a tax free exchange? (See your tax advisor.)

Is there a benefit from favorable grandfathered treatment of the old policy under the federal tax code?

Will the existing insurer be willing to modify the old policy?

How does the quality and financial stability of the new company compare to the present company?

## TEXASLIFE INSURANCE COMPANY

### **Privacy Notice - Two pages**

# Thank you for your interest in our products and services. We will review what you told us and may get further information if needed.

### READ THIS NOTICE CAREFULLY

It describes in broad terms how we learn about you and anyone else who is to be insured under the policy you applied for. It tells how we treat that information. If anyone else is to be insured under the policy you applied for, what we say here also applies to information about him or her. We are required by law to give you this notice.

### WHY WE NEED INFORMATION

We need to know about you (and anyone else to be insured) to provide the insurance and other products and services you've asked for. We may also need it to administer your business with us, evaluate claims, process transactions and run our business. And we need information from you and others to help us verify identities in order to prevent money laundering and terrorism.

We need to know your address, age and other basic information. But we may need more information, including finances, employment, health, hobbies or business conducted with us, or with other companies.

### HOW WE GET INFORMATION

What we know about you (and anyone else to be insured) we get mostly from you. But we may also have to find out more from others in order to make sure that what we know is correct and complete. This personal information may be collected from persons other than you, and may be disclosed in certain circumstances to third parties without your authorization. Other sources may include adult relatives, employers, consumer reporting agencies, health care providers and others. Some sources may give us reports and may disclose what they know to others. We may ask for medical information about you. The Authorization you signed when you applied for insurance permits these sources to tell us about you. So we may, for instance, at our expense:

- Ask for a medical exam Ask for blood and urine tests
- Ask health care providers to give us health data, including information about alcohol or drug abuse

This will help us decide eligibility for insurance from us and what we should charge for it. We may also ask a consumer reporting agency for a "consumer report" about you (or anyone else to be insured). Consumer reports may tell us about a lot of things, like:

- Work and work history- Mode of living- Finances- Reputation- Dangerous sports activity- Driving record

If we ask an agency for an "investigative" report about you - which means that they will ask others about you - we will ask them to contact you as well. The information may be kept by the consumer reporting agency and given to others as permitted by law. The agency will give you a copy of the report it provides to us, if you ask the agency and can provide adequate identification. If you write to us, we will tell you if we have asked for a consumer report about you, and give you the name, address and phone number of the consumer reporting agency.

MIB, Inc. ("MIB") is a commonly used source of information. It is a not-for-profit association of life insurance companies. We and our reinsurers may give MIB health or other information about you. If you apply for life or health coverage from a member of MIB, or claim benefits from a member company, MIB may give that company any information it has about you. If you contact MIB, it will tell you what it knows about you. You have the right to ask MIB to correct its information about you. You may write to MIB, Inc., 50 Braintree Hill Park, Suite 400,Braintree, MA 02184-8734, call MIB at (866) 692-6901 or contact MIB at www.mib.com.

Form: 09P012 R 08/18

#### HOW WE PROTECT WHAT WE KNOW

Because you entrust us with your personal information, we treat what we know about you confidentially. We tell our employees to carefully handle your information. They may get your information only with a good reason. We take steps to secure our computer databases and safeguard the information we have.

### HOW WE USE AND DISCLOSE WHAT WE KNOW ABOUT YOU

We may use what we know about you to help us serve you better. We may use it, and disclose it to our affiliates and others, for any purpose allowed by law; for example, to:

- Help us evaluate your request for a product Process information for us Perform research for us
- Help us run our business Help us comply with the law Audit our business
- Confirm or correct what we know about you Help us prevent fraud and other crimes
- Help us process claims and other transactions

When we disclose information to others to perform business services for us, they must take appropriate steps to protect this information. And they may use the information only for the purposes of performing those business services.

Other reasons we may disclose what we know about you include:

- Doing what a court or government agency requires us to do; for example, complying with a search warrant or subpoena
- Telling another company what we know about you, if we are or may be selling all or any part of our business or merging with another company
- Giving information to the government so that it can decide whether you may get government-paid benefits
- Telling your health care provider about a medical problem that you have but may not be aware of
- Giving your information to a peer review organization if you have health insurance with us
- Giving your information to someone who has a legal interest in your insurance, such as someone who lent you money and holds a lien on your policy

Generally, we will disclose only the information we consider reasonably necessary to disclose and no more. We may use what we know about you in order to offer you our other products and services.

### YOU CAN SEE AND CORRECT YOUR INFORMATION

Generally, we will let you review what we know about you if you ask us in writing. (Because of its legal sensitivity, we will not show you anything that we learned in connection with a claim or lawsuit.) Also, if the law allows us to do so, we may decide to disclose what we know about your health only through your health care provider. If you

tell us that what we know about you is incorrect, we will review it. If we agree with you, we will correct our records. If we do not agree with you, you may tell us in writing, and we will include your statement when we give your information to anyone outside our company or affiliate.

### YOU CAN GET OTHER MATERIAL FROM US

In addition to any other privacy notice we may give you, we must give you a summary of our privacy policy once each year. You may have other rights under the law. If you want to know more about our privacy policy, please contact us at our website, www.texaslife.com, or write to us, c/o Texas Life Privacy Officer, PO Box 830, Waco, Texas 76703. This page intentionally left blank

Form: 18M049-ICC EXP-K-M-3AD

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Form: 18M049-ICC EXP-K-M-3AD

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