

PURELIFE-PLUS_

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** For the eligible employees of Denver City ISD

Marketed by



Application for Life Insurance

Express Issue | Monthly Pay

FOR USE ONLY IN Colorado

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 2.00% 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.

18P061 PLP18 CI

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:

| Expr | ESS ISSUE AMOUNTS OF COVERAGE | Available on Spouse |
|------------|-------------------------------|---------------------|
| Spouse's | Minimum | Maximum |
| lssue 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

| $\text{Issue Age} \longrightarrow$ | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 |
|------------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Highest Load | 0.2417 | 0.2425 | 0.2517 | 0.2517 | 0.2525 | 0.2617 | 0.2617 | 0.2617 | 0.2617 | 0.2700 | 0.2692 | 0.2767 | 0.2725 | 0.2659 | 0.2559 |
| Lowest Load | 0.1117 | 0.1075 | 0.0750 | 0.0825 | 0.0900 | 0.0625 | 0.0717 | 0.0825 | 0.0950 | 0.0734 | 0.0934 | 0.0825 | 0.1184 | 0.1659 | 0.2225 |
| Zero After Year | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 |
| | | | | | | | | | | | | | | | |
| Issue Age \longrightarrow | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 |
| Highest Load | 0.2459 | 0.2334 | 0.2284 | 0.2267 | 0.2275 | 0.2275 | 0.2375 | 0.2450 | 0.2584 | 0.2684 | 0.2700 | 0.2884 | 0.2984 | 0.2984 | 0.3075 |
| Lowest Load | 0.0434 | 0.0884 | 0.1200 | 0.1375 | 0.1534 | 0.1675 | 0.1392 | 0.1442 | 0.1017 | 0.0600 | 0.0625 | 0.2717 | 0.2542 | 0.2767 | 0.2675 |
| Zero After Year | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 5 | 5 | 5 | 5 |
| | | | | | | | | | | | | | | | |
| Issue Age \longrightarrow | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 |
| Highest Load | 0.3134 | 0.3100 | 0.3309 | 0.3409 | 0.3575 | 0.3842 | 0.3900 | 0.4084 | 0.4292 | 0.4700 | 0.5084 | 0.5650 | 0.6300 | 0.6892 | 0.7475 |
| Lowest Load | 0.2675 | 0.0175 | 0.2650 | 0.2575 | 0.2225 | 0.1492 | 0.1492 | 0.1025 | 0.0575 | 0.4134 | 0.3359 | 0.2075 | 0.0542 | 0.6325 | 0.5659 |
| Zero After Year | 5 | 6 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 4 | 4 | 4 | 4 | 3 | 3 |
| | | | | | | | | | | | | | | | |
| Issue Age \longrightarrow | 45 | 46 | 47 | 48 | 49 | 50 | 51 | 52 | 53 | 54 | 55 | 56 | 57 | 58 | 59 |
| Highest Load | 0.8059 | 0.8717 | 0.9275 | 0.9817 | 1.0534 | 1.1334 | 1.2250 | 1.3242 | 1.3934 | 1.4625 | 1.5400 | 1.6109 | 1.6992 | 1.7775 | 1.8592 |
| Lowest Load | 0.5009 | 0.4242 | 0.3692 | 0.3225 | 0.2434 | 0.1584 | 0.0517 | 1.2900 | 1.3067 | 1.3275 | 1.3459 | 1.3767 | 1.3959 | 1.4334 | 1.4750 |
| Zero After Year | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | | | | | | | | | | | | | | | |
| $\text{Issue Age} \longrightarrow$ | 60 | 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 | | | | |
| Highest Load | 1.9625 | 2.0392 | 2.1359 | 2.2250 | 2.3200 | 2.4275 | 2.5492 | 2.6817 | 2.8242 | 2.9534 | 3.0742 | | | | |
| Lowest Load | 1.5034 | 1.5684 | 1.6225 | 1.6950 | 1.7725 | 1.8500 | 1.9267 | 2.0075 | 2.0142 | 1.8775 | 1.7492 | | | | |
| 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 | ٩. | | | - | | | | | | | - |
|----------------|----|-----|-------|---|---|---|---|---|---|---|---|
| | 1 | 2C) | I A C | • | n | C | C | • | D | n | |
| I ODALLO LLAJJ | | | ᅜᄶᇰ | | J | ~ | | ~ | D | v | |

| Issue Age \longrightarrow | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
|-----------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Highest Load | 0.4084 | 0.4059 | 0.4042 | 0.4025 | 0.4175 | 0.4242 | 0.4475 | 0.4650 | 0.4659 | 0.4850 | 0.4934 | 0.5017 | 0.5092 | 0.5950 | 0.5892 |
| Lowest Load | 0.1700 | 0.1967 | 0.2242 | 0.2525 | 0.2300 | 0.2359 | 0.1884 | 0.1642 | 0.1917 | 0.1642 | 0.1692 | 0.1759 | 0.1892 | 0.5725 | 0.0217 |
| Zero After Year | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 3 | 4 |
| | | | | | | | | | | | | | | | |
| Issue Age \longrightarrow | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 |
| Highest Load | 0.6092 | 0.6100 | 0.6092 | 0.6625 | 0.6775 | 0.7284 | 0.7400 | 0.7925 | 0.8725 | 0.9342 | 1.0142 | 1.1242 | 1.1750 | 1.2500 | 1.3034 |
| Lowest Load | 0.0025 | 0.0417 | 0.0884 | 0.6484 | 0.6600 | 0.6217 | 0.6575 | 0.6092 | 0.5092 | 0.4475 | 0.3492 | 0.1934 | 0.1659 | 0.0942 | 0.0692 |
| Zero After Year | 4 | 4 | 4 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 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 | 1.3734 | 1.4325 | 1.5242 | 1.5942 | 1.6609 | 1.7675 | 1.8542 | 1.9250 | 1.9992 | 2.0842 | 2.1617 | 2.2392 | 2.3067 | 2.3700 | 2.4659 |
| Lowest Load | 0.0159 | 1.4175 | 1.4642 | 1.4984 | 1.5425 | 1.5534 | 1.5909 | 1.6517 | 1.7184 | 1.7825 | 1.8634 | 1.9542 | 2.0659 | 2.1934 | 2.2992 |
| Zero After Year | 3 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | - | - | | - | - | - | - | - | - | | | | | | |
| Issue Age \longrightarrow | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 | | | | | | |
| Highest Load | 2.5392 | 2.6009 | 2.6484 | 2.7000 | 2.7609 | 2.8300 | 2.8967 | 2.9625 | 3.0192 | | | | | | |
| Lowest Load | 2.3167 | 2.2509 | 2.2000 | 2.1442 | 2.0800 | 2.0059 | 1.9350 | 1.8642 | 1.8034 | | | | | | |
| 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 | ance Face | Amount | s Shown | | PERIOD |
| | | | | Includ | les Added (| Cost for | | | | Age to Which |
| Issue | | | A | ccidental D | eath Benefi | t (Ages 17- | 59) | | | Coverage is |
| Age | | ar | nd Accelera | ted Death | Benefit for | Chronic Illr | ness (All Ag | ges) | | 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 | . , | . , | . , | | | . , | | | . , | 81 |
| 2-4 | | | | | | | | | | 80 |
| 5-8 | | | | | | | | | | 79 |
| 9-10 | | | | | | | | | | 79 |
| 11-16 | | | | | | | | | | 77 |
| 17-20 | | 13.05 | 23.85 | 34.65 | 45.45 | 67.05 | 88.65 | 110.25 | 131.85 | 75 |
| 21-22 | | 13.33 | 24.40 | 35.48 | 46.55 | $\begin{array}{c} 68.70 \\ 70.35 \end{array}$ | 90.85 | 113.00 | 135.15 | 74 |
| 23 24-25 | | $13.60 \\ 13.88$ | $24.95 \\ 25.50$ | $36.30 \\ 37.13$ | $47.65 \\ 48.75$ | 70.35 72.00 | 93.05 95.25 | $115.75 \\ 118.50$ | $138.45 \\ 141.75$ | $\frac{75}{74}$ |
| 24-25 | | 14.43 | 26.60 | 38.78 | 50.95 | 75.30 | 99.65 | 113.30 | 141.75 | 74 75 |
| 27-28 | | 14.70 | 27.15 | 39.60 | 52.05 | 76.95 | 101.85 | 124.00 126.75 | 151.65 | 74 |
| 29 | | 14.98 | 27.70 | 40.43 | 53.15 | 78.60 | 104.05 | 129.50 | 154.95 | 74 |
| 30-31 | | 15.25 | 28.25 | 41.25 | 54.25 | 80.25 | 106.25 | 132.25 | 158.25 | 73 |
| 32 | | 16.08 | 29.90 | 43.73 | 57.55 | 85.20 | 112.85 | 140.50 | 168.15 | 74 |
| 33 | | 16.63 | 31.00 | 45.38 | 59.75 | 88.50 | 117.25 | 146.00 | 174.75 | 74 |
| 34 | | 17.45 | 32.65 | 47.85 | 63.05 | 93.45 | 123.85 | 154.25 | 184.65 | 75 |
| 35 | | 18.55 | 34.85 | 51.15 | 67.45 | 100.05 | 132.65 | 165.25 | 197.85 | 76 |
| 36 | | 19.10 | 35.95 | 52.80 | 69.65 | 103.35 | 137.05 | 170.75 | 204.45 | 76 |
| 37 | | 19.93 | 37.60 | 55.28 | 72.95 | 108.30 | 143.65 | 179.00 | 214.35 | 77 |
| 38 39 | | 20.75 | 39.25 42.00 | 57.75 | 76.25 | 113.25 | 150.25 | 187.25 | 224.25 240.75 | 77 79 |
| 39 40 | 10.75 | 22.13 23.50 | 42.00 44.75 | 61.88 66.00 | 81.75 87.25 | 121.50 129.75 | 161.25 172.25 | 201.00 214.75 | 240.75 257.25 | 78 79 |
| 40 | 10.75 11.52 | 25.43 | 48.60 | 00.00 71.78 | 94.95 | 123.75 141.30 | 187.65 | 234.00 | 237.25 280.35 | 80 |
| 42 | 12.40 | 27.63 | 53.00 | 78.38 | 103.75 | 154.50 | 205.25 | 256.00 | 306.75 | 81 |
| 43 | 13.17 | 29.55 | 56.85 | 84.15 | 111.45 | 166.05 | 220.65 | 275.25 | 329.85 | 82 |
| 44 | 13.94 | 31.48 | 60.70 | 89.93 | 119.15 | 177.60 | 236.05 | 294.50 | 352.95 | 83 |
| 45 | 14.71 | 33.40 | 64.55 | 95.70 | 126.85 | 189.15 | 251.45 | 313.75 | 376.05 | 83 |
| 46 | 15.59 | 35.60 | 68.95 | 102.30 | 135.65 | 202.35 | 269.05 | 335.75 | 402.45 | 84 |
| 47 | 16.36 | 37.53 | 72.80 | 108.08 | 143.35 | 213.90 | 284.45 | 355.00 | 425.55 | 84 |
| 48 | 17.13 | 39.45 | 76.65 | 113.85 | 151.05 | 225.45 | 299.85 | 374.25 | 448.65 | 85 |
| $49 \\ 50$ | $ 18.12 \\ 19.22 $ | 41.93 | $\begin{array}{c} 81.60\\ 87.10\end{array}$ | $121.28 \\ 129.53$ | 160.95 171.05 | 240.30 | 319.65 | 399.00 | 478.35 | 85 |
| $50 \\ 51$ | 19.22 20.54 | $44.68 \\ 47.98$ | 93.70 | 129.55 139.43 | $171.95 \\ 185.15$ | | | | | 86 87 |
| 52 | 21.97 | 51.55 | 100.85 | 150.15 | 199.45 | | | | | 88 |
| 53 | 23.07 | 54.30 | 106.35 | 158.40 | 210.45 | | | | | 88 |
| 54 | 24.17 | 57.05 | 111.85 | 166.65 | 221.45 | | | | | 88 |
| 55 | 25.38 | 60.08 | 117.90 | 175.73 | 233.55 | | | | | 89 |
| 56 | 26.48 | 62.83 | 123.40 | 183.98 | 244.55 | | | | | 89 |
| 57 | 27.80 | 66.13 | 130.00 | 193.88 | 257.75 | | | | | 89 |
| 58 | 29.01 | 69.15 | 136.05 | 202.95 | 269.85 | | | | | 89 |
| 59 60 | 30.33 | 72.45 | 142.65 | 212.85 | 283.05 | | | | | 89 |
| 60 | 31.18 | 74.58 | 146.90 | 219.23 | 291.55 | | | | | 90 |
| 61 62 | $32.61 \\ 34.37$ | 78.15 82.55 | $154.05 \\ 162.85$ | 229.95 243.15 | $305.85 \\ 323.45$ | | | | | 90 90 |
| 62 63 | 34.37 36.13 | $\frac{82.55}{86.95}$ | 162.85 | 243.15 256.35 | 323.45 341.05 | | | | | 90 90 |
| 64 | 38.00 | 91.63 | 181.00 | 270.38 | 359.75 | | | | | 90 |
| 65 | 40.09 | 91.05 96.85 | 191.45 | 286.05 | 380.65 | | | | | 90 90 |
| 66 | 42.40 | 20.00 | | | | | | | | 90 |
| 67 | 44.93 | | | | | | | | | 91 |
| 68 | 47.68 | | | | | | | | | 91 |
| 69 | 50.43 | | | | | | | | | 91 |
| 70 | 53.29 | | | | | | | | | 91 |

| | | | | | | _ | | ~ 7 | | GUARANTEE |
|--------------|------------------|------------------|--------------------|--------------------|---|------------------|--------------------|--------------------|------------------|---------------|
| | | Monthly | y Premiu | | | nce Face | Amount | s Shown | | PERIOD |
| | | | | | les Added C | | | | | Age to Which |
| ssue | | | Ac | ccidental D | eath Benefi | t (Ages 17- | 59) | | | Coverage is |
| Age | | ar | nd Accelera | ted Death | Benefit for | Chronic Illr | iess (All Ag | ges) | | Guaranteed at |
| ALB) | \$10,000 | \$25,000 | \$50,000 | \$75,000 | \$100,000 | \$150,000 | \$200,000 | \$250,000 | \$300,000 | Table Premiun |
| 5D-1 | | | | | | | | | | 81 |
| 2-4 | | | | | | | | | | 80 |
| 5-8 | | | | | | | | | | 79 |
|)-10 | | | | | | | | | | 79 |
| 1-16 | | 10 55 | 94.05 | F1 1F | 67.45 | 100.05 | 120.65 | 165.05 | 107.95 | 77 |
| 7-20 1-22 | | 18.55 19.38 | 34.85 36.50 | 51.15 53.63 | 67.45 70.75 | 100.05 105.00 | 132.65 139.25 | 165.25 173.50 | 197.85 207.75 | 71 71 |
| 23 | | 20.20 | 30.50 38.15 | 55.05 56.10 | 70.75 | 105.00 109.95 | 139.25 145.85 | 173.30 181.75 | 207.75 217.65 | 71 72 |
| 4-25 | | 20.20 20.75 | 39.25 | 57.75 | 76.25 | 113.25 | 150.25 | 187.25 | 224.25 | 71 |
| 26 | | 21.30 | 40.35 | 59.40 | 78.45 | 116.55 | 154.65 | 192.75 | 230.85 | 72 |
| 27-28 | | 21.85 | 41.45 | 61.05 | 80.65 | 119.85 | 159.05 | 198.25 | 237.45 | 71 |
| 29 | | 22.13 | 42.00 | 61.88 | 81.75 | 121.50 | 161.25 | 201.00 | 240.75 | 71 |
| 30-31 | | 24.88 | 47.50 | 70.13 | 92.75 | 138.00 | 183.25 | 228.50 | 273.75 | 72 |
| 32 | | 25.70 | 49.15 | 72.60 | 96.05 | 142.95 | 189.85 | 236.75 | 283.65 | 72 |
| 33 | | 25.98 | 49.70 | 73.43 | 97.15 | 144.60 | 192.05 | 239.50 | 286.95 | 72 |
| 34 | | 26.25 | 50.25 | 74.25 | 98.25 | 146.25 | 194.25 | 242.25 | 290.25 | 71 |
| 35 | | 28.18 | 54.10 | 80.03 | 105.95 | 157.80 | 209.65 | 261.50 | 313.35 | 72 |
| 36 | | 29.00 | 55.75 | 82.50 | 109.25 | 162.75 | 216.25 | 269.75 | 323.25 | 72 |
| 37 | | 30.93 | 59.60 | 88.28 | 116.95 | 174.30 | 231.65 | 289.00 | 346.35 | 73 |
| 38 | | 31.75 | 61.25 | 90.75 | 120.25 | 179.25 | 238.25 | 297.25 | 356.25 | 73 |
| 39 | 10.14 | 33.95 | 65.65 | 97.35 | 129.05 | 192.45 | 255.85 | 319.25 | 382.65 | 74 |
| 40 | 16.14 | 36.98 | 71.70 | 106.43 | 141.15 | 210.60 | 280.05 | 349.50 274.25 | 418.95 | 76 77 |
| 41 42 | $17.13 \\ 18.34$ | $39.45 \\ 42.48$ | $76.65 \\ 82.70$ | $113.85 \\ 122.93$ | $\begin{array}{c}151.05\\163.15\end{array}$ | 225.45 243.60 | $299.85 \\ 324.05$ | $374.25 \\ 404.50$ | 448.65 484.95 | 77 78 |
| 42 | 19.88 | 46.33 | 90.40 | 134.48 | 178.55 | 266.70 | 354.85 | 404.30 | 531.15 | 80 |
| 40 | 20.65 | 48.25 | 94.25 | 140.25 | 186.25 | 278.25 | 370.25 | 462.25 | 554.25 | 80 |
| 45 | 20.00 21.75 | 51.00 | 99 <u>.</u> 75 | 148.50 | 197.25 | 294.75 | 392.25 | 489.75 | 587.25 | 81 |
| 46 | 22.63 | 53.20 | 104.15 | 155.10 | 206.05 | 307.95 | 409.85 | 511.75 | 613.65 | 81 |
| 47 | 23.73 | 55.95 | 109.65 | 163.35 | 217.05 | 324.45 | 431.85 | 539.25 | 646.65 | 82 |
| 48 | 24.72 | 58.43 | 114.60 | 170.78 | 226.95 | 339.30 | 451.65 | 564.00 | 676.35 | 82 |
| 49 | 26.15 | 62.00 | 121.75 | 181.50 | 241.25 | 360.75 | 480.25 | 599.75 | 719.25 | 83 |
| 50 | 27.36 | 65.03 | 127.80 | 190.58 | 253.35 | | | | | 83 |
| 51 | 28.57 | 68.05 | 133.85 | 199.65 | 265.45 | | | | | 83 |
| 52 | 30.33 | 72.45 | 142.65 | 212.85 | 283.05 | | | | | 84 |
| 53 | 31.87 | 76.30 | 150.35 | 224.40 | 298.45 | | | | | 85 |
| 54 | 33.30 | 79.88 | 157.50 | 235.13 | 312.75 | | | | | 85 |
| 55 56 | 34.84 | 83.73 | 165.20 | 246.68 | 328.15 | | | | | 85 |
| $56 \\ 57$ | 36.60 28.26 | $88.13 \\ 92.53$ | $174.00 \\ 182.80$ | 259.88 273.08 | 345.75 363.35 | | | | | 85 86 |
| 57 58 | 38.36 40.23 | 92.53 | 182.80 | 273.08 | 363.35 382.05 | | | | | 86 |
| 58 59 | 40.23 42.10 | 97.20 101.88 | 192.15 201.50 | 287.10 301.13 | 382.05 400.75 | | | | | 80 86 |
| 60 | 43.28 | 101.88 | 201.30 207.40 | 309.98 | 400.75 412.55 | | | | | 86 |
| 61 | 45.81 | 111.15 | 220.05 | 328.95 | 437.85 | | | | | 86 |
| 62 | 48.23 | 117.20 | 232.15 | 347.10 | 462.05 | | | | | 87 |
| 63 | 50.65 | 123.25 | 244.25 | 365.25 | 486.25 | | | | | 87 |
| 64 | 53.07 | 129.30 | 256.35 | 383.40 | 510.45 | | | | | 87 |
| 65 | 55.71 | 135.90 | 269.55 | 403.20 | 536.85 | | | | | 87 |
| 66 | 58.57 | | | | | | | | | 88 |
| 67 | 61.65 | | | | | | | | | 88 |
| 68 | 64.84 | | | | | | | | | 88 |
| 69 | 68.25 | | | | | | | | | 88 |
| 70 | 71.88 | | | | | | | | | 89 |

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

TEXASLIFE INSURANCE EMPLOYEE MONTHLY PREMIUMS

| | | | | | | | | | | xpress Issu GUARANTEEI |
|-----------------|------------------|--------------------|------------------|--------------------|--------------------|------------------------|--------------------|------------------------------|--------------------|----------------------------------|
| | | Lif | e Insurar | nce Face | Amounts | for Mont | hly Prem | iums Sho | wn | PERIOD |
| | Prem | | | | | ded Cost fo | • | | | Age to Which |
| Issue | For | | | | | Benefit (Age | | | | Coverage is |
| Age | \$10,000 | | and Ac | celerated D | eath Benefi | t for Chron | ic Illness (A | ll Ages) | | Guaranteed at |
| ALB) | Face | \$18.00 | \$20.00 | \$24.00 | \$28.00 | \$30.00 | \$32.00 | \$35.00 | \$40.00 | Table Premium |
| 15D-1 | | +-0.00 | +=0.00 | +===== | +_0.00 | +00000 | | | + -0.00 | 81 |
| 2-4 | | | | | | | | | | 80 |
| 5-8 | | | | | | | | | | 79 |
| 9-10 | | | | | | | | | | 79 |
| 11-16 | | 00.450 | 41.000 | 50.040 | | 61 001 | 100.000 | FF 011 | 07.005 | 77 |
| 17-20 | | 36,453 | 41,088 | 50,348 | 59,607 | 64,234 | 68,866 67,156 | 75,811 | 87,385 | 75 |
| 21-22 23 | | $35,561 \\ 34,691$ | 40,068 39,097 | $49,098 \\ 47,908$ | 58,127 56,719 | $62,\!642 \\ 61,\!124$ | $67,156 \\ 65,529$ | 73,928 72,137 | 85,215 83,150 | 74 75 |
| 23 | | 33,871 | 35,057 38,173 | 46,775 | 55,377 | 59,678 | 63,979 | 70,431 | 81,186 | 74 |
| 26 | | 32,337 | 36,445 | 44,663 | 52,875 | 56,982 | 61,089 | 67,249 | 77,516 | 75 |
| 27-28 | | $31,\!627$ | $35,\!645$ | $43,\!675$ | 51,707 | 55,723 | 59,739 | 65,764 | 75,804 | 74 |
| 29 | | 30,937 | 34,873 | 42,730 | 50,590 | 54,519 | 58,448 | 64,342 | 74,167 | 74 |
| 30-31 | | 30,289 | 34,135 | 41,827 | 49,520 | 53,366 | 57,212 | 62,981 | 72,597 | 73 |
| 32 | | 28,482 | 32,098 | 39,331 | 46,565 | 50,181 | 53,803 | 59,220 | 68,265 | 74 |
| 33 | | 27,392 | 30,870 | 37,827 | 44,783 | 48,261 | 51,740 | 56,957 | 65,656 | 74 |
| $\frac{34}{35}$ | | 25,907 24,157 | 29,195 27,221 | 35,774 33,359 | 42,352 39,494 | $45,\!642 \\ 42,\!563$ | $48,931 \\ 45,629$ | $53,864 \\ 50,231$ | $62,089 \\ 57,899$ | 75 76 |
| 36 | | 24,157 23,368 | 27,221 26,336 | 32,271 | 39,494 38,205 | 42,505 41,176 | 45,029 44,140 | $ 50,231 \\ 48,591 $ | 57,899 56,010 | 76 |
| 37 | | 22,278 | 25,107 | 30,764 | 36,422 | 39,251 | 42,078 | 46,323 | 53,395 | 77 |
| 38 | | 21,284 | 23,987 | 29,392 | 34,798 | 37,501 | 40,203 | 44,257 | 51,014 | 77 |
| 39 | | 19,812 | 22,328 | 27,359 | 32,390 | 34,906 | 37,424 | 41,192 | 47,484 | 78 |
| 40 | 10.75 | 18,530 | 20,883 | 25,589 | 30,295 | 32,648 | 35,001 | 38,530 | 44,412 | 79 |
| 41 | 11.52 | 16,991 | 19,150 | 23,461 | 27,778 | 29,936 | 32,093 | 35,330 | 40,720 | 80 |
| 42 | 12.40 | 15,518 | 17,488 | 21,430 | 25,370 | 27,340 | 29,312 | 32,267 | 37,193 | 81 |
| 43 | 13.17 | 14,424 | 16,255 | 19,919 | 23,581 | 25,413 | 27,244 | 29,991 | 34,570 | 82 |
| 44 | $13.94 \\ 14.71$ | $13,474 \\ 12,641$ | 15,187 14,246 | 18,606 | $22,028 \\ 20,667$ | 23,739 22,272 | 25,449 | 28,016 | 32,293 30,298 | 83 83 |
| 45 46 | 14.71 15.59 | 12,641 11,807 | 14,240 13,306 | 17,456 16,305 | 19,303 | 22,272 | 23,877 22,303 | 26,285 24,551 | 28,299 | 83 |
| 40 47 | 16.36 | 11,307 11,163 | 13,500 12,580 | 15,415 | 13,303 18,250 | 19,667 | 22,505 21,085 | 24,001 23,210 | 26,235 26,755 | 84 |
| 48 | 17.13 | 10,585 | 11,929 | 14,617 | 17,306 | 18,650 | 19,994 | 22,010 | 25,370 | 85 |
| 49 | 18.12 | / | 11,187 | 13,704 | 16,226 | 17,485 | 18,747 | 20,637 | 23,788 | 85 |
| 50 | 19.22 | | 10,459 | 12,817 | 15,174 | 16,353 | $17,\!531$ | 19,299 | 22,246 | 86 |
| 51 | 20.54 | | | 11,892 | 14,078 | $15,\!173$ | 16,266 | 17,906 | $20,\!640$ | 87 |
| 52 | 21.97 | | | 11,030 | 13,058 | 14,072 | 15,087 | $16,\!607$ | 19,144 | 88 |
| 53 | 23.07 | | | 10,447 | 12,368 | 13,326 | 14,290 | 15,731 | 18,132 | 88 |
| 54 | 24.17 | | | | 11,747 | 12,660 | 13,570 | 14,940 | 17,221 | 88 |
| 55 56 | 25.38 26.48 | | | | 11,133 10.628 | 11,997 11.452 | 12,863 12,270 | 14,161 12,517 | 16,321 15.570 | 89 80 |
| 56 57 | $26.48 \\ 27.80$ | | | | $10,628 \\ 10,077$ | 11,453 10,862 | $12,279 \\ 11,644$ | $13,517 \\ 12,819$ | $15,579 \\ 14,776$ | 89 89 |
| 58 | 29.01 | | | | 10,011 | 10,370 | 11,044 | 12,819 | 14,107 | 89 |
| 59 | 30.33 | | | | | | 10,594 | 11,664 | 13,444 | 89 |
| 60 | 31.18 | | | | | | 10,284 | 11,321 | 13,049 | 90 |
| 61 | 32.61 | | | | | | | 10,788 | 12,435 | 90 |
| 62 | 34.37 | | <i>k</i> | | | | | 10,196 | 11,753 | 90 |
| 63 | 36.13 | | | | | | | | 11,143 | 90 |
| 64 | 38.00 | | 7 | | | | | | 10,560 | 90 |
| 65 66 | 40.09 | | | | | | | | | 90 90 |
| 66 67 | 42.40 | | | | | | | | | 90 |
| 67 68 | $44.93 \\ 47.68$ | | | | | | | | | 91 91 |
| 69 | 47.08 50.43 | | | | | | | | | 91 91 |
| 70 | 53.29 | | | | | | | | | 91 |
| | -plus is perm | | | | | | | | | |

TEXASLIFE INSURANCE EMPLOYEE MONTHLY PREMIUMS

| | | | | | | | | | | GUARANTEED |
|------------|----------------|------------------|------------------|------------------|------------------|--------------------|------------------|------------------|-------------------------|---------------|
| | | Lif | e Insurai | ice Face | Amounts | for Mont | hly Premi | iums Sho | wn | PERIOD |
| | Prem | | | | Includes Ad | | • | | | Age to Which |
| Issue | For | | | | ntal Death I | | | | | Coverage is |
| | | | and Ac | | | | ic Illness (A | 11 A mon | | - |
| Age | \$10,000 | \$2600 | | | | | (| 0 / | AFF 00 | Guaranteed at |
| (ALB) | Face | \$26.00 | \$28.00 | \$30.00 | \$35.00 | \$40.00 | \$45.00 | \$50.00 | \$55.00 | Table Premium |
| 15D-1 | | | | | | | | | | 81 |
| 2-4 5-8 | | | | | | | | | | 80 79 |
| 9-10 | | | | | | | | | | 79 |
| 11-16 | | | | | | | | | | 77 |
| 17-20 | | 36,433 | 39,494 | 42,563 | 50,231 | 57,899 | 65,567 | 73,237 | 80,905 | 71 |
| 21-22 | | 34,672 | 37,590 | 40,511 | 47,811 | 55,110 | 62,410 | 69,709 | 77,008 | 71 |
| 23 | | 33,077 | 35,864 | 38,650 | 45,612 | 52,577 | 59,544 | 66,505 | 73,468 | 72 |
| 24-25 | | 32,091 | 34,798 | 37,501 | 44,257 | 51,014 | 57,771 | 64,528 | 71,284 | 71 |
| 26 | | 31,170 | 33,793 | 36,418 | 42,980 | 49,541 | 56,103 | 62,665 | 69,226 | 72 |
| 27-28 | | 30,294 | 32,845 | 35,396 | 41,774 | 48,151 | 54,529 | 60,906 | 67,284 | 71 |
| 29 | | 29,875 | 32,390 | 34,906 | 41,192 | 47,484 | 53,774 | 60,063 | 66,353 | 71 |
| 30-31 | | 26,244 | 28,454 | 30,663 | 36,188 | 41,713 | 47,238 | 52,763 | 58,288 | 72 |
| 32 | | 25,320 | 27,453 | 29,583 | 34,917 | 40,246 | 45,576 | 50,907 | 56,237 | 72 |
| 33 | | 25,027 | 27,134 | 29,242 | 34,511 | 39,779 | 45,048 | 50,316 | 55,585 | 72 |
| 34 | | | 26,818 | 28,907 | 34,115 | 39,318 | 44,532 | 49,740 | 54,943 | 71 |
| 35 | | 22,903 | 24,832 | 26,760 | 31,580 | 36,404 | 41,224 | 46,047 | 50,867 | 72 |
| 36 | | 22,194 | 24,062 | 25,938 | 30,608 | 35,281 | 39,949 | 44,627 | 49,300 | 72 |
| 37 28 | | 20,706 | 22,448 | 24,190 22,517 | 28,553 | 32,913 21,002 | 37,272 | 41,631 | 45,990 | 73 72 |
| 38 39 | | 20,128 18,731 | 21,823 20,311 | 23,517 21,885 | 27,754 25,828 | $31,992 \\ 29,772$ | 36,229 | 40,464 | 44,704 | 73 74 |
| 40 | 16.14 | 18,731 | 18,539 | 19,978 | 23,828 23,575 | 29,112 27,181 | 33,715 30,778 | 37,658 34,378 | 41,601 37,977 | 74 76 |
| 40 41 | 10.14 | 17,099 15,962 | 17,306 | 19,978 18,650 | 23,373 | 27,181 25,370 | 28,730 | 34,378 32,089 | 37,977 35,449 | 70 |
| 42 | 18.34 | 14,761 | 16,004 | 17,247 | 20,355 | 23,462 | 26,130 26,570 | 29,677 | 32,785 | 78 |
| 43 | 19.88 | 13,472 | 14,606 | 15,741 | 18,577 | 21,413 | 24,249 | 27,085 | 29,921 | 80 |
| 44 | 20.65 | 12,908 | 13,995 | 15,082 | 17,799 | 20,517 | 23,234 | 25,952 | 28,669 | 80 |
| 45 | 21.75 | 12,180 | 13,205 | 14,231 | 16,795 | 19,359 | 21,924 | 24,488 | 27,052 | 81 |
| 46 | 22.63 | $11,\!655$ | 12,635 | 13,617 | 16,070 | 18,524 | 20,977 | 23,430 | $25,\!884$ | 81 |
| 47 | 23.73 | 11,057 | 11,988 | 12,919 | 15,247 | 17,575 | 19,903 | 22,230 | 24,558 | 82 |
| 48 | 24.72 | 10,570 | 11,459 | 12,350 | 14,575 | 16,801 | 19,026 | 21,251 | 23,476 | 82 |
| 49 | 26.15 | | 10,775 | 11,611 | 13,702 | 15,795 | 17,888 | 19,978 | 22,071 | 83 |
| 50 | 27.36 | | 10,255 | 11,053 | 13,043 | 15,034 | 17,026 | 19,017 | 21,008 | 83 |
| 51 | 28.57 | | | 10,544 | 12,441 | 14,342 | 16,243 | 18,143 | 20,042 | 83 |
| 52 52 | 30.33 | | | | 11,664 | 13,444 | 15,223 | 17,005 | 18,786 | 84 |
| $53 \\ 54$ | 31.87 22.20 | | | | 11,057 10.548 | 12,745 12,150 | 14,434 12,760 | 16,121 15.270 | 17,809 | 85 85 |
| 54 55 | 33.30 34.84 | | | | 10,548 10,051 | 12,159 11,583 | 13,769 13,118 | 15,379 14,653 | $\frac{16,989}{16,186}$ | 85 85 |
| 55 56 | 34.84 36.60 | | | | 10,001 | 11,585 10,990 | 13,118 12,444 | 14,055 13,902 | 10,180 15,357 | 85 |
| $50 \\ 57$ | 30.00 38.36 | | | | | 10,990 10,453 | 12,444 11,839 | 13,902 13,224 | 13,337 14,609 | 86 |
| 58 | 40.23 | - | | | | 10,100 | 11,256 | 12,572 | 13,890 | 86 |
| 59 | 42.10 | | | | | | 10,728 | 11,983 | 13,238 | 86 |
| 60 | 43.28 | | | | | | 10,419 | 11,638 | 12,856 | 86 |
| 61 | 45.81 | | | 1 | 1 | | | 10,962 | 12,109 | 86 |
| 62 | 48.23 | | | | | | | 10,385 | 11,472 | 87 |
| 63 | 50.65 | | | | | | | | 10,898 | 87 |
| 64 | 53.07 | | | | | | | | 10,379 | 87 |
| 65 | 55.71 | | | | | | | | | 87 |
| 66 | 58.57 | | | | | | | | | 88 |
| 67 | 61.65 | | | | | | | | | 88 |
| 68 60 | 64.84 | | | | | | | | | 88 |
| 69 70 | 68.25 | | | | | | | | | 88 |
| 70 | 71.88 | | | | | | | | | 89 |

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 | Amounts | s Shown | | PERIOD |
| | | | | Includ | les Added (| Cost for | | | | Age to Which |
| Issue | | | Ac | ccidental D | eath Benefi | t (Ages $17-$ | 59) | | | Coverage is |
| Age | | | | | | | , i | | | 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 | . , | . , | . , | 9.25 | . , | . , | | 1 | 16.25 | 81 |
| 2-4 | | | | 9.50 | | | | | 16.75 | 80 |
| 5-8 | | | | 9.75 | | | | | 17.25 | 79 |
| 9-10 | | | | 10.00 | | | | | 17.75 | 79 |
| 11-16 | | | | 10.25 | | | | | 18.25 | 77 |
| 17-20 | | | | 12.25 | 14.25 | 16.25 | 18.25 | 20.25 | 22.25 | 75 |
| 21-22 | | | | 12.50 | 14.55 | 16.60 | 18.65 | 20.70 | 22.75 | 74 75 |
| 23 24-25 | | | | $12.75 \\ 13.00$ | $14.85 \\ 15.15$ | $\begin{array}{c} 16.95 \\ 17.30 \end{array}$ | 19.05 19.45 | $21.15 \\ 21.60$ | $23.25 \\ 23.75$ | 75 74 |
| 24-25 | | | | 13.50 | 15.75 | 17.30 | 20.25 | 21.00 | 23.75 | 74 75 |
| 27-28 | | | | 13.75 | 16.05 | 18.35 | 20.25 20.65 | 22.95 | 25.25 | 74 |
| 29 | | | | 14.00 | 16.35 | 18.70 | 21.05 | 23.40 | 25.75 | 74 |
| 30-31 | | | | 14.25 | 16.65 | 19.05 | 21.45 | 23.85 | 26.25 | 73 |
| 32 | | | | 15.00 | 17.55 | 20.10 | 22.65 | 25.20 | 27.75 | 74 |
| 33 | | | | 15.50 | 18.15 | 20.80 | 23.45 | 26.10 | 28.75 | 74 |
| 34 | | | | 16.25 | 19.05 | 21.85 | 24.65 | 27.45 | 30.25 | 75 |
| 35 | | 11.25 | 14.25 | 17.25 | 20.25 | 23.25 | 26.25 | 29.25 | 32.25 | 76 |
| 36 | | 11.55 | 14.65 | 17.75 | 20.85 | 23.95 | 27.05 | 30.15 | 33.25 | 76 |
| 37 20 | | 12.00 | 15.25 | 18.50 | 21.75 | 25.00 | 28.25 | 31.50 | 34.75 | 77 |
| $\frac{38}{39}$ | | $12.45 \\ 13.20$ | $15.85 \\ 16.85$ | $19.25 \\ 20.50$ | $\begin{array}{r} 22.65 \\ 24.15 \end{array}$ | $26.05 \\ 27.80$ | $29.45 \\ 31.45$ | $32.85 \\ 35.10$ | $36.25 \\ 38.75$ | 77 78 |
| 39 40 | 10.05 | 13.20 | 10.85 | 20.30 | 24.15 | 21.80 | 33.45 | 37.35 | 41.25 | 79 |
| 40 | 10.05 10.75 | 15.00 | 19.25 | 23.50 | 25.05 27.75 | 32.00 | 36.25 | 40.50 | 44.75 | 80 |
| 42 | 11.55 | 16.20 | 20.85 | 25.50 | 30.15 | 34.80 | 39.45 | 44.10 | 48.75 | 81 |
| 43 | 12.25 | 17.25 | 22.25 | 27.25 | 32.25 | 37.25 | 42.25 | 47.25 | 52.25 | 82 |
| 44 | 12.95 | 18.30 | 23.65 | 29.00 | 34.35 | 39.70 | 45.05 | 50.40 | 55.75 | 83 |
| 45 | 13.65 | 19.35 | 25.05 | 30.75 | 36.45 | 42.15 | 47.85 | 53.55 | 59.25 | 83 |
| 46 | 14.45 | 20.55 | 26.65 | 32.75 | 38.85 | 44.95 | 51.05 | 57.15 | 63.25 | 84 |
| 47 | 15.15 | 21.60 | 28.05 | 34.50 | 40.95 | 47.40 | 53.85 | 60.30 | 66.75 | 84 |
| 48 | 15.85 | 22.65 | 29.45 | 36.25 | 43.05 | 49.85 | 56.65 | 63.45 | 70.25 | 85 |
| 49 50 | $16.75 \\ 17.75$ | $24.00 \\ 25.50$ | $31.25 \\ 33.25$ | $\begin{array}{r} 38.50\\ 41.00 \end{array}$ | 45.75 | 53.00 | 60.25 | 67.50 | 74.75 | 85 86 |
| 50 51 | 18.95 | 25.30 27.30 | 35.65 | 44.00 | | | | | | 87 |
| 52 | 20.25 | 29.25 | 38.25 | 47.25 | | | | | | 88 |
| 53 | 21.25 | 30.75 | 40.25 | 49.75 | | | | | | 88 |
| 54 | 22.25 | 32.25 | 42.25 | 52.25 | | | | | | 88 |
| 55 | 23.35 | 33.90 | 44.45 | 55.00 | | | | | | 89 |
| 56 | 24.35 | 35.40 | 46.45 | 57.50 | | | | | | 89 |
| 57 | 25.55 | 37.20 | 48.85 | 60.50 | | | | | | 89 |
| 58 | 26.65 | 38.85 | 51.05 | 63.25 | | | | | | 89 |
| 59 60 | 27.85 | 40.65 | 53.45 | 66.25 | | | | | | 89 |
| 60 61 | 28.55 | 41.70 | 54.85 | 68.00 | | | | | | <u>90</u> 90 |
| 61 62 | | | | | | | | | | 90 90 |
| 63 | | | | | | | | | | 90 90 |
| 64 | | | | | | | | | | 90 |
| 65 | | | | | | | | | | 90 |
| 66 | | | | | | | | | | 90 |
| 67 | | | | | | | | | | 91 |
| 68 | | | | | | | | | | 91 |
| 69 | | | | | | | | | | 91 |
| 70 | | | | | | | | | | 91 |

| | | | | Diana | | Table Pi | ciniani | 100 | | GUARANTEED |
|-----------------|----------------|-----------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---------------|
| | | Monthly | y Premiu | ms for Li | fe Insura | nce Face | Amounts | s Shown | | PERIOD |
| | | - | | Includ | es Added C | Cost for | | | | Age to Which |
| Issue | | | Ac | cidental D | eath Benefi | t (Ages 17-5 | 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 | \$10,000 | \$10,000 | \$20,000 | +=0,000 | \$00,000 | \$00,000 | \$ 10,000 | ¢ 10,000 | \$00,000 | 81 |
| 2-4 | | | | | | | | | | 80 |
| 5-8 | | | | | | | | | | 79 |
| 9-10 | | | | | | | | | | 79 |
| 11-16 | | | | | 00 0 4 | 22.25 | | | | 77 |
| 17-20 | | | | 17.25 | 20.25 | 23.25 | 26.25 | 29.25 | 32.25 | 71 |
| 21-22 23 | | | | $18.00 \\ 18.75$ | $21.15 \\ 22.05$ | $24.30 \\ 25.35$ | $27.45 \\ 28.65$ | $30.60 \\ 31.95$ | $33.75 \\ 35.25$ | 71 72 |
| 23 24-25 | | | | 19.25 | 22.05 22.65 | 25.35 26.05 | 28.05 29.45 | 31.95 32.85 | 36.25 | 72 71 |
| 24 20 | | | | 19.75 | 23.25 | 26.75 | 30.25 | 33.75 | 37.25 | 72 |
| 27-28 | | | | 20.25 | 23.85 | 27.45 | 31.05 | 34.65 | 38.25 | 71 |
| 29 | | | | 20.50 | 24.15 | 27.80 | 31.45 | 35.10 | 38.75 | 71 |
| 30-31 | | | | 23.00 | 27.15 | 31.30 | 35.45 | 39.60 | 43.75 | 72 |
| 32 | | | | 23.75 | 28.05 | 32.35 | 36.65 | 40.95 | 45.25 | 72 |
| 33 | | | | 24.00 | 28.35 | 32.70 | 37.05 | 41.40 | 45.75 | 72 |
| 34 25 | | 16 50 | 01.05 | 24.25 | 28.65 | 33.05 | 37.45 40.25 | 41.85 | 46.25 40.75 | 71 72 |
| $\frac{35}{36}$ | | $16.50 \\ 16.95$ | $21.25 \\ 21.85$ | $26.00 \\ 26.75$ | $30.75 \\ 31.65$ | $35.50 \\ 36.55$ | $40.25 \\ 41.45$ | $45.00 \\ 46.35$ | $49.75 \\ 51.25$ | 72 72 |
| 30 37 | | 18.00 | 23.25 | 28.50 | 33.75 | 39.00 | 41.45 | 40.55 49.50 | 54.75 | 73 |
| 38 | | 18.45 | 23.85 | 29.25 | 34.65 | 40.05 | 45.45 | 40.00 50.85 | 56.25 | 73 |
| 39 | | 19.65 | 25.45 | 31.25 | 37.05 | 42.85 | 48.65 | 54.45 | 60.25 | 74 |
| 40 | 14.95 | 21.30 | 27.65 | 34.00 | 40.35 | 46.70 | 53.05 | 59.40 | 65.75 | 76 |
| 41 | 15.85 | 22.65 | 29.45 | 36.25 | 43.05 | 49.85 | 56.65 | 63.45 | 70.25 | 77 |
| 42 | 16.95 | 24.30 | 31.65 | 39.00 | 46.35 | 53.70 | 61.05 | 68.40 | 75.75 | 78 |
| 43 | 18.35 | 26.40 | 34.45 | 42.50 | 50.55 | 58.60 | 66.65 | 74.70 | 82.75 | 80 |
| 44 | 19.05 | 27.45 | 35.85 | 44.25 | 52.65 | 61.05 | 69.45 | 77.85 | 86.25 | 80 |
| 45 46 | 20.05 20.85 | 28.95 30.15 | 37.85 39.45 | 46.75 48.75 | 55.65 58.05 | 64.55 67.35 | 73.45 76.65 | 82.35 85.95 | 91.25 95.25 | 81 81 |
| 40 47 | 20.85 21.85 | 30.15 31.65 | 41.45 | 48.75 51.25 | 61.05 | 70.85 | 70.05 80.65 | 90.45 | 100.25 | 82 |
| 48 | 21.05 22.75 | 33.00 | 43.25 | 53.50 | 63.75 | 74.00 | 84.25 | 94.50 | 104.75 | 82 |
| 49 | 24.05 | 34.95 | 45.85 | 56.75 | 67.65 | 78.55 | 89.45 | 100.35 | 111.25 | 83 |
| 50 | 25.15 | 36.60 | 48.05 | 59.50 | | | | | | 83 |
| 51 | 26.25 | 38.25 | 50.25 | 62.25 | | | | | | 83 |
| 52 | 27.85 | 40.65 | 53.45 | 66.25 | | | | | | 84 |
| 53 54 | 29.25 | 42.75 | 56.25 | 69.75 | | | | | | 85 |
| 54 55 | 30.55 31.95 | $\frac{44.70}{46.80}$ | 58.85 61.65 | 73.00 | | | | | | 85 85 |
| 55 56 | 31.95 33.55 | $40.80 \\ 49.20$ | 64.85 | 80.50 | | | | | | 85 |
| 50 57 | 35.05 35.15 | 51.60 | 68.05 | 84.50 | | | | | | 86 |
| 58 | 36.85 | 54.15 | 71.45 | 88.75 | | | | | | 86 |
| 59 | 38.55 | 56.70 | 74.85 | 93.00 | | | | | | 86 |
| 60 | 39.55 | 58.20 | 76.85 | 95.50 | | | | | | 86 |
| 61 | T | | | | | | Т | | | 86 |
| 62 62 | | | | | | | | | | 87 |
| 63 64 | | | | | | | | | | 87 87 |
| $64 \\ 65$ | | | | | | | | | | 87 87 |
| 66 | | | | | | | | | | 88 |
| 67 | | | | | | | | | | 88 |
| 68 | | | | | | | | | | 88 |
| 69 | | | | | | | | | | 88 |
| 70 | | | | | | | | | | 89 |

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

| | | T • 4 | · T | | A | С ЪЛ · | L L D | | | GUARANTEEI |
|-----------------|------------------|--------------------|------------------|------------------|------------------|------------------|--------------------|------------------|-------------------------|---------------|
| | | Lif | e Insurai | | | for Mont | - | iums Sho | own | PERIOD |
| | Prem | | | | | lded Cost fo | | | | Age to Which |
| Issue | For | | | Accider | ital Death I | Benefit (Age | es 17-59) | | | Coverage is |
| Age | \$10,000 | | | | | | | | | Guaranteed at |
| (ALB) | Face | \$18.00 | \$20.00 | \$24.00 | \$28.00 | \$30.00 | \$32.00 | \$35.00 | \$40.00 | Table Premium |
| 15D-1 | | | | | | | | | | 81 |
| 2-4 | | | | | | | | | | 80 |
| 5-8 | | | | | | | | | | 79 |
| 9-10 | | | | | | | | | | 79 |
| 11-16 | | 20.275 | 44.977 | | | | | | | 77 |
| 17-20 21-22 | | 39,375 38,415 | 44,375 43,293 | | | | | | | 75 74 |
| 21-22 | | 37,500 | 43,293 42,262 | | | | | | | 74 75 |
| 24-25 | | 36,628 | 41,280 | | | | | | | 74 |
| 24 20 | | 35,000 | 39,445 | 48,334 | | | | | | 75 |
| 27-28 | | 34,240 | 38,587 | 47,283 | | | | | | 74 |
| 29 | | 33,511 | 37,766 | 46,277 | | | | | | 74 |
| 30-31 | | 32,813 | 36,980 | 45,313 | | | | | | 73 |
| 32 | | 30,883 | 34,804 | 42,648 | | | | | | 74 |
| 33 | | 29,717 | 33,491 | 41,038 | 48,585 | | | | | 74 |
| 34 | | 28,125 | 31,697 | 38,840 | 45,983 | 49,554 | | | | 75 |
| 35 | | 26,250 | 29,584 | 36,250 | 42,917 | 46,250 | 49,584 | | | 76 |
| 36 | | 25,404 | 28,630 | 35,081 | 41,533 | 44,759 | 47,984 | | | 76 |
| 37 | | 24,231 | 27,308 | 33,462 | 39,616 | 42,692 | 45,770 | 10,100 | | 77 |
| 38 | | 23,162 | 26,103 | 31,986 | 37,868 | 40,809 | 43,751 | 48,162 | | 77 |
| 39 | 10.05 | 21,576 | 24,315 | 29,795 | 35,274 | 38,014 | 40,754 | 44,864 | 40.200 | 78 |
| 40 41 | $10.05 \\ 10.75$ | $20,192 \\ 18,530$ | 22,757 20,883 | 27,885 25,589 | 33,013 30,295 | 35,577 32,648 | $38,142 \\ 35,000$ | 41,988 38,530 | 48,398 44,412 | 79 80 |
| 41 42 | 10.75 11.55 | 16,936 | 19,083 | 23,389 | 27,688 | 29,839 | 31,990 | 35,330 35,216 | 44,412 40,592 | 80 81 |
| 43 | 12.25 | 15,750 | 17,750 | 21,750 | 25,750 | 27,750 | 29,750 | 32,750 | 40,052 37,750 | 82 |
| 44 | 12.25 | 10,700 14,720 | 16,589 | 20,328 | 24,065 | 25,935 | 25,100 27,804 | 30,608 | 35,281 | 83 |
| 45 | 13.65 | 13,816 | 15,570 | 19,079 | 22,588 | 24,343 | 26,097 | 28,729 | 33,115 | 83 |
| 46 | 14.45 | 12,910 | 14,550 | 17,828 | 21,107 | 22,746 | 24,386 | 26,845 | 30,942 | 84 |
| 47 | 15.15 | 12,210 | 13,760 | 16,861 | 19,962 | 21,512 | 23,062 | 25,388 | 29,264 | 84 |
| 48 | 15.85 | $11,\!581$ | 13,052 | 15,993 | 18,934 | 20,405 | 21,875 | 24,081 | 27,758 | 85 |
| 49 | 16.75 | 10,863 | 12,242 | 15,001 | 17,759 | 19,138 | 20,518 | 22,587 | 26,035 | 85 |
| 50 | 17.75 | 10,162 | 11,452 | 14,033 | $16,\!613$ | 17,904 | 19,193 | 21,130 | 24,355 | 86 |
| 51 | 18.95 | | 10,629 | 13,024 | 15,420 | 16,617 | 17,814 | 19,611 | $22,\!605$ | 87 |
| 52 52 | 20.25 | | | 12,084 | 14,306 | 15,417 | 16,528 | 18,194 | 20,973 | 88 |
| 53 54 | 21.25 22.25 | | | 11,447 10.875 | 13,553 | 14,606 | 15,658 | 17,237 16.275 | 19,869 | 88 |
| 54 55 | 22.25 23.35 | | | 10,875 10,309 | 12,875 12,204 | 13,875 13,152 | 14,875 14,100 | 16,375 15,522 | $\frac{18,875}{17,891}$ | 88 89 |
| 55 56 | 23.35 24.35 | | | 10,309 | 12,204 11,652 | 13,152 12,557 | 14,100 13,462 | 15,522 14,819 | 17,891 17,082 | 89 89 |
| 50 57 | 24.55 25.55 | | | | 11,052 11,052 | 12,557 | 13,402 12,769 | 14,019 14,056 | 16,202 | 89 |
| 58 | 26.65 | | | L | 10,554 | 11,373 | 12,100 | 13,423 | 15,472 | 89 |
| 59 | 27.85 | | | | 10,059 | 10,840 | 11,622 | 12,793 | 14,747 | 89 |
| 60 | 28.55 | | | | | 10,552 | 11,312 | 12,453 | $14,\!354$ | 90 |
| 61 | | | | | | | | | | 90 |
| 62 | | | | | | | | | | 90 |
| 63 | | | | | | | | | | 90 |
| 64 | | | 7 | | | | | | | 90 |
| 65 66 | | | | | | | | | | 90 |
| 66 | | | | | | | | | | 90 |
| 67 68 | | | | | | | | | | 91 01 |
| $\frac{68}{69}$ | | | | | | | | | | 91 91 |
| 69 70 | | | | | | | | | | 91 |
| | | | surance to At | | | | | | | |

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

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

| | | | | | | | | | | GUARANTEE |
|------------|------------------|------------------|--------------------|--------------------|--------------------|--------------------|--------------------|------------------|------------------|---------------|
| | | Lif | fe Insura | ice Face | Amounts | for Month | hly Premi | iums 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 | | | | | | , | | | Guaranteed at |
| ALB) | Face | \$26.00 | \$28.00 | \$30.00 | \$35.00 | \$40.00 | \$45.00 | \$50.00 | \$55.00 | Table Premiun |
| .5D-1 | | | | | | | | | | 81 |
| 2-4 | | | | | | | | | | 80 |
| 5-8 | | | | | | | | | | 79 |
| 9-10 | | | | | | | | | | 79 |
| 1-16 | | | | | | | | | | 77 |
| 7-20 | | 39,584 | 42,917 | 46,250 | | | | | | 71 |
| 1-22 | | 37,699 | 40,874 | 44,048 | 40,000 | | | | | 71 |
| 23 4-25 | | 35,985 34,927 | $39,016 \\ 37,868$ | $42,046 \\ 40,809$ | 49,622 48,162 | | | | | 72 71 |
| 26 | | 33,929 | 36,786 | 40,809 39,643 | 48,162 46,786 | | | | | 71 72 |
| 20 7-28 | | 33,929 32,987 | 35,764 | 33,043 38,542 | 40,780 45,487 | | | | | 72 71 |
| 29 | | 32,535 | 35,274 | 38,014 | 44,864 | | | | | 71 |
| 0-31 | | 28,615 | 31,025 | 33,434 | 39,458 | 45,482 | | | | 72 |
| 32 | | 27,617 | 29,942 | 32,268 | 38,082 | 43,896 | 49,710 | | | 72 |
| 33 | | 27,299 | 29,598 | $31,\!897$ | 37,644 | 43,391 | 49,138 | | | 72 |
| 34 | | 26,989 | 29,262 | 31,535 | 37,216 | 42,898 | 48,580 | | | 71 |
| 35 | | 25,000 | 27,106 | 29,211 | 34,474 | 39,737 | 45,000 | | | 72 |
| 36 | | 24,235 | 26,276 | 28,316 | 33,419 | 38,521 | 43,623 | 48,725 | | 72 |
| 37 | | 22,620 | 24,524 | 26,429 | 31,190 | 35,953 | 40,715 | 45,477 | 40.049 | 73 |
| 38 39 | | 21,991 20,475 | 23,843 22,199 | 25,694 23,923 | 30,324 28,233 | 34,954 32,544 | $39,584 \\ 36,854$ | 44,213 | 48,843 45,475 | 73 74 |
| 40 | 14.95 | 20,475 | 22,199 | 25,925 21,851 | 28,233 | 29,725 | 33,662 | 41,164 37,599 | 45,475 41,536 | 74 76 |
| 40 | 14.55 | 13,701 17,464 | 18,934 | 21,001 20,405 | 23,188 | 25,725 27,758 | 31,434 | 35,111 | 38,787 | 77 |
| 42 | 16.95 | 16,157 | 17,518 | 18,878 | 22,279 | 25,681 | 29,082 | 32,483 | 35,885 | 78 |
| 43 | 18.35 | 14,752 | 15,994 | 17,237 | 20,342 | 23,447 | 26,553 | 29,659 | 32,764 | 80 |
| 44 | 19.05 | 14,137 | 15,328 | 16,518 | 19,495 | 22,471 | 25,446 | 28,423 | 31,399 | 80 |
| 45 | 20.05 | 13,343 | 14,467 | 15,590 | 18,399 | 21,208 | 24,017 | 26,826 | $29,\!635$ | 81 |
| 46 | 20.85 | 12,769 | 13,845 | 14,920 | 17,608 | 20,296 | 22,984 | 25,673 | 28,361 | 81 |
| 47 | 21.85 | 12,118 | 13,138 | 14,159 | 16,710 15,070 | 19,261 | 21,812 | 24,363 | 26,914 | 82 |
| 48 | 22.75 | 11,586 | 12,561 | 13,537 | 15,976 | 18,415 | 20,854 | 23,293 | 25,732 | 82 |
| 49 50 | $24.05 \\ 25.15$ | 10,895 10,372 | $11,812 \\ 11,245$ | $12,730 \\ 12,118$ | $15,023 \\ 14,302$ | $17,316 \\ 16,485$ | $19,611 \\ 18,669$ | 21,904 20,852 | 24,197 23,035 | 83 83 |
| 50 51 | 25.15 26.25 | 10,572 | 11,240 10,730 | 12,110 11,563 | 14,502 13,646 | 10,435 15,730 | 17,813 | 19,896 | 23,035 21,980 | 83 |
| 52 | 27.85 | | 10,059 | 10,840 | 12,793 | 14,747 | 16,699 | 18,653 | 20,606 | 84 |
| 53 | 29.25 | | | 10,278 | 12,130 | 13,982 | 15,833 | 17,686 | 19,538 | 85 |
| 54 | 30.55 | | | | 11,572 | 13,339 | 15,107 | 16,873 | 18,640 | 85 |
| 55 | 31.95 | | | | 11,027 | 12,711 | 14,394 | 16,077 | 17,761 | 85 |
| 56 | 33.55 | | | | 10,463 | 12,061 | $13,\!659$ | 15,256 | $16,\!854$ | 85 |
| 57 | 35.15 | | | | | 11,475 | 12,994 | 14,514 | 16,034 | 86 |
| 58 50 | 36.85 | | 4 | | | 10,911 | 12,356 | 13,801 | 15,246 | 86 86 |
| 59 60 | 38.55 20.55 | | | | | 10,400 | 11,777 | 13,155 | 14,532 | 86 86 |
| 60 61 | 39.55 | | | | | 10,121 | 11,462 | 12,802 | 14,143 | 86 86 |
| 61 62 | | | | | | | | | | 80 87 |
| 63 | | | | | | | | | | 87 |
| 64 | | | 1 | | | | | | | 87 |
| 65 | | | | | | | | | | 87 |
| 66 | | | | | | | | | | 88 |
| 67 | | | | | | | | | | 88 |
| 68 | | | | | | | | | | 88 |
| 69 | | | | | | | | | | 88 |
| 70 | | | | | | | | | | 89 |

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 | Employer: | | | | Policy Number: | | |
| 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 ² | 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) | | I | Relatior | nship: | 1 | |
| | M/F | | | □ Yes □ |] No | | | |
| Social Sec No | | | | | | | | |
| Beneficiary (Employee is beneficiary | / unless otherw | ise stated here) | | 1 | Relatior | nship: | | |
| | M/F | | | 🗆 Yes 🛛 |] No | | | |
| Social Sec No | | | | | | | | |
| Beneficiary (Employee is beneficiary | / unless otherw | ise stated here) | | 1 | Relatior | nship: | | |
| | 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: | Employee Spouse | | Total premium: \$ | | | | | |
| □ Accidental Death ³ □ Waiver Premi | \Box Accidental Death ³ \Box Waiver Premium ³ \Box Chronic IIIness | | | | | | | |
| 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 las | Employee | Spouse | Children | | | | | | |
|--|---|----------------------------|----------|--------|-------|--|--|--|--|
| | | Yes No | Yes No | Yes No | | | | | |
| a. Been actively details below. | at work on a full time basis, performin | | | N/A | | | | | |
| b. Been absent f five consecutiv | | | N/A | | | | | | |
| c. Been disabled home or receir dialysis treatn | | | | | | | | | |
| 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. | | | | | | | | | |
| 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

Х_____

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 21M013-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 contract you applied for. It tells how we treat that information. If anyone else is to be insured under the contract 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 04/20

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 contract

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

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