

SERFF Tracking Number: ALSB-125860231 State: Arkansas
Filing Company: Lincoln Benefit Life Company State Tracking Number: 40586
Company Tracking Number: LBL6961-3
TOI: A10 Annuities - Other Sub-TOI: A10.000 Annuities - Other
Product Name: LBL6961-3
Project Name/Number: LBL6961-3/LBL6961-3

Filing at a Glance

Company: Lincoln Benefit Life Company

Product Name: LBL6961-3

TOI: A10 Annuities - Other

Sub-TOI: A10.000 Annuities - Other

Filing Type: Form

SERFF Tr Num: ALSB-125860231

State: ArkansasLH

SERFF Status: Closed

State Tr Num: 40586

Co Tr Num: LBL6961-3

State Status: Filed-Closed

Co Status:

Reviewer(s): Linda Bird

Author: Rebecca Marquez

Disposition Date: 10/23/2008

Date Submitted: 10/16/2008

Disposition Status: Filed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: LBL6961-3

Project Number: LBL6961-3

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 10/23/2008

State Status Changed: 10/23/2008

Corresponding Filing Tracking Number: LBL6961-3

Filing Description:

RE: LBL6961-3 Illustration

Status of Filing in Domicile: Not Filed

Date Approved in Domicile:

Domicile Status Comments: Not required to file
advertising.

Market Type: Individual

Group Market Size:

Group Market Type:

Deemer Date:

We submit the above-referenced form for your attention and approval. This is a new form, not previously submitted, and does not replace any currently approved forms.

Form LBL6961-3 is an Illustration that will be used to promote Lincoln Benefit Life Company's policy form number AP0500 approved by state on March 29, 2005.

SERFF Tracking Number: ALSB-125860231 State: Arkansas
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Product Name: LBL6961-3
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These forms have been generated by our home office computer system. These forms may also be generated using other hardware, which can result in changes in formatting (e.g., typeface, margins, page breaks), but the contents will remain unaffected.

Please note that some of the variable information on the pdfs of these forms was bracketed using Adobe Acrobat. Although the bracketing appears on the attached pdfs when viewed electronically, the bracketing may not appear on printed hard copies unless your printer is given special instructions to do so.

If you have any questions, please feel free to contact me at the address, phone, ore e-mail provided. Thank you for your consideration of this matter.

Sincerely,

Rebecca A. Marquez
Senior Product & Financial Analyst
Contract Development and Filing

Company and Contact

Filing Contact Information

Rebecca Marquez,
3100 Sanders Rd, Suite M2A
Northbrook, IL 60062

bmarquez@allstate.com
(847) 402-4680 [Phone]
(847) 326-5224[FAX]

Filing Company Information

Lincoln Benefit Life Company
2940 South 84th Street
Lincoln, NE 68506-4142
(800) 525-2799 ext. [Phone]

CoCode: 65595
Group Code: 8
Group Name:
FEIN Number: 47-0221457

State of Domicile: Nebraska
Company Type:
State ID Number:

Filing Fees

SERFF Tracking Number: ALSB-125860231 State: Arkansas
Filing Company: Lincoln Benefit Life Company State Tracking Number: 40586
Company Tracking Number: LBL6961-3
TOI: A10 Annuities - Other Sub-TOI: A10.000 Annuities - Other
Product Name: LBL6961-3
Project Name/Number: LBL6961-3/LBL6961-3

Fee Required? Yes
Fee Amount: \$25.00
Retaliatory? No
Fee Explanation: 1 x 25 = \$25.00
Per Company: No

| COMPANY | AMOUNT | DATE PROCESSED | TRANSACTION # |
|------------------------------|---------|----------------|---------------|
| Lincoln Benefit Life Company | \$25.00 | 10/16/2008 | 23228071 |

SERFF Tracking Number: ALSB-125860231

State: Arkansas

Filing Company: Lincoln Benefit Life Company

State Tracking Number: 40586

Company Tracking Number: LBL6961-3

TOI: A10 Annuities - Other

Sub-TOI: A10.000 Annuities - Other

Product Name: LBL6961-3

Project Name/Number: LBL6961-3/LBL6961-3

Correspondence Summary

Dispositions

| Status | Created By | Created On | Date Submitted |
|---------------|-------------------|-------------------|-----------------------|
| Filed | Linda Bird | 10/23/2008 | 10/23/2008 |

SERFF Tracking Number: ALSB-125860231

State: Arkansas

Filing Company: Lincoln Benefit Life Company

State Tracking Number: 40586

Company Tracking Number: LBL6961-3

TOI: A10 Annuities - Other

Sub-TOI: A10.000 Annuities - Other

Product Name: LBL6961-3

Project Name/Number: LBL6961-3/LBL6961-3

Disposition

Disposition Date: 10/23/2008

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: *ALSB-125860231* State: *Arkansas*
 Filing Company: *Lincoln Benefit Life Company* State Tracking Number: *40586*
 Company Tracking Number: *LBL6961-3*
 TOI: *A10 Annuities - Other* Sub-TOI: *A10.000 Annuities - Other*
 Product Name: *LBL6961-3*
 Project Name/Number: *LBL6961-3/LBL6961-3*

| Item Type | Item Name | Item Status | Public Access |
|----------------------------|--------------------------------|--------------------|----------------------|
| Supporting Document | Certification/Notice | | No |
| Supporting Document | Application | | No |
| Supporting Document | Life & Annuity - Acturial Memo | | No |
| Form | Illustration | | Yes |

SERFF Tracking Number: ALSB-125860231 State: Arkansas
 Filing Company: Lincoln Benefit Life Company State Tracking Number: 40586
 Company Tracking Number: LBL6961-3
 TOI: A10 Annuities - Other Sub-TOI: A10.000 Annuities - Other
 Product Name: LBL6961-3
 Project Name/Number: LBL6961-3/LBL6961-3

Form Schedule

Lead Form Number: LBL6961-3

| Review Status | Form Number | Form Type | Form Name | Action | Action Specific Data | Readability | Attachment |
|---------------|-------------|-------------|--------------|---------|----------------------|-------------|---------------|
| | LBL6961-3 | Advertising | Illustration | Initial | | | LBL6961-3.pdf |

Prepared for: C1: [<Entity Name or Owner Name> C2: [C3: { and} <Joint Owner Name>]
C4: [Annuitant: <Annuitant Name>]
C5: [Joint Annuitant: <Joint Annuitant Name>]

Lincoln Benefit Life Company
SureHorizonSM II
A Flexible Premium Deferred Annuity

C6: [<Proposal Description>]

C7: [Presented by:]

C8: [<Agent Name>
<Address Line 1>
<Address Line 2>
<City>, <State> <Zip>
<Phone #>]

C9: {Representing:<Agency Name> }

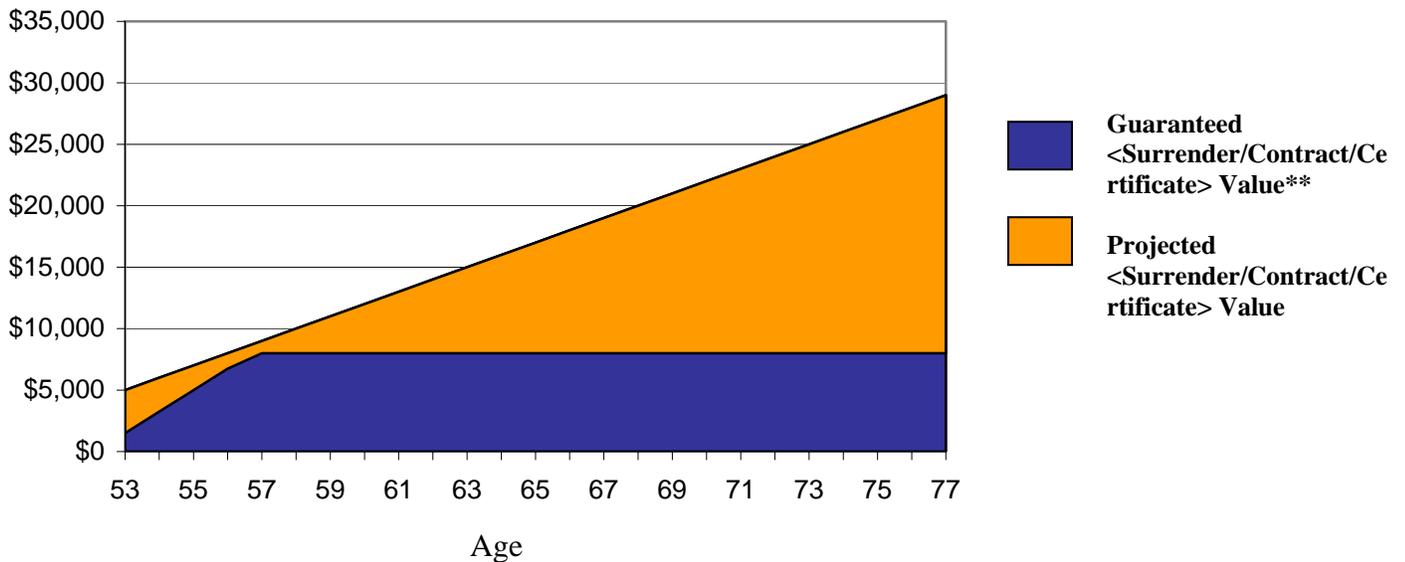
FC1: [The illustrated rate may not be current.]
See the End Notes page for details about this illustration.

This illustration is not valid without all pages.

Run Date: <mm/dd/yyyy>
Version <X.XX>
State of Issue: <Issue State>
Rate Code: <Eclipse Rate Code>

| | |
|---|---|
| Prepared for: | Presented by: |
| <Owner Name>, HC1: [<Sex>, Age: <xx>] HC2: [<Jt Owner>, <Sex>, Age: <xx>] HC3: [<Annuitant>, <Sex>, Age: <xx>] HC4: [<Jt Annuitant>, <Sex>, Age: <xx>] Tax Status: <Tax Qualification> HC6: [Riders Included: <Rider1> <Rider2>] | HC5: [<Agent Name> <Agency>] <Address Line 1> <Address Line 2> <City>, <State> <Zip> <Phone #>] |

<Surrender/Contract/Certificate> Values Summary*



| | <u>Guaranteed Rates**</u> | <u>Projected Rates</u> |
|--|---------------------------|------------------------|
| Your total contribution into the <contract/certificate> is: | \$<X,XXX> | \$<X,XXX> |
| Your <Surrender/Contract/Certificate> Value in <xx> years: | \$<Y,YYY> | \$<Z,ZZZ> |

Please refer to the ledger pages and End Notes of the illustration for more detail.

*Illustrated values do not reflect any **C1:** [Surrender Charges or] applicable premium taxes.

**Guarantees based on the claim paying ability of Lincoln Benefit Life.

FC1: [The illustrated rate may not be current.]
 See the End Notes page for details about this illustration.

This illustration is not valid without all pages.

| | |
|---|---|
| Prepared for: | Presented by: |
| <Owner Name>, HC1: [<Sex>, Age: <xx>] HC2: [<Jt Owner>, <Sex>, Age: <xx>] HC3: [<Annuitant>, <Sex>, Age: <xx>] HC4: [<Jt Annuitant>, <Sex>, Age: <xx>] Tax Status: <Tax Qualification> HC6: [Riders Included: <Rider1> <Rider2>] | HC5: [<Agent Name> <Agency>] <Address Line 1> <Address Line 2> <City>, <State> <Zip> <Phone #>] |

GUARANTEE PERIOD DETAIL

GUARANTEE PERIOD: <X> Years
INITIAL GUARANTEED ANNUALIZED INTEREST RATE: <X.XX>%
C1: [FIRST YEAR BONUS: <Y.YY>%]
C2: [PLUS AN ADDITIONAL BONUS]

C3: [This illustration was generated using an expired interest rate code.
Interest rates used in this illustration do not represent current interest rates.]

GUARANTEED VALUES*

PROJECTED VALUES*

| Yr | Age | Annualized Contributions | C4: ↓ Annualized C5: [<Modal>] Withdrawals | C6: ↓ Annualized Yield | <Contract/ Certificate> Value | Surrender Value | C7: ↓ Annualized Yield | <Contract/ Certificate> Value | Surrender Value |
|----|-----|--------------------------|--|------------------------------|-------------------------------------|--------------------|------------------------------|-------------------------------------|--------------------|
| | | | 1 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 2 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 3 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 4 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 5 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 6 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 7 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 8 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 9 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 10 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 11 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 12 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 13 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 14 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 15 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 16 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 17 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 18 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 19 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |
| 20 | XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX |

*Illustrated values do not reflect any applicable premium taxes.

FC1: [The illustrated rate may not be current.]
 See the End Notes page for details about this illustration.

This illustration is not valid without all pages.

Disregard this blank page.

| | |
|---|---|
| Prepared for: | Presented by: |
| <Owner Name>, HC1: [<Sex>, Age: <xx>] HC2: [<Jt Owner>, <Sex>, Age: <xx>] HC3: [<Annuitant>, <Sex>, Age: <xx>] HC4: [<Jt Annuitant>, <Sex>, Age: <xx>] Tax Status: <Tax Qualification> HC6: [Riders Included: <Rider1> <Rider2>] | HC5: [<Agent Name> <Agency>] <Address Line 1> <Address Line 2> <City>, <State> <Zip> <Phone #>] |

LONG TERM CARE BENEFIT RIDER DETAIL PROJECTED VALUES*

GUARANTEE PERIOD: <X> Years

C1: [This illustration was generated using an expired interest rate code.
 Interest rates used in this illustration do not represent current interest rates.]

INITIAL GUARANTEED ANNUALIZED INTEREST RATE: <X.XX>%

C2: [FIRST YEAR BONUS: <Y.YY>%]

C3: [PLUS AN ADDITIONAL BONUS]

ENHANCEMENT FACTOR: <XX>%

ACCELERATION PERCENTAGE: <Y>%

Rider Charge: <Z.ZZ>% of the LTC Benefit Base

C4: [Optional Non-forfeiture Benefit has been selected]

C5: ↓ **C6:** ↓ **C7:** ↓

| Yr | Age | Annualized Contributions | Required Additional Purchase Payment** | Annualized Benefit Withdrawals | Annualized Yield | <Contract/Certificate> Value | Surrender Value | Long Term Care Benefit Base | Total Available LTC Benefit | Total Available Enhanced Benefit | Maximum Monthly Base Benefit Amount | Maximum Monthly Enhanced Benefit Amount | Maximum Monthly Benefit Amount |
|----|-----|--------------------------|--|--------------------------------|------------------|------------------------------|-----------------|-----------------------------|-----------------------------|----------------------------------|-------------------------------------|---|--------------------------------|
| 1 | XX | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |
| 2 | XX | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |
| 3 | XX | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |
| 4 | XX | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |
| 5 | XX | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |
| 6 | XX | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |
| 7 | XX | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |
| 8 | XX | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |
| 9 | XX | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |
| 10 | XX | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |

*Illustrated values do not reflect any applicable premium taxes.

C8: [**For Inflation Protection Benefit]

FC1: [The illustrated rate may not be current.]
 See the End Notes page for details about this illustration.

This illustration is not valid without all pages.

| | |
|---|---|
| Prepared for: | Presented by: |
| <Owner Name>, HC1: [<Sex>, Age: <xx>] HC2: [<Jt Owner>, <Sex>, Age: <xx>] HC3: [<Annuitant>, <Sex>, Age: <xx>] HC4: [<Jt Annuitant>, <Sex>, Age: <xx>] Tax Status: <Tax Qualification> HC6: [Riders Included: <Rider1> <Rider2>] | HC5: [<Agent Name> <Agency>] <Address Line 1> <Address Line 2> <City>, <State> <Zip> <Phone #>] |

LONG TERM CARE BENEFIT RIDER DETAIL GUARANTEED VALUES*

GUARANTEE PERIOD: <X> Years

C1: [This illustration was generated using an expired interest rate code.
 Interest rates used in this illustration do not represent current interest rates.]

INITIAL GUARANTEED ANNUALIZED INTEREST RATE: <X.XX>%

C2: [FIRST YEAR BONUS: <Y.YY>%]

C3: [PLUS AN ADDITIONAL BONUS]

C5: ↓ **C6:** ↓ **C7:** ↓

ENHANCEMENT FACTOR: <XX>%

ACCELERATION PERCENTAGE: <Y>%

Rider Charge Years 1-6: <Z.ZZ>% of the LTC Benefit Base

Rider Charge Years 7+: <V.VV>% of the LTC Benefit Base

C4: [Optional Non-forfeiture Benefit has been selected]

| Yr | Age | Annualized Contributions | Required Additional Purchase Payment** | Annualized Benefit Withdrawals | Annualized Yield | <Contract/Certificate> Value | Surrender Value | Long Term Care Benefit Base | Total Available LTC Benefit | Total Available Enhanced Benefit | Maximum Monthly Base Benefit Amount | Maximum Monthly Enhanced Benefit Amount | Maximum Monthly Benefit Amount |
|----|-----|--------------------------|--|--------------------------------|------------------|------------------------------|-----------------|-----------------------------|-----------------------------|----------------------------------|-------------------------------------|---|--------------------------------|
| 1 | 53 | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |
| 2 | 54 | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |
| 3 | 55 | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |
| 4 | 56 | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |
| 5 | 57 | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |
| 6 | 58 | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |
| 7 | 59 | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |
| 8 | 60 | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |
| 9 | 61 | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |
| 10 | 62 | X,XXX | X,XXX | X,XXX | X.XX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX | X,XXX |

*Illustrated values do not reflect any applicable premium taxes.

C8: [**For Inflation Protection Benefit]

FC1: [The illustrated rate may not be current.]

See the End Notes page for details about this illustration.

This illustration is not valid without all pages.

| | |
|---|---|
| Prepared for: | Presented by: |
| <Owner Name>, HC1: [<Sex>, Age: <xx>] HC2: [<Jt Owner>, <Sex>, Age: <xx>] HC3: [<Annuitant>, <Sex>, Age: <xx>] HC4: [<Jt Annuitant>, <Sex>, Age: <xx>] Tax Status: <Tax Qualification> HC6: [Riders Included: <Rider1> <Rider2>] | HC5: [<Agent Name> <Agency>] <Address Line 1> <Address Line 2> <City>, <State> <Zip> <Phone #>] |

<Distribution Type>

| Starting In Year S ^x | Ending In Year E ^x | Description |
|---------------------------------------|-------------------------------------|---|
| | | SC1: Withdrawals illustrated in this period are Substantially Equal Periodic Payments (SEPP) based on <Method> using the <Table> Table SC2: {and an Interest Rate of <R.RR>%}. SC3: {This payment is recalculated every year.} |
| | | RC1: Withdrawals illustrated in this period are Required Minimum Distributions (RMDs) based on <Single/Joint> Life Expectancy using a <Beneficiary> beneficiary RC2: {who is age AA at issue}. This payment is recalculated every year. |

SC4:

This SEPP quote is for illustrative purposes only. Please note that the SEPP amounts quoted in this illustration may change when the SEPP is activated if the value of the <contract/certificate> is different and/or the interest rate in the month of activation is different from the interest rate used in the month the SEPP is quoted.

A 10% tax penalty is imposed on distributions from any tax-deferred annuity <contracts/certificates> prior to age 59 ½. Section 72(q) for non-qualified annuities and Section 72(t) for tax qualified annuities provide that the 10% penalty tax shall not apply to distributions which are a part of a series of substantially equal periodic payments for life or life expectancy. In accordance, payments must be made no less frequently than annually and must continue for the longer of 5 years or until the owner reaches age 59 ½. Any modifications to the Annuity <contract/certificate> or payment stream may result in the <contract/certificate> holder being subject to a retroactive 10% penalty tax, plus interest, by the Internal Revenue Service. The <contract/certificate> year is assumed to begin on 1/1. The interest rate cannot exceed the highest 120% of mid-term AFR from the previous two months prior to the start date.

RC3:

This RMD quote is for illustrative purposes only. RMDs are required for IRAs (excluding Roth IRAs), 403(b)s, and other qualified plans. The Required Beginning Date (RBD) for RMDs is April 1 of the year after you turn age 70 ½. This illustration assumes you take your first year's RMD by 12/31 of the year you turn 70 ½. RMDs must be distributed by 12/31 of each year after the RBD to avoid a 50% excess accumulation tax penalty. For IRAs, the RMD must be calculated for each individual <contract/certificate> you own, but the total RMD may be taken from any of the IRAs. The same rule applies to 403(b)s. However, for other qualified plans, the RMD must be calculated separately and taken from each respective plan. This illustration assumes a single life expectancy using the uniform lifetime table. Joint life expectancy is only permitted with a spouse beneficiary more than 10 years younger than you. The RMD amount quoted in this illustration is based on the sole value of this <contract/certificate> as of the end of the <contract/certificate> year. The <contract/certificate> year is assumed to begin on 1/1. Actual RMD will be based on the value as of the end of the calendar year. This RMD illustration does not calculate RMD required for beneficiaries. RMD amounts cannot be rolled over to other IRAs or qualified plans.

FC1: [The illustrated rate may not be current.]

See the End Notes page for details about this illustration.

C1: [ADDENDUMS

| <u>Year</u> | <u>Activity or Action</u> |
|-------------------|---|
| C1a: {<XX> | <Policy/Certificate> lapses based on minimum assumptions.} |
| C1b: {<XX> | <Policy/Certificate> lapses based on projected assumptions.} |
| C1c: {<XX> | Specified withdrawals have been reduced due to insufficient <policy/certificate> values.} |
| C1d: {<XX> | Specified withdrawals have been reduced due to withdrawal charges.} |

END NOTES

THIS IS AN ILLUSTRATION ONLY. AN ILLUSTRATION IS NOT INTENDED TO PREDICT ACTUAL PERFORMANCE. INTEREST RATES **CAC2: [, DIVIDENDS,] AND VALUES SET FORTH IN THE ILLUSTRATION ARE NOT GUARANTEED EXCEPT FOR THOSE ITEMS CLEARLY LABELED AS GUARANTEED. ANY NON-GUARANTEED ELEMENTS ILLUSTRATED ARE SUBJECT TO CHANGE AND COULD BE EITHER HIGHER OR LOWER RESULTING IN ANNUITY VALUES WHICH ARE EITHER HIGHER OR LOWER.**

<CONTRACT/CERTIFICATE> VALUES:

At Projected Rates:

Values reflect the combined balances of all guarantee period accounts assuming the following interest rates:

1 Year Guarantee Account base rate is <X.XX>%

- Each contribution into the 1 Year Guarantee Account begins its own 1 Year Guarantee Period.
- **C3:** [Each contribution made in the first 6 years will receive a <Y.YY>% bonus for 1 year. This bonus is subject to change.]

C4: [<X> Year Guarantee Account base rate is <X.XX>%

- Each contribution in the <X> Year Guarantee Account begins its own <X> Year Guarantee Period.
- After the initial guarantee period, each contribution will renew at the 1-year guarantee rate.
- **C5:** {Each contribution made in the first 6 years will receive a <Y.YY>% bonus for 1 year. This bonus is subject to change. }

Additional rates for all available guarantee periods:

- **C6:** [Each contribution made in the first 6 years will also receive a <Y.YY>% bonus for 1 year to those contributions made that increase the accumulated account value to \$<X,XXX.XX> or greater.]
- **C7:** [Each purchase payment received during the first two <contract/certificate> years receives an additional <Z.ZZ>% bonus for 1 year.]

At Guaranteed Rates:**

1 Year Guarantee Account base rate is <X.XX>%

- Each contribution into the 1 Year Guarantee Account begins its own 1 Year Guarantee Period.
- After the initial guarantee period, each contribution will renew at the Minimum Guaranteed Rate.

C8: [<X> Year Guarantee Account base rate is <X.XX>%

- Each contribution in the <X> Year Guarantee Account begins its own <X> Year Guarantee Period.
- After the initial guarantee period, each contribution will renew at the Minimum Guaranteed Rate.]

C9: [Additional rates for all available guarantee periods:

- Each purchase payment received during the first two <contract/certificate> years receives an additional <Z.ZZ>% bonus for 1 year.]

**All guarantees based on the claim paying ability of Lincoln Benefit Life.

C10: [GUARANTEE PERIOD DETAIL:

These pages reflect the values of each individual guarantee period using projected and guaranteed interest rate assumptions. Illustrated values do not reflect any applicable state premium taxes.]

FC1: [The illustrated rate may not be current.]

This illustration is not valid without all pages.

END NOTES (continued)

SURRENDER VALUES:

The Surrender Value is the value of your <contract/certificate> upon full withdrawal. Illustrated surrender values reflect the following charges:

| | | | | | | | |
|------------------------------|---|---|---|---|---|---|----|
| <Contract/Certificate> Year: | 1 | 2 | 3 | 4 | 5 | 6 | 7+ |
| Withdrawal Charge: | 8 | 8 | 7 | 6 | 5 | 4 | 0 |

Each year you may withdraw up to 15% of the <contract/certificate> value without paying a withdrawal charge.

<Contract/Certificate> Maintenance Charges are illustrated if the total account value is less than \$3,000.00 at each <contract/certificate> anniversary, or if, upon full surrender, the total account value is less than \$3,000.00.

C11: [WITHDRAWALS:

Withdrawals are taken at the <beginning/end> of the selected distribution period.

Each year you may withdraw up to 15% of the <contract/certificate> value without paying a withdrawal charge. Illustrated values do not reflect withdrawal charges.

Withdrawals taken prior to annuitization are generally considered to come from the gain in the <contract/certificate> first. If the <contract/certificate> is tax-qualified, generally all withdrawals are treated as distributions of gain. Withdrawals of gain are taxed as ordinary income and, if taken prior to age 59 ½, may be subject to an additional 10% federal tax penalty.]

C12: [Return of Purchase Payment Guarantee Rider (Form <GAR/AR> 0203): The owner may withdraw the entire <contract/certificate> value to terminate the <contract/certificate>. The amount received will never be less than all Purchase Payments minus any prior withdrawals and any applicable taxes we withhold for you.]

C13: [Rider for Long Term Care Services (AR0809): This optional rider provides monthly benefit payments for the Covered Person who has been determined to be chronically ill and is receiving qualified long term care services. The Maximum Monthly Benefit may be up to <X>% of the Long Term Care Benefit Base, which is the portion of the <Contract/Certificate> Value that is eligible to be paid out for Qualified Long Term Care Services benefits under this Rider. The Benefit Base will grow with the same interest rate as the base annuity or at a higher rate if the additional contributions required by Optional Inflation Protection are paid. Long Term Care Benefit payments consist of: (1) a Base Benefit, where the Cash Value of the <Contract/Certificate> is used to partially fund the LTC benefit payment and; (2) an Enhanced Benefit which is a component paid by the Insurance Company and has no effect on the Cash Value of the <Contract/Certificate>. To the extent that the benefit payments do not exceed per diem HIPAA limits, all the benefits paid under the Rider will be excludable from the recipient's gross income. Benefits shown in this illustration are year-end values. **C14:** {This illustration assumes a 5% Inflation Protection percentage and that all Additional LTC Required Premiums are paid on the <Contract/Certificate> Anniversary.} Benefit payments made under this Rider are subject to the waiting period and elimination periods, however, they are not subject to surrender charges. All Base Benefits received under this rider will reduce the <Contract/Certificate> Value and benefit base. Any withdrawals may reduce the maximum benefit available. The Monthly Maximum Benefit cannot exceed the daily HIPAA limit in effect multiplied by 30. **C15:** {If the Optional Non-forfeiture Benefit has been selected, a higher rider charge will be applied.} Rider charges are subject to change. See the rider form for terms, conditions and limitations.]

GENERAL INFORMATION:

C16: [Waiver of Charges (Form <GAR/AR> 0201): The owner may withdraw all or part of the account value without incurring a surrender charge if, at least 30 days after issue, it becomes medically necessary to confine the owner to a hospital or long term care facility for 90 days or more, OR if, at least 30 days after issue, the owner is diagnosed with a terminal illness, OR the owner becomes unemployed at least one year after the issue date and the owner receives unemployment compensation for at least 30 days as a result of that unemployment. The terminal illness and the unemployment Waiver of Charges each apply only once during the term of the <contract/certificate>.]

In addition, applicable withdrawal charges will be waived if at least 1 year after issue the owner cannot perform at least 2 of 6 Activities of Daily Living for at least 90 days. (See Form AR0536 for more information)

Waiver provisions are subject to state availability.

FC1: [The illustrated rate may not be current.]

This illustration is not valid without all pages.

END NOTES (continued)

Lincoln Benefit Life Company or any of its representatives do not provide tax, legal, or accounting advice. You should seek competent professional advice for answers to your tax or legal questions.

C17: [***Indicates that the <contract/certificate> has lapsed. Illustrated withdrawals, if any, would not be taken from guaranteed value.]

Values shown have been rounded to the nearest dollar.

The <Product Marketing Name> is a <Product Description> issued by Lincoln Benefit Life Company, 2940 S. 84th St., Lincoln, NE 68506. Lincoln Benefit Life is a wholly owned subsidiary of Allstate Life Insurance Company, Northbrook, IL.

The <Product Marketing Name> is available in most states through Contract Form Number Series <Series #> or Certificate Form Number Series <GSeries #>.

Guarantees are based on the claims-paying ability of Lincoln Benefit Life Company.

Not FDIC, NCUA/NCUSIF insured. Not a Deposit. No bank or credit union guarantee. Not insured by any federal agency.

This illustration is for illustrative purposes only; nothing herein is a <contractual/certificate> obligation. Should there be any discrepancy between this illustration and the contract issued, the language of the contract shall prevail.

FC1: [The illustrated rate may not be current.]

This illustration is not valid without all pages.

Acknowledgements

Prepared For: C1: [<Entity Name or Owner Name> C2: [C3: { and} <Joint Owner Name>]

By signing here, I confirm that:

- I have received a copy of this illustration.
- I understand that this illustration demonstrates how the annuity works and is not a guarantee of future performance other than what is supported within this document. I also understand the terms of the contract control the benefits I will receive.
- I understand that all rates used throughout this illustration are hypothetical, and any non-guaranteed elements illustrated are subject to change and could either be higher or lower resulting in annuity values that may be either higher or lower.

Signature of Proposed Owner

Date

C4: [_____
Signature of Proposed Joint Owner

Date]

C5: [Presented by:]

C6: [<Agent Name>
<Address Line 1>
<Address Line 2>
<City>, <State> <Zip>
<Phone #>]

C7: {Representing:<Agency Name>}

By signing here, I certify that:

- This illustration has been presented to <Entity Name or Owner Name>.
- The Owner has been told that the values illustrated are not guaranteed unless stated as a guarantee.
- No statements have been made that are inconsistent with this illustration.

Signature of Agent

Date

FC1: [The illustrated rate may not be current.]
See the End Notes page for details about this illustration.

This illustration is not valid without all pages.

Run Date: <mm/dd/yyyy>
Version <X.XX>

State of Issue: <Issue State>
Rate Code: <Eclipse Rate Code>

Our Promise to You:



Welcome from Lincoln Benefit Life Company in Lincoln, Nebraska. From our offices in America's heartland, we've helped families across the nation obtain affordable insurance protection since 1938.

Today, our proud tradition continues. We provide innovative financial products that offer solutions to independent-minded individuals who like to make their own, informed choices. And family protection is as important to us as it is to our customers.

You can rely on Lincoln Benefit Life because of what we promise you: Value, Service and Innovation.

Value:

Lincoln Benefit Life continues to grow and provide protection to more and more policyholders because we offer more value. You find innovative, high-quality financial products that offer insurance solutions for your money when you come to Lincoln Benefit Life. And, you're assured of affordable insurance plans financial products that are right for your own individual needs.

FC1: [The illustrated rate may not be current.]
See the End Notes page for details about this illustration.

This illustration is not valid without all pages.

Service:

You receive personal service linked with stability you can trust from Lincoln Benefit Life. Our size and business expertise provides a sound financial base, yet our heartland roots mean we always treat you like an individual, not like a number. Our dedication to honesty and ethics, and our commitment to offer clear answers to your questions, assure you we will help you meet your insurance and retirement needs as your circumstances change and grow.

Innovation:

New and innovative insurance solutions are a trademark of Lincoln Benefit Life and one of our secrets to success. We create insurance and investment products to fit today's consumer needs.

You can count on Lincoln Benefit Life to discover new ways to support America's changing individual and family lifestyles. Remember that it's never too early or too late to think about your financial future.



FC1: [The illustrated rate may not be current.]
See the End Notes page for details about this illustration.

This illustration is not valid without all pages.

C1: [General

Home Office User ID: <HO User ID >]

Customers Tab

| | | | |
|--------------------------|-----------------------|--------------------------------|----------------|
| Owner's Name: | <Owner's Name > | Date of Birth: | <mm/dd/yyyy> |
| Age: | <XX> | Sex: | <Male/Female> |
| Entity as Owner: | <Yes/No> | Add Joint Owner: | <Yes/No> |
| Joint Owner's Name: | <Joint Owner's Name> | Date of Birth: | <mm/dd/yyyy> |
| Age: | <XX> | Sex: | <Male/Female> |
| Relationship to Owner: | <Spouse/Non-spouse> | | |
| Annuitant Same As Owner: | <Yes/No> | Annuitant Same as Joint Owner: | <Yes/No> |
| Annuitant's Name: | <Annuitant's Name> | Relationship to Owner: | <Relationship> |
| Date of Birth: | <mm/dd/yyyy> | Age: | <XX> |
| Sex: | <Male/Female> | | |
| Add Joint Annuitant: | <Yes/No> | JA Same as Owner: | <Yes/No> |
| JA Same as Joint Owner: | <Yes/No> | | |
| Joint Annuitant's Name: | <Jt Annuitant's Name> | Date of Birth: | <mm/dd/yyyy> |
| Age: | <XX> | Sex: | <Male/Female> |

Plan Info Tab

Tax Qualification: <Tax Qual >
 Rate Code: <XXXXXXXXXXXXXXXXXXXXX>
 Expiration Date: <mm/dd/yyyy>
 Past Rate Code: <Yes/No>
C2: [Past Password: <XXXXXXXXXXXXXXXXXXXXX>]

Riders Tab

| | | | |
|-------------------------------|----------|----------------------------------|----------|
| ROP Rider: | <Yes/No> | Acceleration Percentage: | <X>% |
| LTC Rider: | <Yes/No> | Optional Non-forfeiture Benefit: | <Yes/No> |
| Enhancement Factor: | <XX>% | Display Max Benefit Payments: | <Yes/No> |
| Display Inflation Protection: | <Yes/No> | Years to Display: | <YY> |
| Start Claim in Year: | <YY> | | |

Contributions Tab

| | | | |
|------------------------------|---------------------------|--------------------------------------|----------------------|
| Contribution Type: | <Contribution Type> | Amount: | \$<X,XXX.XX> |
| Premium Mode: | <Annual> | Years to Pay Premium: | <XX> |
| Account vs. Cash Value: | <Account/Cash> Value | Target Year: | <XX> |
| Target Value: | \$<X,XXX.XX> | Tax Year: | <Tax Year field> |
| Employer Contribution: | \$<X,XXX.XX> | Amount: | \$<X,XXX.XX> |
| Rollover/Transfer Amount: | \$<X,XXX.XX> | Allow for Catch Up: | <Yes/No> |
| Allocation: | <Pro-Rata/Amount/Percent> | Total Premium: | \$<X,XXX.XX> |
| <X> Yr Guarantee Period: | \$<X,XXX.XX> | C3: [<X> Yr Guarantee Period: | \$<X,XXX.XX> |
| <X> Yr Guarantee Period: | \$<X,XXX.XX>] | | |
| Premium Variations: | C4: [<None or | C6 [EC Variations: | C7: {<None or |
| Year <A> C5: {to : | \$<X,XXX.XX > | Year <A> to C8: <: | \$<X,XXX.XX > |
| Year <C> to <D>: | \$<X,XXX.XX > | Year <C> to <D>: | \$<X,XXX.XX > |
| Year <E> to <F>]: | \$<X,XXX.XX >] | Year <E> to <F>]: | \$<X,XXX.XX >}] |

For Home Office Use.

The Input Report displays values resulting from any searches and solves that have been performed.

Distributions Tab

| | | | |
|---------------------------------|-----------------------|-------------------------|--------------------------------|
| Distribution Mode: | <Mode> | Adjust for RMD: | <Yes/No> |
| Distributions Begin At: | <Beginning/End> | Distribution Type: | <None/Level Withdrawal Search> |
| Start at Year: | <XX> | Number of Years: | <XX> |
| Account vs. Cash Value: | <Cash/Account> Value | Target Year: | <XX> |
| Target Amount: | \$<X,XXX.XX> | Current vs. Guaranteed: | <Current/Guaranteed> |
| <u>Specified Distributions:</u> | C9: [<None or> | | |
| Year <X> C10: {to <X>: | \$<X,XXX.XX> | | |
| Year <X> to <X>: | \$<X,XXX.XX> | | |
| Year <X> to <X>}: | \$<X,XXX.XX>] | | |

RMD/SEPP Tab

| | | | |
|-------------------------------|---------------------|----------------------|-----------------|
| SEPP: | <Yes/No> | RMD: | <Yes/No> |
| Distribution Mode: | <Mode> | Distribution At: | <Beginning/End> |
| Distribution Method: | <Method> | Distribution Table: | <Table> |
| SEPP Start Year: | <XX> | SEPP Last Year: | <XX> |
| Interest Rate: | <XX.XXX>% | | |
| Bene. Relationship: | <Spouse/Non-spouse> | Bene. Attained Age: | <XX> |
| Calc 1 st Yr. RMD: | <Yes/No> | Prior 12/31 Balance: | \$<X,XXX.XX> |

Agent Tab

| | | | |
|-------------------|--------------------|--------------|---------------|
| Agent Name: | <Agent Name> | Agency Name: | <Agency Name> |
| Address1: | <Address1> | Address2: | <Address2> |
| City: | <City> | State: | <State> |
| Zip: | <Zip> | Phone: | <Phone #> |
| App Signed State: | <App Signed State> | | |

Report Options Tab

| | | | |
|--------------------------|----------|---------------------------|----------------------|
| Cover Page: | <Yes/No> | Proposal Description: | <Description> |
| Signature Page: | <Yes/No> | Home Office Page: | <Yes/No> |
| Information Page: | <Yes/No> | Years of Detail: | <XX> |
| Show Annual Return Rate: | <Yes/No> | Show Detail Account Info: | <Yes/No> |
| Print Cash Flow Graphic: | <Yes/No> | Account vs. Cash Value: | <Account/Cash> Value |

For Home Office Use.

The Input Report displays values resulting from any searches and solves that have been performed.

SERFF Tracking Number: ALSB-125860231

State: Arkansas

Filing Company: Lincoln Benefit Life Company

State Tracking Number: 40586

Company Tracking Number: LBL6961-3

TOI: A10 Annuities - Other

Sub-TOI: A10.000 Annuities - Other

Product Name: LBL6961-3

Project Name/Number: LBL6961-3/LBL6961-3

Rate Information

Rate data does NOT apply to filing.