

SERFF Tracking Number: MGOK-125539459 *State:* Arkansas
Filing Company: Mid-West National Life Insurance Company of Tennessee *State Tracking Number:* 38617
Company Tracking Number: MWTLR RP 20 1/08
TOI: L08 Life - Other *Sub-TOI:* L08.000 Life - Other
Product Name: Return of Premium Rider
Project Name/Number: Return of Premium Rider/MWTLR RP 20 1/08

Filing at a Glance

Company: Mid-West National Life Insurance Company of Tennessee

Product Name: Return of Premium Rider	SERFF Tr Num: MGOK-125539459	State: ArkansasLH
TOI: L08 Life - Other	SERFF Status: Closed	State Tr Num: 38617
Sub-TOI: L08.000 Life - Other	Co Tr Num: MWTLR RP 20 1/08	State Status: Approved-Closed
Filing Type: Form	Co Status:	Reviewer(s): Linda Bird
	Author: Nicole Bradley	Disposition Date: 04/14/2008
	Date Submitted: 04/04/2008	Disposition Status: Approved
Implementation Date Requested: On Approval		Implementation Date:

State Filing Description:

General Information

Project Name: Return of Premium Rider	Status of Filing in Domicile: Authorized
Project Number: MWTLR RP 20 1/08	Date Approved in Domicile: 02/11/2007
Requested Filing Mode: Review & Approval	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Group Market Size:
Overall Rate Impact:	Group Market Type:
Filing Status Changed: 04/14/2008	
State Status Changed: 04/14/2008	Deemer Date:
Corresponding Filing Tracking Number: MWTLR RP 20 1/08	

Filing Description:

Rider forms MWTLR RP 20 1/08, and MWTLR RP 30 1/08 are new forms and will not replace any forms currently on file with your office form. The Return of Premium Rider will be attached to policies issued after the approval date.

Rider form MWTLR RP 20 1/08 is a return of premium rider, which provides for a return of a portion of the premiums paid for the policy and any riders with the policy terminates. There is a charge for this rider. This rider is for use with the 20 Initial Term Period Option of Form MWTL 8/05 AR approved by your department on 10/27/2005 and other policies that may be filed later. The flesch score for this form is 52.0.

SERFF Tracking Number: MGOK-125539459 State: Arkansas
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Rider form MWTLR RP 30 1/08 is a return of premium rider, which provides for a return of a portion of the premiums paid for the policy and any riders with the policy terminates. There is a charge for this rider. This rider is for use with the 30 Initial Term Period Option of Form MWTL 8/05 AR approved by your department on 10/27/2005 and other policies that may be filed later. The flesch score for this form is 52.0.

Endorsement form MWLTR RP END 1/08 is a new form with a flesch score of 40, and is being filed for the purpose of clarifying language on page 3 of the Return of Premium Rider form MWTLR RP 8/05. Approved by your department on 10/27/2005 and will be sent to all policy owners with active policies with this Return of Premium Rider attached.

Company and Contact

Filing Contact Information

Nicole Bradley, nicole.bradley@lifeteamokc.com
 Life Operations (405) 302-1419 [Phone]
 Oklahoma City, OK 73114

Filing Company Information

Mid-West National Life Insurance Company of Tennessee CoCode: 66087 State of Domicile: Texas
 Life Insurance Operations Group Code: 264 Company Type: Life
 1331 W. Memorial Road, Suite 112
 Oklahoma City, OK 73114 Group Name: State ID Number:
 (405) 302-1419 ext. [Phone] FEIN Number: 62-0724538

Filing Fees

Fee Required? Yes
 Fee Amount: \$75.00
 Retaliatory? No
 Fee Explanation: 25 per form
 Per Company: No

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COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Mid-West National Life Insurance Company of Tennessee	\$75.00	04/04/2008	19281418

SERFF Tracking Number: MGOK-125539459 State: Arkansas
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Linda Bird	04/14/2008	04/14/2008

SERFF Tracking Number: MGOK-125539459 State: Arkansas
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Product Name: Return of Premium Rider
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Disposition

Disposition Date: 04/14/2008

Implementation Date:

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: MGOK-125539459 State: Arkansas
 Filing Company: Mid-West National Life Insurance Company of Tennessee State Tracking Number: 38617
 Company Tracking Number: MWTLR RP 20 1/08
 TOI: L08 Life - Other Sub-TOI: L08.000 Life - Other
 Product Name: Return of Premium Rider
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Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice		Yes
Supporting Document	Application		No
Supporting Document	Actuarial Memorandum		No
Form	Return of Premium Rider		Yes
Form	Return of Premium Rider		Yes
Form	Endorsement		Yes

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Form Schedule

Lead Form Number: MWTLR RP 20 1/08

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	MWTLR RP 20 1/08	Policy/Cont ract/Fratern	Return of Premium Rider	Initial		52	MWTLR RP 1-08 GENERIC20.pdf
	MWTLR RP 30 1/08	Policy/Cont ract/Fratern	Return of Premium Rider	Initial		52	MWTLR RP 1-08 GENERIC30.pdf
	MWTLR RP END 1/08	Policy/Cont ract/Fratern	Endorsement Rider	Initial		40	MWTLR RP END 1-08.pdf

Mid-West National Life Insurance Company of Tennessee

A Stock Company

(Hereinafter called: the Company, We, Our or Us)

Home Office: P.O. Box 548801, Oklahoma City, Oklahoma 73154

Administrative Office: 3600 NW 138th Street, Suite 100, Oklahoma City, OK 73134

Customer Service: 1-800-725-7887

RETURN OF PREMIUM RIDER

This Rider, attached to and made part of the Policy, provides a Return of Premium Benefit as described below.

We will pay to the Owner a portion of the total premiums paid for the Policy and any Riders when the Policy terminates.

BENEFIT

The amount We will pay equals the benefit as defined in the Return of Premium Benefit Calculation provision on Page 3 of this Rider. The benefit will be reduced by any prior amount paid by Us under the Policy or any of its Riders.

TERMINATION

This Rider will terminate:

1. On surrender, termination, lapse or conversion of the Policy during the Initial Term Period;
2. When any Nonforfeiture Option goes into effect;
3. When the Insured dies; or
4. When the Rider Premium is not paid before the end of the Grace Period.

Our acceptance of a premium, for any period after the date of termination of this Rider, shall create no liability to Us, nor will it constitute a waiver of the termination. Any premium, which has been accepted by Us, will be refunded.

You may terminate this Rider by written request. If You elect to terminate the Rider prior to Policy termination, no benefit will be paid. If this Rider has terminated, You cannot reinstate it.

THE CONTRACT

In this Rider "Policy" means the Policy in which You have requested that this Rider be included.

This Rider is issued in consideration of the application and the payment of premiums as provided. The Insured is the person shown as the Insured on the Policy Specification Page of the Policy.

If premiums are being waived on the Policy, then the waiver also applies to this Rider.

This Rider is part of the Policy. Except as stated in this Rider, all other Policy provisions apply.

RIDER DATE

Rider months, years and anniversaries are measured from the Rider Date. The Rider Issue Date is the Policy Issue Date unless a different Rider Date is shown in an endorsement attached to this Rider.

PREMIUMS FOR THIS RIDER

The premiums for this Rider are payable for the Initial Term Period and will be included in the total premium as shown on the Policy Specification Page and must be paid with the Policy Premium. If this Rider is terminated during the Initial Term Period, the total premium for the Policy will be reduced by the amount of premium for this Rider.

NONFORFEITURE OPTIONS

If the Policy lapses as provided in the Policy's Grace Period provision, the Policy will have a cash value equal to the Return of Premium benefit. We will require Your written request and the return of the Policy if You select one of the two available options below:

1. Cash Surrender

The Policy may be surrendered for its cash value. The cash value is equal to the Return of Premium benefit.

2. Extended Level Term Insurance

If no option is selected, this option will be automatic. Under this option, You may continue the Policy as Extended Level Term Insurance. The term period will start on the due date of the unpaid premium. That period will be determined by applying the cash value as a net single premium for such insurance. At the end of that period, the insurance will terminate and there will be no cash value remaining.

Any insurance provided under the Extended Level Term Option may be surrendered for its cash value. The cash value will equal the net single premium for the insurance remaining. If such surrender occurs within 30 days after a Policy Anniversary, the value will not be less than the cash value on that anniversary.

Deferral of Cash Value Payment

We reserve the right to defer payment of the cash value for up to 6 months after We receive Your written request. We will pay interest at a rate not less than the minimum rate required by state law, if the deferral period is 30 days or more.

Basis Used for Calculations

Cash value amounts equal or exceed the values based on:

- 2001 CSO Nonsmoker and Smoker Tables with distinctions made for male and female;
- Age Last Birthday;
- Maximum Interest Rate permissible by the Standard Nonforfeiture Law;
- Death occurring at the end of the Policy year.

Extended Level Term Insurance Option is based on:

- 2001 CET Nonsmoker and Smoker Tables with distinctions made for male and female;
- Age Last Birthday;
- Maximum Interest Rate permissible by the Standard Nonforfeiture Law;
- Death occurring at the end of the Policy year.

Policy values equal or exceed those required by the state in which this Policy is delivered. A detailed statement of the method used to compute those values has been filed with the Insurance Department of that state.

RETURN OF PREMIUM BENEFIT CALCULATION

- 1) Multiply the amount for this Policy, which is the Annual Premium at Issue Date, as shown on the Policy Specification Page of the Policy
- TIMES 2) Factor (a) for the appropriate Policy Year as shown in the below table
- TIMES 3) Lesser of the Number of Years for the appropriate Policy Year (b) as shown in the below table or the Initial Term Period as shown on the Policy Specification Page.

The maximum benefit will never exceed the total premiums paid to date.

<u>End of Policy Year</u>	<u>*Factor (a)</u>	<u>Number of Years (b)</u>	<u>End of Policy Year</u>	<u>*Factor (a)</u>	<u>Number of Years (b)</u>
1	0%	1	41	150%	20
2	0%	2	42	153%	20
3	0%	3	43	156%	20
4	0%	4	44	159%	20
5	0%	5	45	162%	20
6	3%	6	46	165%	20
7	6%	7	47	168%	20
8	9%	8	48	171%	20
9	12%	9	49	174%	20
10	15%	10	50	177%	20
11	22%	11	51	181%	20
12	29%	12	52	185%	20
13	36%	13	53	189%	20
14	43%	14	54	193%	20
15	50%	15	55	197%	20
16	60%	16	56	201%	20
17	70%	17	57	205%	20
18	80%	18	58	209%	20
19	90%	19	59	213%	20
20	100%	20	60	217%	20
21	102%	20	61	221%	20
22	104%	20	62	225%	20
23	106%	20	63	230%	20
24	108%	20	64	235%	20
25	110%	20	65	240%	20
26	112%	20	66	245%	20
27	114%	20	67	250%	20
28	116%	20	68	255%	20
29	118%	20	69	260%	20
30	120%	20	70	265%	20
31	122%	20	71	270%	20
32	124%	20	72	275%	20
33	126%	20	73	281%	20
34	129%	20	74	287%	20
35	132%	20	75	293%	20
36	135%	20			
37	138%	20			
38	141%	20			
39	144%	20			
40	147%	20			

***The factor will increase proportionately from the end of a Policy Year to the next. We will provide You with this benefit amount upon Your request.**

Signed at the Home Office of the Company and effective on the same day as the Policy.

[]
 [SECRETARY]

[]
 [PRESIDENT]

Mid-West National Life Insurance Company of Tennessee

A Stock Company

(Hereinafter called: the Company, We, Our or Us)

Home Office: P.O. Box 548801, Oklahoma City, Oklahoma 73154

Administrative Office: 3600 NW 138th Street, Suite 100, Oklahoma City, OK 73134

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RETURN OF PREMIUM RIDER

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We will pay to the Owner a portion of the total premiums paid for the Policy and any Riders when the Policy terminates.

BENEFIT

The amount We will pay equals the benefit as defined in the Return of Premium Benefit Calculation provision on Page 3 of this Rider. The benefit will be reduced by any prior amount paid by Us under the Policy or any of its Riders.

TERMINATION

This Rider will terminate:

1. On surrender, termination, lapse or conversion of the Policy during the Initial Term Period;
2. When any Nonforfeiture Option goes into effect;
3. When the Insured dies; or
4. When the Rider Premium is not paid before the end of the Grace Period.

Our acceptance of a premium, for any period after the date of termination of this Rider, shall create no liability to Us, nor will it constitute a waiver of the termination. Any premium, which has been accepted by Us, will be refunded.

You may terminate this Rider by written request. If You elect to terminate the Rider prior to Policy termination, no benefit will be paid. If this Rider has terminated, You cannot reinstate it.

THE CONTRACT

In this Rider "Policy" means the Policy in which You have requested that this Rider be included.

This Rider is issued in consideration of the application and the payment of premiums as provided. The Insured is the person shown as the Insured on the Policy Specification Page of the Policy.

If premiums are being waived on the Policy, then the waiver also applies to this Rider.

This Rider is part of the Policy. Except as stated in this Rider, all other Policy provisions apply.

RIDER DATE

Rider months, years and anniversaries are measured from the Rider Date. The Rider Issue Date is the Policy Issue Date unless a different Rider Date is shown in an endorsement attached to this Rider.

PREMIUMS FOR THIS RIDER

The premiums for this Rider are payable for the Initial Term Period and will be included in the total premium as shown on the Policy Specification Page and must be paid with the Policy Premium. If this Rider is terminated during the Initial Term Period, the total premium for the Policy will be reduced by the amount of premium for this Rider.

NONFORFEITURE OPTIONS

If the Policy lapses as provided in the Policy's Grace Period provision, the Policy will have a cash value equal to the Return of Premium benefit. We will require Your written request and the return of the Policy if You select one of the two available options below:

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The Policy may be surrendered for its cash value. The cash value is equal to the Return of Premium benefit.

2. Extended Level Term Insurance

If no option is selected, this option will be automatic. Under this option, You may continue the Policy as Extended Level Term Insurance. The term period will start on the due date of the unpaid premium. That period will be determined by applying the cash value as a net single premium for such insurance. At the end of that period, the insurance will terminate and there will be no cash value remaining.

Any insurance provided under the Extended Level Term Option may be surrendered for its cash value. The cash value will equal the net single premium for the insurance remaining. If such surrender occurs within 30 days after a Policy Anniversary, the value will not be less than the cash value on that anniversary.

Deferral of Cash Value Payment

We reserve the right to defer payment of the cash value for up to 6 months after We receive Your written request. We will pay interest at a rate not less than the minimum rate required by state law, if the deferral period is 30 days or more.

Basis Used for Calculations

Cash value amounts equal or exceed the values based on:

- 2001 CSO Nonsmoker and Smoker Tables with distinctions made for male and female;
- Age Last Birthday;
- Maximum Interest Rate permissible by the Standard Nonforfeiture Law;
- Death occurring at the end of the Policy year.

Extended Level Term Insurance Option is based on:

- 2001 CET Nonsmoker and Smoker Tables with distinctions made for male and female;
- Age Last Birthday;
- Maximum Interest Rate permissible by the Standard Nonforfeiture Law;
- Death occurring at the end of the Policy year.

Policy values equal or exceed those required by the state in which this Policy is delivered. A detailed statement of the method used to compute those values has been filed with the Insurance Department of that state.

RETURN OF PREMIUM BENEFIT CALCULATION

- 1) Multiply the amount for this Policy, which is the Annual Premium at Issue Date, as shown on the Policy Specification Page of the Policy
- TIMES 2) Factor (a) for the appropriate Policy Year as shown in the below table
- TIMES 3) Lesser of the Number of Years for the appropriate Policy Year (b) as shown in the below table or the Initial Term Period as shown on the Policy Specification Page.

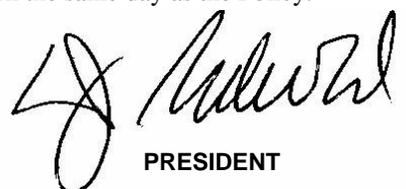
The maximum benefit will never exceed the total premiums paid to date.

<u>End of Policy Year</u>	<u>*Factor (a)</u>	<u>Number of Years (b)</u>	<u>End of Policy Year</u>	<u>*Factor (a)</u>	<u>Number of Years (b)</u>
1	0%	1	41	122%	30
2	0%	2	42	124%	30
3	0%	3	43	126%	30
4	0%	4	44	129%	30
5	0%	5	45	132%	30
6	1%	6	46	135%	30
7	2%	7	47	138%	30
8	3%	8	48	141%	30
9	4%	9	49	144%	30
10	5%	10	50	147%	30
11	7%	11	51	150%	30
12	9%	12	52	153%	30
13	11%	13	53	156%	30
14	13%	14	54	159%	30
15	15%	15	55	162%	30
16	17%	16	56	165%	30
17	19%	17	57	168%	30
18	21%	18	58	171%	30
19	23%	19	59	174%	30
20	25%	20	60	177%	30
21	30%	21	61	181%	30
22	35%	22	62	185%	30
23	40%	23	63	189%	30
24	45%	24	64	193%	30
25	50%	25	65	197%	30
26	60%	26	66	201%	30
27	70%	27	67	205%	30
28	80%	28	68	209%	30
29	90%	29	69	213%	30
30	100%	30	70	217%	30
31	102%	30	71	221%	30
32	104%	30	72	225%	30
33	106%	30	73	230%	30
34	108%	30	74	235%	30
35	110%	30	75	240%	30
36	112%	30			
37	114%	30			
38	116%	30			
39	118%	30			
40	120%	30			

***The factor will increase proportionately from the end of a Policy Year to the next. We will provide You with this benefit amount upon Your request.**

Signed at the Home Office of the Company and effective on the same day as the Policy.

[ SECRETARY]

[ PRESIDENT]

**MID-WEST NATIONAL LIFE INSURANCE COMPANY OF TENNESSEE
OKLAHOMA CITY, OKLAHOMA**

**ENDORSEMENT TO
Return of Premium Rider
FORM MWTLR RP 8/05**

This endorsement amends the policy to which it is attached and is subject to all other provisions of the policy not amended by this endorsement.

The basis of this endorsement is to clarify method by which the return of premium rider benefit is calculated.

Page 3 of the Return of Premium Rider is amended to read as follows:

“RETURN OF PREMIUM BENEFIT CALCULATION

- 1) Multiply the amount for this Policy, which is the Annual Premium at Issue Date, as shown on the Policy Specification Page of the Policy
- TIMES 2) Factor (a) for the appropriate Policy Year as shown in the below table
- TIMES 3) Lesser of the Number of Years for the appropriate Policy Year (b) as shown in the below table or the Initial Term Period as shown on the Policy Specification Page.

The maximum benefit will never exceed the total premiums paid to date.”

All other information on page 3 of the Return of Premium Rider remains the same.

The effective date of this endorsement is the same as the policy to which it is attached. This endorsement will terminate on the same date as the policy to which it is attached.

**Mid-West National Life Insurance Company of Tennessee
3600 NW 138th Street, Suite 100
Oklahoma City, Oklahoma 73134
[Telephone Number 1-800-725-7887 or 405-848-0179]**

SERFF Tracking Number: MGOK-125539459 State: Arkansas
Filing Company: Mid-West National Life Insurance Company of Tennessee State Tracking Number: 38617
Company Tracking Number: MWTLR RP 20 1/08
TOI: L08 Life - Other Sub-TOI: L08.000 Life - Other
Product Name: Return of Premium Rider
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Rate Information

Rate data does NOT apply to filing.

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Supporting Document Schedules

Satisfied -Name: Certification/Notice	Review Status:	03/12/2008
Comments:		
Attachment: AR MWN CERT OF COMP.pdf		
Bypassed -Name: Application	Review Status:	03/12/2008
Bypass Reason: n/a		
Comments:		
Satisfied -Name: Actuarial Memorandum	Review Status:	03/14/2008
Comments:		
Attachment: MW_Act_Memo_ROP_Rider_rev 108.pdf		

CERTIFICATION OF COMPLIANCE

Mid-West National Life Insurance Company of Tennessee to the best of its knowledge and belief does hereby certify that the accompanying form(s) as identified by the listing attached hereto, does (do) comply with all sections of the Arkansas Code and Parts applicable to such insurance policies and related forms, and will be so construed, and agrees that when any provision in a policy subject to all Statutes and Regulations or any insurance part is in conflict with said title or part, said provision will be stricken and that the rights, duties, and obligations of the insurer, the insured and the beneficiary shall be governed by the applicable statutes and parts, and does further certify that:

1. This filing is in compliance with regulation 19
2. This filing is in compliance with regulation 49
3. ACA 23-80-206
4. ACA 23-79-138 and Bulletin 88

Dated 4/03/2008

by:



John Sartore

Printed or typed name of individual whose
signature appears above

Vice President

Title of individual whose signature appears
above

Mid-West National Life Insurance Company of Tennessee

**Actuarial Memorandum for
Return of Premium Rider
Rider Form MWTLR RP 1/08**

I. DESCRIPTION OF POLICY FORM

The Return of Premium benefit will equal the benefit as defined in the Return of Premium Benefit Calculation for the applicable initial term period (see attachments to this memorandum). The benefit will be reduced by any amount paid to the policyowner under any disability rider including waiver of premium or any critical condition accelerated benefit.

II. RESERVES

Mortality 2001 CSO ALB Sex and Smoker Distinct Mortality Tables

Interest Rate 4.0%

Method Reserves for this Rider will be calculated according to the Standard Valuation Law using the Commissioners Reserve Valuation Method. Reserves will be based on the combination of term insurance and the Return of Premium benefit. The Return of Premium benefit at Policy maturity will be treated as a pure endowment. A cash value floor equal to the Return of Premium benefit payable before Policy maturity will also apply.

RETURN OF PREMIUM BENEFIT CALCULATION – 20 Year Initial Term Period

- (1) Multiply the amount for this Policy, which is the Annual Premium at Issue Date, as shown on the Policy Specification Page of the Policy
- TIMES (2) Factor for the appropriate Policy Year as shown in the below table
- TIMES (3) Lesser of the Number of Years for the appropriate Policy Year as shown in the below table or years payable for this Rider as shown on the Policy Specification Page.

(Amount shown for the Rider on Policy Specification Page X (a) X (b) below for the appropriate Policy Year).

The maximum benefit will never exceed the total premiums paid to date.

<u>End of Policy Year</u>	<u>*Factor (a)</u>	<u>Number of Years (b)</u>	<u>End of Policy Year</u>	<u>*Factor (a)</u>	<u>Number of Years (b)</u>
1	0%	1	41	150%	20
2	0%	2	42	153%	20
3	0%	3	43	156%	20
4	0%	4	44	159%	20
5	0%	5	45	162%	20
6	3%	6	46	165%	20
7	6%	7	47	168%	20
8	9%	8	48	171%	20
9	12%	9	49	174%	20
10	15%	10	50	177%	20
11	22%	11	51	181%	20
12	29%	12	52	185%	20
13	36%	13	53	189%	20
14	43%	14	54	193%	20
15	50%	15	55	197%	20
16	60%	16	56	201%	20
17	70%	17	57	205%	20
18	80%	18	58	209%	20
19	90%	19	59	213%	20
20	100%	20	60	217%	20
21	102%	20	61	221%	20
22	104%	20	62	225%	20
23	106%	20	63	230%	20
24	108%	20	64	235%	20
25	110%	20	65	240%	20

26	112%	20	66	245%	20
27	114%	20	67	250%	20
28	116%	20	68	255%	20
29	118%	20	69	260%	20
30	120%	20	70	265%	20
31	122%	20	71	270%	20
32	124%	20	72	275%	20
33	126%	20	73	281%	20
34	129%	20	74	287%	20
35	132%	20	75	293%	20
36	135%	20			
37	138%	20			
38	141%	20			
39	144%	20			
40	147%	20			

***The factor will increase proportionately from the end of a Policy Year to the next. We will provide this benefit amount upon request.**

RETURN OF PREMIUM BENEFIT CALCULATION – 30 Year Initial Term Period

- (1) Multiply the amount for this Policy, which is the Annual Premium at Issue Date, as shown on the Policy Specification Page of the Policy
- TIMES (2) Factor for the appropriate Policy Year as shown in the below table
- TIMES (3) Lesser of the Number of Years for the appropriate Policy Year as shown in the below table or years payable for this Rider as shown on the Policy Specification Page.

(Amount shown for the Rider on Policy Specification Page X (a) X (b) below for the appropriate Policy Year).

The maximum benefit will never exceed the total premiums paid to date.

<u>End of Policy Year</u>	<u>*Factor (a)</u>	<u>Number of Years (b)</u>	<u>End of Policy Year</u>	<u>*Factor (a)</u>	<u>Number of Years (b)</u>
1	0%	1	41	122%	30
2	0%	2	42	124%	30
3	0%	3	43	126%	30
4	0%	4	44	129%	30
5	0%	5	45	132%	30
6	1%	6	46	135%	30
7	2%	7	47	138%	30
8	3%	8	48	141%	30
9	4%	9	49	144%	30
10	5%	10	50	147%	30
11	7%	11	51	150%	30
12	9%	12	52	153%	30
13	11%	13	53	156%	30
14	13%	14	54	159%	30
15	15%	15	55	162%	30
16	17%	16	56	165%	30
17	19%	17	57	168%	30
18	21%	18	58	171%	30
19	23%	19	59	174%	30
20	25%	20	60	177%	30
21	30%	21	61	181%	30
22	35%	22	62	185%	30
23	40%	23	63	189%	30
24	45%	24	64	193%	30
25	50%	25	65	197%	30

26	60%	26	66	201%	30
27	70%	27	67	205%	30
28	80%	28	68	209%	30
29	90%	29	69	213%	30
30	100%	30	70	217%	30
31	102%	30	71	221%	30
32	104%	30	72	225%	30
33	106%	30	73	230%	30
34	108%	30	74	235%	30
35	110%	30	75	240%	30
36	112%	30			
37	114%	30			
38	116%	30			
39	118%	30			
40	120%	30			

***The factor will increase proportionately from the end of a Policy Year to the next. We will provide this benefit amount upon request.**