

SERFF Tracking Number: *INGD-126322461* State: *Arkansas*
Filing Company: *ReliaStar Life Insurance Company* State Tracking Number: *43991*
Company Tracking Number: *1314-12/09*
TOI: *L041 Individual Life - Term* Sub-TOI: *L041.213 Specified Age or Duration -
Fixed/Indeterminate Premium - Single Life*
Product Name: *ING ROP Endowment Term Life Insurance*
Project Name/Number: *ING ROP Endowment Term Life Insurance /1314-12/09*

Filing Description:

Insurance Commissioner
Department of Insurance
Compliance Life & Health
1200 West Third Street
Little Rock, Arkansas 72201-1904

Re: ReliaStar Life Insurance Company
NAIC #67105 FEIN #41-0451140

Form Numbers:

1314-12/09 Term Life Insurance Policy to age 95 with an Endowment Benefit Payable on the Endowment Date and an Exchange Option Provision
154642 Supplement to Application

Attention Policy Form Approval Division:

We submit the above referenced forms for your review and approval. The forms do not replace any previously approved forms.

The forms do not contain any unusual or controversial items from the standpoint of industry standards.

We have simultaneously filed the forms in Minnesota, our state of domicile, under an Interstate Insurance Compact filing.

The information bracketed in the forms is subject to change.

The policy form is an individual term Life Insurance Policy designed to provide a benefit payable at the death of the Insured. The initial term period of 20, 25 or 30 years is selected by the owner at the time of application with increasing guaranteed premiums after the guaranteed level premium period.

The policy may be exchanged for a permanent life insurance policy issued by the company under an exchange option as stated within the policy. If not exchanged, the policy will continue to provide term coverage until age 95, provided premiums due are paid.

The policy uses the cash value accumulation test for compliance with IRC Section 7702.

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We will not illustrate the policy.

The product will be offered as a fully underwritten policy.

The product will be marketed by our licensed agents on an individual basis.

The policy will be offered on a sex distinct basis.

Form 154642 Supplement to Application will be used with the application shown below. This form will be available both in a printed and electronic format. The electronic format application presented to the customer for signature will appear on screen as a pdf of the filed application form containing all information completed by the customer, in appearance identical to the printed version. If an electronic signature will be used with an application, it will be obtained in compliance with applicable State and Federal law.

The following previously approved form(s) will be marketed with the submitted policy form (approval date(s) provided):

R1372-12/09 - Accelerated Benefit Rider - 10/21/09
R1356-04/07 - Accidental Death Benefit Rider - 04/03/07
R1364 - Children's Term Insurance Rider - 04/03/07
R1373-12/09 - Waiver of Premium Rider (Disability) - 10/21/09
136416 - Term Application - 08/01/05

We have enclosed per your requirements the Flesch Readability Certification and Actuarial Memorandum(s).

Unless otherwise informed, we reserve the right to alter the layout of the enclosed forms, including sequential ordering of the sections, color, and type font and size, and any changes necessary to comply with your state requirements, but we will only do so if such changes are within the allowable parameters or requirements set forth in your statutes.

To the best of our knowledge, the forms comply with the laws and regulations of the insurance department of your state.

Sincerely,

Laura Sampair, FLMI, FFSI, PCS, AAPA, AIAA, AIRC, ARA
Contract Analyst
(612) 342-7081
(612) 342-7531 (fax)
laura.sampair@us.ing.com

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Company and Contact

Filing Contact Information

Laura Sampair, laura.sampair@us.ing.com
 20 Washington Ave South 612-342-7081 [Phone]
 Minneapolis, MN 55401 612-342-7081 [FAX]

Filing Company Information

ReliaStar Life Insurance Company CoCode: 67105 State of Domicile: Minnesota
 20 Washington Avenue South Group Code: 229 Company Type:
 Minneapolis, MN 55401 Group Name: State ID Number:
 (860) 654-8065 ext. [Phone] FEIN Number: 41-0451140

Filing Fees

Fee Required? Yes
 Fee Amount: \$125.00
 Retaliatory? Yes
 Fee Explanation: \$125 Per Filing (Higher Retaliatory Fee)
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
ReliaStar Life Insurance Company	\$125.00	11/04/2009	31791239

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	11/24/2009	11/24/2009
Approved-Closed	Linda Bird	11/06/2009	11/06/2009

Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Supporting Document	Revised Filing Description (11 23 09)	Laura Sampair	11/24/2009	11/24/2009

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Request to Re-Open	Note To Filer	Linda Bird	11/23/2009	11/23/2009
Request to Re-Open	Note To Reviewer	Laura Sampair	11/23/2009	11/23/2009

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Disposition

Disposition Date: 11/24/2009

Implementation Date:

Status: Approved-Closed

Comment: Company has revised the original filing under the General Information tab to remove R1373-12/09 Waiver of Premium (Disability) Rider and add R1349-11/06 Waiver of Premium Rider to the previously approved forms to be marketed with the submitted policy form.

Rate data does NOT apply to filing.

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 Project Name/Number: *ING ROP Endowment Term Life Insurance /1314-12/09*

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Life & Annuity - Actuarial Memo		No
Supporting Document	Accelerated Benefit Disclosure		Yes
Supporting Document	Revised Filing Description (11 23 09)		Yes
Form	Term Life Insurance Policy to age 95 with an Endowment Benefit Payable on the Endowment Date and an Exchange Option Provision		Yes
Form	Supplement to Application		Yes

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Project Name/Number: *ING ROP Endowment Term Life Insurance /1314-12/09*

Disposition

Disposition Date: 11/06/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

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Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Life & Annuity - Actuarial Memo		No
Supporting Document	Accelerated Benefit Disclosure		Yes
Supporting Document	Revised Filing Description (11 23 09)		Yes
Form	Term Life Insurance Policy to age 95 with an Endowment Benefit Payable on the Endowment Date and an Exchange Option Provision		Yes
Form	Supplement to Application		Yes

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Amendment Letter

Submitted Date: 11/24/2009

Comments:

Please see the "Revised Filing Description (11 23 09)" under the Supporting Documents tab.

Changed Items:

Supporting Document Schedule Item Changes:

User Added -Name: Revised Filing Description (11 23 09)

Comment: See attached.

AR 1314 State Amendment Letter.pdf

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Fixed/Indeterminate Premium - Single Life

Note To Filer

Created By:

Linda Bird on 11/23/2009 03:18 PM

Last Edited By:

Linda Bird

Submitted On:

11/23/2009 03:19 PM

Subject:

Request to Re-Open

Comments:

Filing will be reopened in order for corrections to be made.

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Note To Reviewer

Created By:

Laura Sampair on 11/23/2009 12:52 PM

Last Edited By:

Laura Sampair

Submitted On:

11/23/2009 12:52 PM

Subject:

Request to Re-Open

Comments:

We wish to revise the Filing Description under the General Information tab to remove and add a rider to the previously approved forms to be marketed with the submitted policy form.

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Form Schedule

Lead Form Number: 1314-12/09

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	1314-12/09	Policy/Contract/Fraternal Certificate	Cont Term Life Insurance Policy to age 95 with an Endowment Benefit Payable on the Endowment Date and an Exchange Option Provision	Initial		50.000	AR 1314.pdf
	154642	Application/Enrollment Form	Supplement to Application	Initial		50.200	154642.pdf

**RELIASTAR LIFE INSURANCE COMPANY
A STOCK COMPANY**

INSURED [JOHN DOE]
POLICY DATE: [December 15, 2009]
POLICY NUMBER: [67000001]

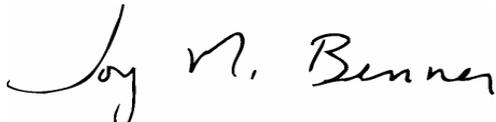
WE AGREE TO PAY the Death Proceeds to the Beneficiary on the death of the Insured while your policy is in force, subject to your policy provisions.

WE ALSO AGREE to provide the other rights and benefits of your policy, subject to its provisions.

PLEASE READ YOUR POLICY CAREFULLY

RIGHT TO EXAMINE PERIOD. You have the right to examine and return your policy. You may return it by mail or other delivery to the agent who sold it to you or to the ING Customer Service Center within 30 days after you receive it. It will then be void from the beginning. Once you have returned your policy during the Right to Examine Period, we will refund all premiums paid.

Your policy is signed for ReliaStar Life Insurance Company by:

[] []

Donald W. Britton
President

Joy M. Benner
Secretary

In your policy, "you" and "your" refer to the Owner of this policy; "we," "us" and "our" refer to ReliaStar Life Insurance Company.

**YOUR POLICY IS A TERM LIFE INSURANCE POLICY TO AGE 95 WITH AN ENDOWMENT BENEFIT
PAYABLE ON THE ENDOWMENT DATE AND AN EXCHANGE OPTION PROVISION.
YOUR POLICY IS NONPARTICIPATING AND NONRENEWABLE.**

The Death Proceeds are payable if the Insured dies while your policy is in force. Premiums are payable to Age 95 or until the Insured's death, whichever comes first. Premiums remain level during the Level Premium Period. After the Level Premium Period, premiums will change each year to the amounts shown in the Schedule of Annual Premiums by Year.

RELIASTAR LIFE INSURANCE COMPANY

Home Office:
[Minneapolis, Minnesota]

ING Customer Service Center:
[2000 21st Avenue NW
Minot, North Dakota 58703-0890
Toll Free Number: 1-877-886-5050]

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We place a copy of your application and any amendments, endorsements and riders at the end of your policy provisions and these documents are part of your policy.

POLICY DATA – SCHEDULE

POLICY NUMBER	[67000001]
POLICY DATE	[DECEMBER 15, 2009]
ISSUE DATE	[DECEMBER 15, 2009]
ENDING DATE	[DECEMBER 15, 2069]
LEVEL PREMIUM PERIOD	[20] YEARS
ENDOWMENT DATE	[DECEMBER 15, 2029]
OWNER	[JOHN DOE]
INSURED	[JOHN DOE]
AGE/GENDER	[35 MALE]
RISK CLASS	[STANDARD NO TOBACCO]
PREMIUM MODE	[ANNUAL]
STATED DEATH BENEFIT	[\$100,000.00]
INITIAL MODAL PREMIUM AMOUNT	[\$913.00]

PREMIUM MODE

	<u>Annual</u>	<u>Semi-Annual</u>	<u>Quarterly</u>	<u>Monthly EFT</u>
TOTAL FIRST POLICY YEAR PREMIUM	\$[913.00]	\$[474.76]	\$[241.95]	\$[79.89]

See the discussion of Premium Modes at the end of the Schedule of Annual Premiums by Year for more information about the Premium Modes and the cost of paying premiums more frequently than annually.

<u>COVERAGE TYPE</u>	<u>Stated Death Benefit/Rider Benefit</u>	<u>Years of Coverage</u>	<u>First Policy Year Annual Premium</u>
TERM INSURANCE POLICY	\$[100,000.00]	[60]	\$[817.00]
[SPECIAL CLASS EXTRA PREMIUM FOR [XX] POLICY YEAR[S]]	--	--	\$[0.00]
[FLAT EXTRA PREMIUM FOR [XX] POLICY YEAR[S]]	--	--	\$[0.00]
[ACCIDENTAL DEATH BENEFIT RIDER]	\$[50,000.00]	[30]	\$[50.00]
[CHILDREN'S TERM INSURANCE RIDER]	\$[2,000.00]	[30]	\$[12.00]
[WAIVER OF PREMIUM RIDER (DISABILITY)]	--	[25]	\$[34.00]
TOTAL FIRST POLICY YEAR ANNUAL PREMIUM	--	--	<u>\$[913.00]</u>

SEE SCHEDULE OF ANNUAL PREMIUMS BY POLICY YEAR FOR POLICY AND RIDER ANNUAL PREMIUMS AFTER THE FIRST POLICY YEAR.

EXCHANGE OPTION

Your policy may be exchanged on or before the earlier of the end of the Level Premium Period or the Policy Anniversary coinciding with the Insured's Age [70].

POLICY DATA-SCHEDULE OF LOAN AND NONFORFEITURE VALUES

Loan Interest Rate: [8.00]% A Year, Compounded Annually, Payable In Arrears.

Minimum Loan Amount: \$[100.00]

The Cash Value available under your policy will not be less than the minimum values required by or pursuant to the NAIC Standard Nonforfeiture Law for Life Insurance, model #808 and Actuarial Guideline XLV.

Nonforfeiture Mortality Table: [2001 CSO Ultimate Sex and Smoker Distinct, Age Nearest Birthday.]

Nonforfeiture Interest Rate: [4.00]%

Minimum Reduced Paid-Up Premium: \$[1,000.00]

POLICY DATA-SCHEDULE OF ADDITIONAL BENEFITS AND RIDERS

For benefit amounts and premiums, if any, see Schedule page 3. For details on the benefits provided by each Rider, see the Rider provisions.

ACCELERATED BENEFIT RIDER

[ACCIDENTAL DEATH BENEFIT RIDER]

[CHILDREN'S TERM INSURANCE RIDER]

[WAIVER OF PREMIUM RIDER (DISABILITY)]

POLICY DATA-SCHEDULE OF ANNUAL PREMIUMS BY YEAR

Policy Year	Base Policy*	[Accidental Death Benefit Rider]	[Children's Term Insurance Rider]	[Waiver of Premium Rider (Disability)]	Total Annual Premium
1	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
2	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
3	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
4	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
5	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
6	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
7	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
8	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
9	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
10	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
11	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
12	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
13	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
14	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
15	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
16	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
17	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
18	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
19	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
20	[\$817.00]	[\$50.00]	[\$12.00]	[\$34.00]	[\$913.00]
21	[\$1,925.00]	[\$50.00]	[\$12.00]	[\$147.00]	[\$2,134.00]
22	[\$2,149.00]	[\$50.00]	[\$12.00]	[\$211.00]	[\$2,422.00]
23	[\$2,390.00]	[\$50.00]	[\$12.00]	[\$279.00]	[\$2,731.00]
24	[\$2,597.00]	[\$50.00]	[\$12.00]	[\$375.00]	[\$3,034.00]
25	[\$2,835.00]	[\$50.00]	[\$12.00]	[\$508.00]	[\$3,405.00]
26	[\$3,122.00]	[\$50.00]	[\$12.00]	[\$0.00]	[\$3,184.00]
27	[\$3,472.00]	[\$50.00]	[\$12.00]	[\$0.00]	[\$3,534.00]
28	[\$3,899.00]	[\$50.00]	[\$12.00]	[\$0.00]	[\$3,961.00]
29	[\$4,378.00]	[\$50.00]	[\$12.00]	[\$0.00]	[\$4,440.00]
30	[\$4,882.00]	[\$50.00]	[\$12.00]	[\$0.00]	[\$4,944.00]
31	[\$5,414.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$5,414.00]
32	[\$5,953.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$5,953.00]
33	[\$6,499.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$6,499.00]
34	[\$7,087.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$7,087.00]
35	[\$7,696.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$7,696.00]
36	[\$8,435.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$8,435.00]
37	[\$9,261.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$9,261.00]
38	[\$10,346.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$10,346.00]
39	[\$11,490.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$11,490.00]
40	[\$12,694.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$12,694.00]

*Amounts in this column include premium for the base policy and any special class and flat extra premiums.

POLICY DATA - SCHEDULE OF ANNUAL PREMIUMS BY YEAR (CONTINUED)

Policy Year	Base Policy*	[Accidental Death Benefit Rider]	[Children's Term Insurance Rider]	[Waiver of Premium Rider (Disability)]	Total Annual Premium
41	[\$14,010.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$14,010.00]
42	[\$15,445.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$15,445.00]
43	[\$17,111.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$17,111.00]
44	[\$19,057.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$19,057.00]
45	[\$21,304.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$21,304.00]
46	[\$23,754.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$23,754.00]
47	[\$26,544.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$26,544.00]
48	[\$29,449.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$29,449.00]
49	[\$32,581.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$32,581.00]
50	[\$36,050.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$36,050.00]
51	[\$39,924.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$39,924.00]
52	[\$44,219.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$44,219.00]
53	[\$48,909.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$48,909.00]
54	[\$53,935.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$53,935.00]
55	[\$59,237.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$59,237.00]
56	[\$64,771.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$64,771.00]
57	[\$69,975.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$69,975.00]
58	[\$75,400.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$75,400.00]
59	[\$81,123.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$81,123.00]
60	[\$87,167.00]	[\$0.00]	[\$0.00]	[\$0.00]	[\$87,167.00]

*Amounts in this column include premium for the base policy and any special class and flat extra premiums.

Premium Modes: There is no additional charge if premiums are paid annually. If premiums are paid semi-annually, quarterly or monthly there is an additional Modal Premium Charge. To determine semi-annual, quarterly, and monthly payment amounts for each policy year, multiply the amount in each column above by the appropriate Gross Modal Factor shown below and total the results. To determine the corresponding Modal Premium Charge for each payment, multiply the amount in each column above by the appropriate Modal Premium Charge Factor shown below and total the results.

PREMIUM MODE	Net Modal Factor	Modal Premium Charge Factor	Gross Modal Factor
Semi-Annual	[0.5000]	[0.0200]	[0.5200]
Quarterly	[0.2500]	[0.0150]	[0.2650]
Monthly EFT	[0.083333]	[0.004167]	[0.0875]
Monthly List Bill	[0.083333]	[0.008667]	[0.0920]
Monthly Military Allotment	[0.083333]	[0.004167]	[0.0875]
Monthly Direct	[0.083333]	[0.011667]	[0.0950]

Paying premiums more frequently than annually results in a higher total premium for the same amount of coverage. More specifically, paying premiums on a semiannual basis results in a [4.00]% increase in total premiums paid. Paying premiums on a quarterly basis results in a [6.00]% increase in total premiums paid. Paying premiums on a monthly basis results in an increase in total premiums paid ranging from [5.00]% to [14.00]%, depending on the monthly option selected. Modal Premium Charges are not included in any Premium Endowment Benefit.

POLICY DATA - SCHEDULE OF CASH VALUES

The following table shows the Cash Value at the end of each Policy Year, based on policy benefits at issue and assuming that all premiums are paid when due.

Policy Year	Cash Value	Cash Value as a Percentage of Cumulative Benefit Premiums Received
1	[\$0.00]	[0.00%]
2	[\$0.00]	[0.00%]
3	[\$193.00]	[7.87%]
4	[\$854.00]	[26.13%]
5	[\$1,542.00]	[37.75%]
6	[\$2,259.00]	[46.09%]
7	[\$3,006.00]	[52.57%]
8	[\$3,786.00]	[57.92%]
9	[\$4,598.00]	[62.53%]
10	[\$5,445.00]	[66.65%]
11	[\$6,330.00]	[70.44%]
12	[\$7,254.00]	[73.99%]
13	[\$8,220.00]	[77.39%]
14	[\$9,227.00]	[80.67%]
15	[\$10,281.00]	[83.89%]
16	[\$11,382.00]	[87.07%]
17	[\$12,533.00]	[90.24%]
18	[\$13,741.00]	[93.44%]
19	[\$15,009.00]	[96.69%]
20	[\$16,340.00]	[100.00%]

During a Policy Year at the end of which there is a positive Cash Value, the Cash Value as a Percentage of Cumulative Benefit Premiums Received increases uniformly.

The endowment benefit amount is the Cash Value minus any outstanding loan and accrued loan interest on the Endowment Date, and will be paid to you if the Insured is alive and your policy is in force on that date (and not as Reduced Paid-up Insurance).

**POLICY DATA-SCHEDULE OF CORRIDOR PERCENTAGE FACTORS
(Definition of Life Insurance Test)**

Your Policy will be construed in a manner consistent with the requirements of the Cash Value Accumulation Test of section 7702 of the Internal Revenue Code, as amended (the "CVAT Test").

Your policy's Death Benefit will not be less than the amount necessary to comply with the CVAT Test. Your policy's Death Benefit at any time will not be less than:

- a. The Cash Value; multiplied by
- b. The appropriate Corridor Percentage Factor from the following table.

Insured's Age	Corridor Percentage Factor	Insured's Age	Corridor Percentage Factor	Insured's Age	Corridor Percentage Factor
[35]	[4.98920]	[55]	[2.54780]	[75]	[1.52230]
[36]	[4.81770]	[56]	[2.47030]	[76]	[1.49450]
[37]	[4.65240]	[57]	[2.39630]	[77]	[1.46860]
[38]	[4.49270]	[58]	[2.32580]	[78]	[1.44480]
[39]	[4.33900]	[59]	[2.25790]	[79]	[1.42340]
[40]	[4.19080]	[60]	[2.19280]	[80]	[1.40470]
[41]	[4.04800]	[61]	[2.13060]	[81]	[1.38880]
[42]	[3.91070]	[62]	[2.07120]	[82]	[1.37630]
[43]	[3.77890]	[63]	[2.01500]	[83]	[1.36730]
[44]	[3.65230]	[64]	[1.96170]	[84]	[1.36230]
[45]	[3.53100]	[65]	[1.91120]	[85]	[1.36250]
[46]	[3.41490]	[66]	[1.86330]	[86]	[1.36930]
[47]	[3.30340]	[67]	[1.81770]	[87]	[1.38530]
[48]	[3.19630]	[68]	[1.77400]	[88]	[1.41440]
[49]	[3.09280]	[69]	[1.73230]	[89]	[1.46310]
[50]	[2.99270]	[70]	[1.69220]	[90]	[1.54360]
[51]	[2.89630]	[71]	[1.65410]	[91]	[1.68020]
[52]	[2.80350]	[72]	[1.61780]	[92]	[1.92750]
[53]	[2.71450]	[73]	[1.58390]	[93]	[2.45280]
[54]	[2.62930]	[74]	[1.55210]	[94]	[4.09460]

After the Endowment Date the policy's Cash Value will be zero.

TERMS TO UNDERSTAND

This section identifies some of the important terms that are used throughout your policy and that have special meaning. It is a reference to where we have defined and more fully discussed these terms.

Age: See the Age section on page 12

Beneficiary: See the Beneficiaries section on page 13

Benefit Premium: See the Benefit Premium section on page 9

Cash Value, Cash Surrender Value and Loan Value: See the Cash Surrenders section on page 9

Death Proceeds and Stated Death Benefit: See the Death Benefit section on page 8

Ending Date: See the Policy Dates and Periods section on page 7

Endowment Date: See the Policy Dates and Periods section on page 7

ING Customer Service Center: See the ING Customer Service Center section on page 15

Insured: See the Insured section on page 12

Issue Date, Policy Date, Policy Anniversary, and Policy Year: See the Policy Dates and Periods section on page 7

Level Premium Period: See the Premiums section on page 7

Owner: See the Owner section on page 12

Right to Examine Period: See the Policy Dates and Periods section on page 7

Settlement Options: See the Settlement Options section on page 15

INSURANCE COVERAGE PROVISIONS

POLICY DATES AND PERIODS

Issue Date

The Issue Date is the date we issue your policy on the life of the Insured. We show the Issue Date in your Schedule and it may be later than the Policy Date if your policy is backdated to save age.

Policy Date

The Policy Date is the effective date for all coverage provided under your policy. No coverage may take effect under your policy unless (1) we receive the required initial premium for your policy, (2) your policy has been delivered to you, and (3) there has been no change in the insurability of the proposed Insured from the date of your policy application to the later of the date we receive the required initial premium or the date of policy delivery.

We show the Policy Date in your Schedule. It is the date from which we measure Policy Anniversaries, Policy Years, the Endowment Date and the Ending Date. A Policy Anniversary occurs each year on the same month and day as the Policy Date. The period between the Policy Date and the first Policy Anniversary, or from one Policy Anniversary to the next, is a Policy Year.

Endowment Date

The Endowment Date is shown on the Schedule. It is the date on which, if the Insured is alive and your policy is in force on that date (and not as Reduced Paid-Up Insurance), we pay to you the Cash Surrender Value.

Ending Date

The Ending Date is the date on which all coverage provided under your policy ends, unless coverage is terminated earlier than this date as provided herein. We show the Ending Date in your Schedule.

Right to Examine Period

The Right to Examine Period is the number of days after delivery of your policy during which you have the right to examine your policy and return it for a refund. For details, see the Cover Page.

PREMIUMS

Your initial premium must be paid on or before the date your policy is delivered. In order for a premium to be effective it must be received at the ING Customer Service Center. All premiums after the initial premium are due and payable on or before the date they are due and must be mailed to us at the ING Customer Service Center. A premium receipt signed by an officer of the Company will be furnished upon request.

During the Level Premium Period, as shown in the Schedule, premiums for this policy are level for the period elected by you at the time of application. Premiums for riders, if any, may not be level during the Level Premium Period.

After the Level Premium Period, premiums may change each year as shown in the Schedule of Annual Premiums by Year.

You may pay your premiums once, twice, four or twelve times a year. We have the right, however, not to accept a premium payment of an amount less than \$25.00.

If you decide to pay premiums once a year, your annual premium will be due on your Policy Anniversary. Should you decide to pay premiums more than once a year, your semi-annual premiums will be due every six months, your quarterly premiums will be due every three months and your monthly premiums will be due every month. In each year, one of the premium due dates must fall on your Policy Anniversary. Except as otherwise provided in this policy, this policy will automatically terminate at the end of the Grace Period if any premium is not paid when due.

DEATH BENEFIT

Stated Death Benefit

We show the Stated Death Benefit in your Schedule. It is the amount of insurance coverage provided under your policy.

Death Benefit

The Death Benefit on the date of the Insured's death equals the greater of:

- a. Your policy's Stated Death Benefit; or
- b. The Cash Value multiplied by the appropriate Corridor Percentage Factor from the Schedule of Corridor Percentage Factors.

Your policy is intended to qualify as a life insurance contract under the Internal Revenue Code, as amended. All terms and provisions of your policy will be construed in a manner consistent with the requirements of the Internal Revenue Code, as amended. Your policy's Death Benefit in force at any time will not be less than the minimum death benefit necessary to achieve such qualification under the applicable provisions and regulations of the Internal Revenue Code in effect at the time your policy is issued. We reserve the right to adjust the amount of coverage or reject any change request when required to maintain this tax qualification. The Definition of Life Insurance Test shown on the Schedule of Corridor Percentage Factors is the specific method by which your policy may qualify as a life insurance contract.

Death Proceeds

Death Proceeds is the amount we pay at the Insured's death. It equals:

- a. The Death Benefit as of the date of the Insured's death; plus
- b. Any added benefit provided by rider; plus
- c. A pro rata portion of any premium paid beyond the month of the Insured's death; minus
- d. Any unpaid premium then due; minus
- e. Any outstanding loan and accrued loan interest.

We will pay the Death Proceeds within 7 days of when we receive due proof of the death claim. Due proof of the death claim means we have received:

- a. Due proof of the Insured's death;
- b. Sufficient information to determine the identity of the legally entitled beneficiaries; and
- c. Sufficient evidence that any legal impediments to payment that depend on parties other than us are resolved. Such legal impediments include, but are not limited to, the establishment of guardianships and conservatorships, the appointment and qualification of trustees, executors and administrators and our receipt of information required to satisfy state and federal reporting requirements.

Any Death Proceeds we pay are subject to adjustments as provided in the Misstatement of Age or Gender, Suicide Exclusion and Incontestability sections. We will pay the Death Proceeds in one lump sum unless you request an alternate method of payment. We describe these alternate methods of payment in the Settlement Options Provisions.

We will pay interest on the lump sum Death Proceeds from the date of the Insured's death to the date of payment. We will compute interest at a rate required by law from the date of death to the date the proceeds are paid.

If the Death Proceeds are payable before the Endowment Date, the Cash Surrender Value will not be paid.

PREMIUM ENDOWMENT PROVISIONS

If the Insured is alive and your policy is in force on the Endowment Date (and not as Reduced Paid-Up Insurance), we pay to you an endowment benefit equal to the Cash Surrender Value in one lump sum and repay any outstanding loan and accrued loan interest. After the endowment benefit is paid, your policy will continue in force as long as the required premiums are paid.

NONFORFEITURE PROVISIONS

CASH SURRENDERS

Subject to the terms of your policy and provided the Insured is alive, at any time before the Endowment Date you may surrender your policy for the Cash Surrender Value. If your policy is surrendered, your policy and all riders will terminate and cannot be reinstated.

The Cash Surrender Value is not payable upon the Insured's death or if your policy is continued as Reduced Paid-Up Insurance.

Cash Surrender Value

The Cash Surrender Value is equal to the then current Cash Value minus any outstanding loan and accrued loan interest.

Cash Value

The Cash Value equals a percentage of the cumulative Benefit Premiums we have received. The Cash Values shown on the Schedule of Cash Values are based on Policy benefits at issue and assume that all premiums are paid when due. If an accelerated benefit is paid under an accelerated benefit rider, the Cash Value will be reduced in proportion to the benefit accelerated before any reductions or charges divided by the Stated Death Benefit. The Cash Value within 30 days following a policy anniversary will not be less than the Cash Value on that anniversary, reduced by payments we make within those 30 days.

Benefit Premium

The Benefit Premium equals the gross premiums paid for your policy, minus any special class extra premium, flat extra premium and Modal Premium Charges and premiums paid that are not yet due and payable. Premiums paid for riders are not included in the Benefit Premium amount.

LOANS

If your policy has a Loan Value, you may take a loan from us using your policy as collateral.

The Loan Value is the maximum amount you may borrow against your policy. It is equal to the Cash Value on the date to which premiums are paid minus any outstanding loan, minus all premiums due, and minus loan interest to the end of the current Policy Year on the Cash Value. The Loan Value may not exceed the Cash Surrender Value. The minimum amount you may borrow is set forth on the Schedule of Loan and Nonforfeiture Values. Any loan request should be sent to the ING Customer Service Center.

If more than one loan is requested, any new loan will be added to the existing loan. This way there is only one loan outstanding at any time.

We charge interest on all loans at the annual loan interest rate shown on the Schedule of Loan and Nonforfeiture Values. Interest is due and payable at the end of each Policy Year until the loan is repaid. If interest is not paid when due, it is added to the loan. If the loan and any accrued interest exceed the Cash Value, a payment sufficient to keep your policy in force will be due and must be paid before the end of the grace period or your policy will terminate.

You may repay the loan at anytime. Loan repayments should be sent to the ING Customer Service Center.

Automatic Premium Loans

Automatic premium loans are an optional benefit that you may elect at the time of application or anytime thereafter. If you elect the automatic premium loan benefit, any premiums due at the end of the Policy's grace period will be automatically paid by taking a loan against the Loan Value of the Policy. If the Loan Value is not sufficient to pay the entire premium that is due for the then current premium mode, the loan will be for an amount sufficient to pay the premium for the next shorter premium mode, but not less frequently than quarterly. If the Loan Value is not sufficient to pay the premium then due, the Policy will terminate unless the Reduced Paid-Up Insurance provision applies.

REDUCED PAID-UP INSURANCE

If a premium is not paid within 31 days after its due date, your policy will continue from the unpaid premium's due date as Reduced Paid-Up Insurance, provided that your policy has not been surrendered and has a Cash Surrender Value on the unpaid premium's due date greater than or equal to the Minimum Reduced Paid-Up Premium. All rider benefits terminate if your policy continues as Reduced Paid-Up Insurance. Loans are not available if your policy continues as Reduced Paid-Up insurance.

If your policy continues as Reduced Paid-Up Insurance, we will use the Cash Surrender Value as a net single premium to purchase paid up insurance to the Ending Date, which is Age 95 of the Insured. When calculating the amount of Reduced Paid-Up Insurance coverage, we base the net single premium rates on the Insured's gender, as applicable, Age and risk class, and the Nonforfeiture Mortality Table and the Nonforfeiture Interest Rate as shown in the Schedule of Loan and Nonforfeiture Values. The cash value of Reduced Paid-Up Insurance at any point in time will equal the net single premium for continued Reduced Paid-Up Insurance coverage to the Ending Date.

The Minimum Reduced Paid-Up Premium is shown on the Schedule of Loan and Nonforfeiture Values. If the Cash Surrender Value is less than the Minimum Reduced Paid-Up Premium, we will pay to you the Cash Surrender Value in one lump sum.

The maximum amount of Reduced Paid-Up Insurance is equal to the Stated Death Benefit, minus any outstanding loan and accrued loan interest. If the Cash Surrender Value exceeds the amount required to purchase the maximum amount of Reduced Paid-Up Insurance to the Ending Date, any excess will be used to purchase a pure endowment payable at the Endowment Date if the Insured is alive on that date.

If your policy continues as Reduced Paid-Up Insurance, we will adjust the Schedule of Corridor Percentage Factors to reflect the Nonforfeiture Interest Rate and Nonforfeiture Mortality Table at that time.

BASIS OF NONFORFEITURE VALUES

Minimum cash values are based on the Nonforfeiture Mortality Table and Nonforfeiture Interest Rate shown on the Schedule of Loan and Nonforfeiture Values. Cash values will be no less than the minimum required in the state in which your policy is issued. A detailed statement of the method of computation of cash values has been filed with the Insurance Department of the state in which the Policy is issued.

DEFERRAL OF PAYMENTS

We reserve the right to defer payment of the Cash Surrender Value or the granting of a loan for the period permitted by state law, but in no event more than 6 months. We will not defer granting a loan that will be used solely to pay premiums on one or more of your policies with us. Interest will be credited on the amount of any payment that is deferred as required by state law.

GENERAL POLICY PROVISIONS

YOUR POLICY

Your policy, including a copy of your application and any Schedules, amendments and endorsements make up your entire contract between you and us. We will attach a copy of your original application to your policy at issue. In the absence of fraud, we will consider all statements made in your initial application, and any application for reinstatement, as representations and not warranties. No statement will be used to deny a claim unless it is in an application that is made part of your policy.

Both our President or another officer, and our Secretary or Assistant Secretary must sign all changes to your policy. No other person can change any of your policy's terms and conditions.

Your policy does not participate in our surplus earnings.

EXCHANGE OPTION

Subject to the conditions described below, your policy may be exchanged for a new policy that is acceptable to us at the time of the exchange. Any riders attached to your policy at the time of the exchange may be included in the new policy subject to their availability and our approval. When you exercise the exchange option, unless you tell us otherwise, we will apply the Cash Surrender Value as premium towards the new policy. Your written request for an exchange must be made in advance and no premium may be outstanding at the time of the request.

If you do not exchange your policy, it will continue to provide coverage to the Ending Date according to its terms.

Evidence of insurability is not required to exercise this exchange option unless the new policy and any riders contain new benefits not contained in your policy or any riders attached to your policy at the time of

the exchange. In this case, evidence of insurability may be required but it will be limited to evidence that relates to the new benefits not contained in your policy or any attached riders.

The conditions on which you may exercise this exchange option are:

- a. Your policy may be exchanged on or before the earlier of the end of the Level Premium Period or the Policy Anniversary coinciding with the Insured's Age [70];
- b. If the Cash Surrender Value is applied to the new policy, the death benefit under the new policy may not exceed the Stated Death Benefit of your policy, minus any outstanding loan and accrued loan interest. If the Cash Surrender Value is not applied to the new policy, the death benefit under the new policy may not exceed the Stated Death Benefit of your policy on the effective date of the exchange, minus the Cash Value. The effective date of the exchange is the date we receive your application for the exchange accompanied by the initial premium for the new policy;
- c. The death benefit of the new policy may not be less than the minimum required for the new policy. At least one policy will always be available in an amount to which your policy may be exchanged;
- d. The new policy will be in the same risk class as your policy if available at the time of the exchange, otherwise, in the most comparable risk class available at the time. The premium will be based on rates in effect for the Age, gender and risk class of the Insured at the time of the exchange; and
- e. The new policy will have a policy date and issue Age corresponding to the effective date of the exchange.

The suicide and incontestability periods in any new policy that is issued pursuant to the exercise of this exchange option will be measured from the Issue Date of this policy, unless the new policy contains new benefits not contained in your policy. In this case, the suicide and incontestability provisions of the new policy applicable to the new benefits will be measured from the issue date of the new policy.

NOTICE AND PROCEDURES

You should send any notice to the ING Customer Service Center. We may require a return of your policy or proof of your lost policy for the termination of your policy. We are not liable for any action we take before we receive and record your written notification at the ING Customer Service Center.

In the event of the death of the Insured, please let us know as soon as possible. Once we receive notification of the Insured's death, we will promptly send claim filing instructions to you or the Beneficiary. We may require proof of Age and a certified copy of the death certificate. We may require the Beneficiary and next of kin to sign authorizations as part of due proof of the death claim. These authorization forms allow us to obtain information about the decedent, including, but not limited to, medical records of physicians and hospitals used by the decedent.

AGE

Age is the age of the Insured on his or her birthday nearest to the Policy Date. We issue your policy at the Age shown in your Schedule.

INSURED

The Insured is the person whose life is insured by your policy. The Insured's name is shown in your Schedule and the Insured may or may not be the Owner of your policy.

OWNER

The original Owner is the person or entity named as the Owner in your application. The words “you” and “your” in this policy refer to the Owner.

You, as the Owner, can exercise all rights and receive the benefits until the Insured's death. This includes the right to change the Owner, beneficiaries and methods for the payment of Death Proceeds. You may name a new Owner by sending us notice. Unless you state otherwise, the new Owner designation will take effect on the date you sign the notice, subject to any payment made or actions taken prior to receipt of your notice at the ING Customer Service Center. All rights of the Owner are subject to the rights of any assignee and any irrevocable Beneficiary.

BENEFICIARIES

Your Beneficiary designation will be on file with us. Until the Insured's death, you may name a new Beneficiary by sending us notice. An irrevocable Beneficiary cannot be changed without the consent of the irrevocable Beneficiary. Unless you state otherwise, the new Beneficiary designation will take effect on the date you sign the notice, subject to any payments or actions we take prior to receipt of your notice at the ING Customer Service Center. We will pay Death Proceeds to the Beneficiaries listed on your most recent Beneficiary designation and we will not be subject to multiple payments.

We will pay the Death Proceeds to the primary Beneficiary or Beneficiaries surviving the Insured's death. If no primary Beneficiaries survive the Insured's death, we will pay the surviving contingent Beneficiary or Beneficiaries. If more than one Beneficiary in a class survives the Insured's death, they will share the Death Proceeds equally, unless your Beneficiary designation provides otherwise. We will pay the Death Proceeds to you or your estate if there is no surviving designated Beneficiary.

ASSIGNMENT

You may assign your policy as security by giving us notice. Unless you state otherwise, the assignment will take effect on the date you sign the notice, subject to any payments or actions we take prior to receipt of your notice at the ING Customer Service Center. The rights of the Owner and beneficiaries are subject to the assignment. We are not liable for the validity of any assignment.

INCONTESTABILITY

After your policy has been in force during the lifetime of the Insured for two years from the Issue Date, we will not contest its validity except for nonpayment of premiums. After your policy has been in force during the lifetime of the Insured for two years from the date of any reinstatement, we will not contest its validity except for nonpayment of premiums. We will base any contest only on statements made in your application for your policy and application for reinstatement, as applicable; and the statements must be material to the risk accepted or the hazard assumed by us. Notwithstanding the above, we may contest your policy at any time if it was procured by fraud, as permitted by the law of the state in which your policy was delivered.

MISSTATEMENT OF AGE OR GENDER

We will adjust the death benefit if the Insured's Age or gender has been misstated. Notwithstanding the Incontestability section, the adjusted death benefit will equal the death benefit that the most recent premium would have purchased at the Insured's correct Age and gender.

SUICIDE EXCLUSION

If the Insured commits suicide, while sane or insane, while your policy is in force and within two years of the Issue Date, we will make a limited payment to the Beneficiary. We will pay in one lump sum the amount of all premiums paid to us for your policy, minus any outstanding loan and accrued loan interest. Coverage under your policy will then terminate.

TERMINATION

Your policy will terminate and all coverage provided by your policy will end upon the earliest of the following dates:

- a. The date you surrender your policy for the Cash Surrender Value;
- b. The date your policy lapses (when the grace period ends without payment of the required premium or loan and accrued interest payment, as applicable);
- c. The date we receive notice of your written request to terminate or exchange your policy;
- d. The Ending Date; or
- e. The date of the Insured's death.

GRACE PERIOD

After the initial premium and subject to the Automatic Premium Loan and Reduced Paid-Up Insurance provisions, premiums must be paid by the 31st day after the due date or your policy will terminate. Likewise, if any outstanding loan and accrued interest exceed the Cash Surrender Value, the loan and accrued loan interest must be paid by the 31st day after the due date or your policy will terminate. Premiums and loan repayments sent to us by U.S. mail and postmarked within the grace period shall be deemed to be paid within the grace period. Your policy will be in force during this 31 day grace period. If the Insured dies during the grace period, we will deduct from the Death Proceeds all due and unpaid premiums and any outstanding loan and accrued loan interest.

REINSTATEMENT

If your policy terminates for failure to pay the required premium or loan and accrued interest payment, as applicable, by the end of the grace period and has not been surrendered for the Cash Surrender Value, it may be reinstated within three years of the due date of the unpaid premium or loan repayment if you provide us with:

- a. A written application for reinstatement on a form acceptable to us;
- b. Evidence of insurability satisfactory to us;
- c. Payment of all overdue premiums with 6.00% interest compounded annually up to the date of reinstatement;
- d. Payment of the Cash Surrender Value paid upon lapse of your policy, if any, with 6.00% interest compounded annually up to the date of reinstatement; and
- e. Payment of any premiums due within 60 days following the date of reinstatement.

When your policy is reinstated, we will reinstate the loan amount, if any, with interest at the rate shown in the Schedule of Loan and Nonforfeiture Values compounded annually up to the date of reinstatement.

If the policy lapses before the Endowment Date and is reinstated on or after the Endowment Date, after we receive the amount necessary to reinstate the policy we will pay you the Cash Surrender Value that would have been paid on the Endowment Date if the policy had not lapsed.

ING CUSTOMER SERVICE CENTER

The ING Customer Service Center is located at P.O. Box 5011, Minot, ND 58702-5011. For overnight delivery, the address is 2000 21st Ave NW, Minot, ND 58703-0890. Unless we give you notice otherwise, you should send all notices and requests to the ING Customer Service Center.

SETTLEMENT OPTIONS PROVISIONS

SETTLEMENT OPTION SELECTION

A Settlement Option provides for payment of Death Proceeds or all or part of the Cash Surrender Value in other than a lump sum. You may select a Settlement Option by giving us notice. If you have not selected a Settlement Option before the death of the Insured, the Beneficiary may select a Settlement Option by giving us notice prior to our payment of the lump sum Death Proceeds. A payee that is not a natural person may not be named without our consent.

SETTLEMENT OPTIONS

- a. **Settlement Option I - Payments for a Designated Period.** Based on your selection, we will pay annual, semi-annual, quarterly or monthly installments per year for a designated period that may be 5 to 30 years. The installment dollar amounts will be equal except for any excess interest as described below. The amount of the first monthly payment for each \$1,000.00 of Death Proceeds or Cash Surrender Value applied is in Settlement Table I.
- b. **Settlement Option II - Life Income with Payments for a Designated Period.** Based on your selection, we will pay annual, semi-annual, quarterly or monthly installments per year throughout the payee's lifetime, or if longer, for a period of 5, 10, 15 or 20 years. The installment dollar amounts will be equal except for any excess interest as described below. The amount of the first monthly payment for each \$1,000.00 of Death Proceeds or Cash Surrender Value applied is in Settlement Option Table II. This Settlement Option is available only for ages shown in the table. Payments for Settlement Option II will be determined by using the 2000 Individual Annuitant Mortality Table for the appropriate gender at 1.50% interest annually.
- c. **Settlement Option III - Hold at Interest.** You may leave amounts on deposit with us that we will pay on the death of the payee, or at any earlier date you select. Interest on any unpaid balance will be at the rate declared by us or at any higher rate required by law. You select whether interest will be left on deposit with us and accumulated or paid in monthly, quarterly, semi-annual or annual payments each year. You may not leave any amount on deposit for more than 30 years.
- d. **Settlement Option IV - Payments of a Designated Amount.** Based on your selection, we will pay a designated amount in annual, semi-annual, quarterly or monthly equal installments per year until the Death Proceeds, together with interest at the rate declared by us or at any higher rate required by law, are exhausted.
- e. **Settlement Option V - Other.** Settlement may be made in any other manner as agreed in writing between you (or the Beneficiary) and us.

SETTLEMENT OPTION CHANGES AND WITHDRAWALS

You may change any Settlement Option at any time before the death of the Insured. If you have given the Beneficiary the right to make changes, or if the Beneficiary has selected the Settlement Option, the Beneficiary (as primary payee) may take the following actions:

- a. Make a change from Settlement Options I, III, and IV to another Settlement Option;
- b. Take a full withdrawal under Settlement Option III or IV; and partial withdrawals of not less than \$300.00 under Settlement Option III;
- c. Commute and receive in one sum the present value of any remaining installments under Settlement Option I at 1.50% interest annually; and
- d. Change any contingent payee designation.

You may give us notice requesting a change or withdrawal. We may require that you send in the supplementary policy or provide proof of your lost policy. We may defer payment of a commuted payment and any withdrawals for a period up to 6 months.

SETTLEMENT OPTION EXCESS INTEREST

We may declare an interest rate above the guaranteed rate on Settlement Options I, II, III and IV. The crediting of excess interest for one period does not guarantee the higher rate for other periods.

SETTLEMENT OPTION MINIMUM AMOUNTS

The minimum amount you may apply under any Settlement Option is \$2,000.00. If the payments to the payee are ever less than \$20.00, we may change the frequency of payments to result in payments of at least that amount.

SUPPLEMENTARY POLICY

When a Settlement Option becomes effective, we will surrender your policy in exchange for a supplementary policy. It will provide for the manner of settlement and rights of the payees. The supplementary policy's effective date will be the date of the Insured's death. The first payment under Settlement Options I, II, and IV will be payable as of the effective date. The first interest payment under Settlement Option III will be made as of the end of the interest payment period selected. We will make subsequent payments in accordance with the frequency of payment selected. You may not assign the supplementary policy or payments without our consent.

INCOME PROTECTION

Unless otherwise provided in the Settlement Option Changes and Withdrawals section above or in the selection of the Settlement Option, a payee does not have the right to commute, transfer or encumber amounts held or installments to become payable. To the extent provided by law, the Death Proceeds, retained amounts and installments are not subject to any payee's debts, policies or engagements.

DEATH OF PRIMARY PAYEE

On the primary payee's death, we will continue any payments certain under Settlement Option I or II, interest payments under Settlement Option III, or payments under Settlement Option IV to the contingent payee, or release any amounts in one lump sum, if permitted by your policy. The final payee will be the estate of the last to die of the primary payee and any contingent payee.

PAYMENTS OTHER THAN MONTHLY

The tables that follow show monthly installments for Settlement Options I and II. To arrive at annual, semi-annual or quarterly payments, multiply the appropriate figures by 11.813, 5.957 or 2.991 respectively. We will provide factors for other periods certain, or for other options provided by mutual agreement, on reasonable request.

SETTLEMENT OPTION TABLES

SETTLEMENT OPTION I

(Per \$1,000.00 of Death Proceeds or Cash Surrender Value)

No. of Years Payable	Monthly Installment	No. of Years Payable	Monthly Installment
5	\$17.28	18	\$5.27
6	\$14.51	19	\$5.03
7	\$12.53	20	\$4.81
8	\$11.04	21	\$4.62
9	\$9.89	22	\$4.44
10	\$8.96	23	\$4.28
11	\$8.21	24	\$4.13
12	\$7.58	25	\$3.99
13	\$7.05	26	\$3.86
14	\$6.59	27	\$3.75
15	\$6.20	28	\$3.64
16	\$5.85	29	\$3.54
17	\$5.55	30	\$3.44

We base these monthly installments on an interest rate of 1.50% per year.

SETTLEMENT OPTION TABLES (CONTINUED)

SETTLEMENT OPTION II

Female

(Per \$1,000.00 of Death Proceeds or Cash Surrender Value)

Age of Payee's Nearest Birthday When First Installment is Payable	Monthly Installment				Age of Payee's Nearest Birthday When First Installment is Payable	Monthly Installment			
	Female	Life With 5 Years Certain	Life With 10 Years Certain	Life With 15 Years Certain		Life With 20 Years Certain	Female	Life With 5 Years Certain	Life With 10 Years Certain
15	1.92	1.92	1.92	1.92	41	2.57	2.56	2.56	2.55
16	1.94	1.94	1.94	1.94	42	2.61	2.60	2.60	2.59
17	1.95	1.95	1.95	1.95	43	2.65	2.64	2.64	2.63
18	1.97	1.97	1.97	1.97	44	2.69	2.69	2.68	2.67
19	1.99	1.99	1.99	1.99	45	2.74	2.73	2.73	2.71
20	2.01	2.01	2.01	2.00	46	2.79	2.78	2.77	2.76
21	2.02	2.02	2.02	2.02	47	2.84	2.83	2.82	2.80
22	2.04	2.04	2.04	2.04	48	2.89	2.88	2.87	2.85
23	2.06	2.06	2.06	2.06	49	2.94	2.94	2.92	2.90
24	2.08	2.08	2.08	2.08	50	3.00	2.99	2.98	2.95
25	2.10	2.10	2.10	2.10	51	3.06	3.05	3.03	3.00
26	2.13	2.12	2.12	2.12	52	3.12	3.11	3.09	3.06
27	2.15	2.15	2.15	2.14	53	3.19	3.18	3.16	3.12
28	2.17	2.17	2.17	2.17	54	3.26	3.25	3.22	3.18
29	2.19	2.19	2.19	2.19	55	3.33	3.32	3.29	3.24
30	2.22	2.22	2.22	2.21	56	3.41	3.39	3.36	3.30
31	2.25	2.24	2.24	2.24	57	3.49	3.47	3.43	3.37
32	2.27	2.27	2.27	2.27	58	3.58	3.56	3.51	3.44
33	2.30	2.30	2.30	2.29	59	3.67	3.65	3.59	3.51
34	2.33	2.33	2.32	2.32	60	3.77	3.74	3.68	3.58
35	2.36	2.36	2.35	2.35	61	3.87	3.84	3.77	3.66
36	2.39	2.39	2.39	2.38	62	3.98	3.94	3.86	3.73
37	2.42	2.42	2.42	2.41	63	4.10	4.05	3.96	3.81
38	2.46	2.45	2.45	2.44	64	4.22	4.16	4.06	3.88
39	2.49	2.49	2.49	2.48	65	4.35	4.29	4.16	3.96
40	2.53	2.53	2.52	2.51	66	4.49	4.42	4.27	4.04

We will provide monthly installments for ages not shown on request.

We base these monthly installments on the 2000 Individual Annuitant Mortality Table and an interest rate of 1.50% per year.

SETTLEMENT OPTION TABLES (CONTINUED)

SETTLEMENT OPTION II

Female (Continued)

(Per \$1,000.00 of Death Proceeds or Cash Surrender Value)

Age of Payee's Nearest Birthday When First Installment is Payable	Monthly Installment			
	Life With 5 Years Certain	Life With 10 Years Certain	Life With 15 Years Certain	Life With 20 Years Certain
67	4.64	4.55	4.38	4.11
68	4.80	4.69	4.49	4.19
69	4.97	4.85	4.61	4.26
70	5.15	5.00	4.73	4.33
71	5.35	5.17	4.85	4.39
72	5.56	5.35	4.97	4.45
73	5.78	5.53	5.09	4.51
74	6.03	5.72	5.20	4.56
75	6.28	5.92	5.31	4.60
76	6.56	6.12	5.42	4.64
77	6.85	6.32	5.52	4.68
78	7.17	6.53	5.62	4.70
79	7.50	6.74	5.70	4.73
80	7.86	6.95	5.78	4.75
81	8.23	7.15	5.85	4.76
82	8.63	7.35	5.91	4.78
83	9.04	7.54	5.97	4.79
84	9.47	7.71	6.01	4.80
85	9.91	7.88	6.05	4.80
86	10.36	8.03	6.08	4.81
87	10.82	8.17	6.11	4.81
88	11.28	8.29	6.13	4.81
89	11.73	8.40	6.15	4.81
90	12.17	8.50	6.16	4.81

We will provide monthly installments for ages not shown on request.

We base these monthly installments on the 2000 Individual Annuitant Mortality Table and an interest rate of 1.50% per year.

SETTLEMENT OPTION TABLES (CONTINUED)

SETTLEMENT OPTION II

Male

(Per \$1,000.00 of Death Proceeds or Cash Surrender Value)

Age of Payee's Nearest Birthday When First Installment is Payable	Monthly Installment				Age of Payee's Nearest Birthday When First Installment is Payable	Monthly Installment			
	Life With 5 Years Certain	Life With 10 Years Certain	Life With 15 Years Certain	Life With 20 Years Certain		Male	Life With 5 Years Certain	Life With 10 Years Certain	Life With 15 Years Certain
15	1.99	1.99	1.99	1.99	41	2.73	2.73	2.72	2.70
16	2.01	2.01	2.01	2.01	42	2.78	2.78	2.76	2.74
17	2.03	2.03	2.03	2.03	43	2.83	2.82	2.81	2.79
18	2.05	2.05	2.05	2.04	44	2.88	2.87	2.86	2.83
19	2.07	2.07	2.07	2.06	45	2.93	2.93	2.91	2.88
20	2.09	2.09	2.09	2.08	46	2.99	2.98	2.96	2.93
21	2.11	2.11	2.11	2.10	47	3.05	3.04	3.02	2.98
22	2.13	2.13	2.13	2.12	48	3.11	3.10	3.07	3.03
23	2.15	2.15	2.15	2.15	49	3.17	3.16	3.13	3.09
24	2.17	2.17	2.17	2.17	50	3.24	3.22	3.19	3.14
25	2.20	2.20	2.19	2.19	51	3.31	3.29	3.26	3.20
26	2.22	2.22	2.22	2.22	52	3.38	3.36	3.32	3.26
27	2.25	2.25	2.24	2.24	53	3.46	3.44	3.39	3.32
28	2.27	2.27	2.27	2.27	54	3.54	3.52	3.47	3.39
29	2.30	2.30	2.30	2.29	55	3.63	3.60	3.54	3.45
30	2.33	2.33	2.33	2.32	56	3.72	3.68	3.62	3.52
31	2.36	2.36	2.35	2.35	57	3.81	3.77	3.70	3.58
32	2.39	2.39	2.38	2.38	58	3.91	3.87	3.79	3.65
33	2.42	2.42	2.42	2.41	59	4.02	3.97	3.87	3.72
34	2.46	2.45	2.45	2.44	60	4.13	4.08	3.97	3.79
35	2.49	2.49	2.48	2.47	61	4.25	4.19	4.06	3.86
36	2.53	2.52	2.52	2.51	62	4.38	4.30	4.16	3.93
37	2.56	2.56	2.56	2.54	63	4.52	4.43	4.26	4.01
38	2.60	2.60	2.59	2.58	64	4.66	4.56	4.36	4.07
39	2.65	2.64	2.63	2.62	65	4.82	4.69	4.46	4.14
40	2.69	2.68	2.68	2.66					

We will provide monthly installments for ages not shown on request.

We base these monthly installments on the 2000 Individual Annuitant Mortality Table and an interest rate of 1.50% per year.

SETTLEMENT OPTION TABLES (CONTINUED)

SETTLEMENT OPTION II

Male (Continued)

(Per \$1,000.00 of Death Proceeds or Cash Surrender Value)

Age of Payee's Nearest Birthday When First Installment is Payable	Monthly Installment			
	Life With 5 Years Certain	Life With 10 Years Certain	Life With 15 Years Certain	Life With 20 Years Certain
66	4.98	4.83	4.57	4.21
67	5.15	4.98	4.68	4.27
68	5.34	5.13	4.78	4.33
69	5.53	5.29	4.89	4.39
70	5.74	5.45	5.00	4.45
71	5.95	5.62	5.10	4.50
72	6.18	5.80	5.21	4.54
73	6.42	5.97	5.31	4.58
74	6.68	6.15	5.40	4.62
75	6.95	6.33	5.49	4.66
76	7.23	6.52	5.58	4.68
77	7.53	6.70	5.66	4.71
78	7.85	6.88	5.73	4.73
79	8.17	7.06	5.80	4.75
80	8.52	7.24	5.86	4.76
81	8.87	7.41	5.92	4.78
82	9.24	7.57	5.97	4.79
83	9.62	7.73	6.01	4.80
84	10.01	7.88	6.05	4.80
85	10.41	8.02	6.08	4.81
86	10.81	8.14	6.10	4.81
87	11.22	8.26	6.13	4.81
88	11.63	8.37	6.14	4.81
89	12.04	8.47	6.16	4.81
90	12.45	8.55	6.17	4.81

We will provide monthly installments for ages not shown on request.

We base these monthly installments on the 2000 Individual Annuitant Mortality Table and an interest rate of 1.50% per year.

**YOUR POLICY IS A TERM LIFE INSURANCE POLICY TO AGE 95 WITH AN ENDOWMENT BENEFIT
PAYABLE ON THE ENDOWMENT DATE AND AN EXCHANGE OPTION PROVISION.
YOUR POLICY IS NONPARTICIPATING AND NONRENEWABLE.**

PLEASE READ YOUR POLICY CAREFULLY

**YOUR POLICY IS A VALUABLE ASSET
DO NOT ALLOW IT TO TERMINATE WITHOUT CONSULTING US**

The Death Proceeds are payable if the Insured dies while your policy is in force. Premiums are payable to Age 95 or until the Insured's death, whichever comes first. Premiums remain level during the Level Premium Period. After the Level Premium Period, premiums will change each year to the amounts shown in the Schedule of Annual Premiums by Year.

**NOTICE: TO MAKE A CLAIM OR EXERCISE YOUR RIGHTS UNDER THIS POLICY, PLEASE
CONTACT THE ING CUSTOMER SERVICE CENTER AT THE ADDRESS BELOW AND INCLUDE
YOUR POLICY NUMBER:**

RELIASTAR LIFE INSURANCE COMPANY

**Home Office:
[Minneapolis, Minnesota]**

**ING Customer Service Center:
[2000 21st Avenue NW
Minot, North Dakota 58703-0890
Toll Free Number: 1-877-886-5050]**

ING ROP ENDOWMENT TERM LIFE INSURANCE SUPPLEMENT TO APPLICATION

ReliaStar Life Insurance Company, Minneapolis, MN
A member of the ING family of companies
 ING Customer Contact Center
 P.O. Box 5075
 Minot, ND 58702-5075



Please complete the sections below, sign and submit this form with your original application for the ING ROP Endowment Term Life Insurance Policy.

Proposed Insured Name _____

Owner Name (if other than Proposed Insured) _____

Writing Agent/Registered Rep. Name _____

PRODUCT INFORMATION *(This section replaces the "Product Information" section of the Application for Life Insurance.)*

Level Premium Period: 20 Year 25 Year 30 Year

Face Amount \$ _____

AUTOMATIC PREMIUM LOAN (APL)

If you elect the APL Option, you direct ReliaStar Life Insurance Company (the "Company") to pay premiums due but not paid by the end of the grace period by taking a loan against any available Loan Value. If the available Loan Value is not sufficient to pay the premium then due, the policy may terminate.

I elect the Automatic Premium Loan (APL) Option

LIST BILL INFORMATION *(For a new List Bill Plan, please contact the List Bill Department at 877-886-5050.)*

List Bill/File Code # (if plan already exists) | | | | | | | | | |

Employer Plan Name (if plan already exists) _____

Phone (_____) _____

Address _____

City _____ State _____ ZIP _____

AUTHORIZATION AND ACKNOWLEDGEMENT

I hereby acknowledge that this Supplement to Application is part of the application for the ING ROP Endowment Term Life Insurance policy and authorize the Company to use the information obtained in this Supplement to Application to evaluate my eligibility for life insurance.

➔ Proposed Insured Signature _____ Date _____

➔ Proposed Owner Signature (if other than the Insured) _____ Date _____

➔ Writing Agent/Registered Rep. Signature _____ Date _____

SERFF Tracking Number: *INGD-126322461* State: *Arkansas*
 Filing Company: *ReliaStar Life Insurance Company* State Tracking Number: *43991*
 Company Tracking Number: *1314-12/09*
 TOI: *L04I Individual Life - Term* Sub-TOI: *L04I.213 Specified Age or Duration - Fixed/Indeterminate Premium - Single Life*
 Product Name: *ING ROP Endowment Term Life Insurance*
 Project Name/Number: *ING ROP Endowment Term Life Insurance /1314-12/09*

Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification		
Comments: See attached.		
Attachments: AR Certification Reg 19 and 49.pdf 115512 Guaranty Ass Notice.pdf 125638 Notice.pdf 1314 Flesch Readability Certification.pdf		

	Item Status:	Status Date:
Satisfied - Item: Application		
Comments: As shown in the filing description under the General Information tab, the following previously approved application will be used with the submitted policy form (approval date provided): 136416 - Term Application - 08/01/05		

Also note that we have submitted Form 154642 Supplement to Application for your review and approval as part of this filing. The form is attached to the Form Schedule tab.

	Item Status:	Status Date:
Satisfied - Item: Accelerated Benefit Disclosure		
Comments: The attached Accelerated Benefit Rider Disclosure will be used with the R1372-12/09 Accelerated Benefit Rider that was previously approved by your department on 10/21/09.		
Attachment: 154740_10222009.pdf		

SERFF Tracking Number: *INGD-126322461* State: *Arkansas*
Filing Company: *ReliaStar Life Insurance Company* State Tracking Number: *43991*
Company Tracking Number: *1314-12/09*
TOI: *L04I Individual Life - Term* Sub-TOI: *L04I.213 Specified Age or Duration -
Fixed/Indeterminate Premium - Single Life*
Product Name: *ING ROP Endowment Term Life Insurance*
Project Name/Number: *ING ROP Endowment Term Life Insurance /1314-12/09*

Item Status: **Status**
Date:

Satisfied - Item: Revised Filing Description (11 23
09)

Comments:

See attached.

Attachment:

AR 1314 State Amendment Letter.pdf

**ARKANSAS
CERTIFICATION**

Re:

1314-12/09 Term Life Insurance Policy to Age 95 with an Endowment Benefit
154642 Supplement to Application

As an officer of ReliaStar Life Insurance Company, I hereby certify that this submission meets the provisions of Rule 19 Unfair Sex Discrimination in the Sale of Insurance, Rule and Regulation 49 Life and Health Insurance Guaranty Association Notices and all applicable requirements of the Arkansas Insurance Department.

RELIASTAR LIFE INSURANCE COMPANY

By: 

Terry Stumpf, Assistant Secretary

Date: September 29, 2009

**LIMITATIONS AND EXCLUSIONS UNDER THE
ARKANSAS LIFE AND HEALTH INSURANCE
GUARANTY ASSOCIATION ACT**

Residents of this state who purchase life insurance, annuities or health and accident insurance should know that the insurance companies licensed in this state to write these types of insurance are members of the Arkansas Life and Health Insurance Guaranty Association ("Guaranty Association"). The purpose of this Guaranty Association is to assure that policy and contract owners will be protected, within certain limits, in the unlikely event that a member insurer becomes financially unable to meet its obligations. If this should happen, the Guaranty Association will assess its other member insurance companies for the money to pay the claims of policy owners who live in this state and, in some cases, to keep coverage in force. The valuable extra protection provided by the member insurers through the Guaranty Association is not unlimited, however. And, as noted in the box below, this protection is not a substitute for consumers' care in selecting insurance companies that are well managed and financially stable.

DISCLAIMER

The Arkansas Life and Health Insurance Guaranty Association ("Guaranty Association") may not provide coverage for this policy. If coverage is provided, it may be subject to substantial limitations or exclusions, and require continued residency in the state. You should not rely on coverage by the Guaranty Association in purchasing an insurance policy or contract.

Coverage is NOT provided for your policy or contract or any portion of it that is not guaranteed by the insurer or for which you have assumed the risk, such as non-guaranteed amounts held in a separate account under a variable life or variable annuity contract.

Insurance companies or their agents are required by law to provide you with this notice. However, insurance companies and their agents are prohibited by law from using the existence of the Guaranty Association to induce you to purchase any kind of insurance policy.

**The Arkansas Life and Health Insurance Guaranty Association
c/o The Liquidation Division
1023 West Capitol, Suite 2
Little Rock, Arkansas 72201**

**Arkansas Insurance Department
1200 West Third Street
Little Rock, Arkansas 72201-1904**

The state law that provides for this safety-net is called the Arkansas Life and Health Insurance Guaranty Association Act ("Act"). Below is a brief summary of the Acts coverages, exclusions and limits. This summary does not cover all provisions of the Act; nor does it in any way change anyone's rights or obligations under the Act or the rights or obligations of the Guaranty Association.

COVERAGE

Generally, individuals will be protected by the Guaranty Association if they live in this state and hold a life, annuity, or health insurance contract or policy, or if they are insured under a group insurance contract, issued by a member insurer. The beneficiaries, payees or assignees of policy or contract owners are protected as well, even if they live in another state.

EXCLUSIONS FROM COVERAGE

However persons holding such policies are NOT protected by the Guaranty Association if:

- They are eligible for protection under the laws of another state (this may occur when the insolvent insurer was incorporated in another state whose guaranty association protects insureds who live outside that state);
- The insurer was not authorized to do business in this state;
- Their policy or contract was issued by a nonprofit hospital or medical service organization, an HMO, a fraternal benefit society, a mandatory state pooling plan, a mutual assessment company or similar plan in which the policy or contract owner is subject to future assessments, or by an insurance exchange.

The Guaranty Association also does NOT provide coverage for:

- Any policy or contract or portion thereof which is not guaranteed by the insurer or for which the owner has assumed the risk, such as non-guaranteed amounts held in a separate account under a variable life or variable annuity contract;
- Any policy of reinsurance (unless an assumption certificate was issued);
- Interest rate yields that exceed an average rate;
- Dividends and voting rights and experience rating credits;
- Credits given in connection with the administration of a policy by a group contract holder;
- Employers' plans to the extent they are self-funded (that is, not insured by an insurance company, even if an insurance company administers them);
- Unallocated annuity contracts (which give rights to group contract holders, not individuals);
- Unallocated annuity contracts issued to/in connection with benefit plans protected under Federal Pension Benefit Corporation ("FPBC")(whether the FPBC is yet liable or not);
- Portions of an unallocated annuity contract not owned by a benefit plan or a government lottery (unless the owner is a resident) or issued to a collective investment trust or similar pooled fund offered by a bank or other financial institution);
- Portions of a policy or contract to the extent assessments required by law for the Guaranty Association are preempted by State or Federal law;
- Obligations that do not arise under the policy or contract, including claims based on marketing materials or side letters, riders, or other documents which do not meet filing requirements, or claims for policy misrepresentations, or extra-contractual or penalty claims;
- Contractual agreements establishing the member insurer's obligations to provide book value accounting guarantees for defined contribution benefit plan participants (by reference to a portfolio of assets owned by a nonaffiliated benefit plan or its trustees).

LIMITS ON AMOUNT OF COVERAGE

The Act also limits the amount the Guaranty Association is obligated to cover: The Guaranty Association cannot pay more than what the insurance company would owe under a policy or contract. Also, for any one insured life, the Guaranty Association will pay a maximum of \$300,000 - no matter how many policies and contracts there were with the same company, even if they provided different types of coverages. Within this overall \$300,000 limit, the Association will not pay more than \$300,000 in health insurance benefits, \$300,000 in present value of annuity benefits, or \$300,000 in life insurance death benefits or net cash surrender values - again, no matter how many policies and contracts there were with the same company, and no matter how many different types of coverages. There is a \$1,000,000 limit with respect to any contract holder for unallocated annuity benefits, irrespective of the number of contracts held by the contract holder. These are limitations for which the Guaranty Association is obligated before taking into account either its subrogation and assignment rights or the extent to which those benefits could be provided out of the assets of the impaired or insolvent insurer.

RELIASTAR LIFE INSURANCE COMPANY
Administrative Office
2000 21st Avenue NW
Minot, North Dakota 58703-0890

**NOTICE TO POLICYHOLDERS
KEEP THIS NOTICE WITH YOUR INSURANCE PAPERS**

As our policyholder, your satisfaction is very important to us. If you have a question about your policy, if you need assistance with a problem, or if you have a claim, you should first contact your insurance agent or us at:

1-877-882-5050

Should you have a valid claim, we fully expect to provide a fair settlement in a timely fashion.

Should you feel you are not being treated fairly with respect to a claim, you may contact the Arkansas Department of Insurance with your complaint. To contact the Department, write or call:

**Arkansas Insurance Department
Consumer Services Division
Third and Cross Streets
Little Rock, AR 72201
(501) 371-2640
(501) 371-2749 Fax
or call: 1-800-852-5494**

**RELIASTAR LIFE INSURANCE COMPANY
Minneapolis, Minnesota**

FLESCH READABILITY CERTIFICATE

I certify that the Certificate form included in this submission has been printed in not less than ten point type.

The style, arrangement and overall appearance of the form gives no undue prominence to any portion of the text of the form.

The section titles are captioned in bold face type. The layout and spacing of the form separate the paragraphs from each other and from the border of the paper.

Unnecessarily long, complicated or obscure words, sentences, paragraphs or constructions are not used in this form.

Flesch Scale Reading Ease Score

I have supervised the computation of the Flesch scale reading ease score of this form, using the complete text of the form except for headings, indexes and tabular material, and the scores are listed below.

The readability score was calculated by computer. The software used for this calculation was Microsoft Word.

Form Number

Flesch Reading Ease Scores

1314-12/09	50.0
154642	50.2

Signed



Terry Stumpf
Assistant Secretary

Date:

October 23, 2009

ACCELERATED BENEFIT RIDER DISCLOSURE

ReliaStar Life Insurance Company

20 Washington Avenue South, Minneapolis, MN 55401

A member of the ING family of companies

ING Customer Service Center: PO Box 5011, Minot, ND 58703-5011



READ THE RIDER CAREFULLY

Receipt of an Accelerated Benefit payment may be taxable, and assistance should be sought from a personal tax advisor. Receipt of an Accelerated Benefit payment may adversely affect the recipient's eligibility for Medicaid or other government benefits or entitlements.

There is no additional premium required for the Accelerated Benefit Rider; instead, an actuarial discount is associated with the acceleration and an Administrative Expense Charge is assessed upon the exercise of the benefit.

- We will pay an Accelerated Benefit, at the Policy Owner's request, if the Insured has a Qualifying Condition. A Qualifying Condition is a non-correctable medical or physical condition that, with a reasonable degree of medical certainty, will result in the Insured's death in 12 months or less from the date of receipt of a Physician Statement. Refer to the Rider for more details.
- The Policy Owner may request an acceleration of a portion of the Stated Death Benefit, subject to a minimum Accelerated Benefit of \$5,000 and a maximum Accelerated Benefit equal to the lesser of 25% of the Stated Death Benefit or \$250,000. We will pay the amount requested reduced by:
 - An actuarial discount based on, (1) the annual rate of interest declared by us, and (2) the then current premium;
 - An amount equal to any current Policy loan and accrued loan interest, multiplied by the Benefit Ratio (the Benefit Ratio is equal to the amount accelerated divided by the Stated Death Benefit); and
 - An Administrative Expense Charge of \$150.

The remainder will be paid to the Policy Owner. Other conditions and limitations, as described in the Rider, may apply.

- The Accelerated Benefit will be paid in a lump sum, unless the Policy Owner requests and we agree to payment in some other manner.
- Following an Accelerated Benefit payment, the Policy's Stated Death Benefit, any Cash Value, any outstanding Policy loan, the required premium for the Policy (excluding any policy fee), and premium for any Waiver of Premium Rider (Disability) will all be reduced by the Benefit Ratio. We will mail to the Policy Owner, for attachment to the Policy, an endorsement or amended schedule page that details the changes to the Policy that result from the Accelerated Benefit payment.
- Following an Accelerated Benefit payment, this Rider will terminate. Continued premium payment is required in order to keep the Policy in force.
- If a Waiver of Premium Rider (Disability) is attached to the Policy and in force, and the Insured's Qualifying Condition began before the Policy Anniversary when the Insured reaches age 60, then after an Accelerated Benefit payment the Insured will be deemed to be Totally Disabled for as long as the Physician Statement continues to apply.

An example of the effect of an Accelerated Benefit request of \$25,000 is shown below.¹

Before Acceleration		Requested Acceleration = \$25,000		After Acceleration	
Stated Death Benefit	\$100,000	Benefit Ratio	25%	Stated Death Benefit	\$75,000
Premium	\$500	Actuarial Discount ²	\$625	Premium	\$375
Policy Loan ³	\$6,000	Loan Repayment ³	\$1,500	Policy Loan ³	\$4,500
Cash Value ³	\$10,000	Administrative Expense Charge	\$150	Cash Value ³	\$7,500
		Net Payment to Owner	\$22,725		

I acknowledge that I have received and read this summary which has been furnished to me with the Policy/Rider application.

➡ Policy Owner Signature _____ Date _____

➡ Agent/Producer Signature _____ Date _____

¹This example is illustrative only and is not intended to show actual values.

²Assumes hypothetical interest rate of 5%.

³Cash Value and Policy loans, if any, are only available with the ROP Endowment Term life insurance.



AMERICAS

November 23, 2009

Insurance Commissioner
Department of Insurance
Compliance Life & Health
1200 West Third Street
Little Rock, Arkansas 72201-1904

Re: ReliaStar Life Insurance Company
NAIC #67105 FEIN #41-0451140

Form Numbers:

1314-12/09 Term Life Insurance Policy to age 95 with an Endowment Benefit Payable on the Endowment Date
and an Exchange Option Provision
154642 Supplement to Application

Attention Policy Form Approval Division:

We wish to revise the Filing Description under the General Information tab of this submission to remove R1373-12/09 Waiver of Premium (Disability) Rider from the previously approved forms to be marketed with the submitted policy form and add the following form to the list:

R1349-11/06 – Waiver of Premium Rider – 12/06/06

Sincerely,

A handwritten signature in black ink that reads "Laura Sampair". The signature is written in a cursive, flowing style.

Laura Sampair, FLMI, FFSI, PCS, AAPA, AIAA, AIRC, ARA
Contract Analyst
(612) 342-7081
(612) 342-7531 (fax)
laura.sampair@us.ing.com