

SERFF Tracking Number: PRMD-126409154 State: Arkansas
Filing Company: Primerica Life Insurance Company State Tracking Number: 44351
Company Tracking Number: C4B10AR, ET AL
TOI: L04I Individual Life - Term Sub-TOI: L04I.500 Other
Product Name: Custom Protection IV B
Project Name/Number: C4B Policies and Riders/C4B10AR, et al

Filing at a Glance

Company: Primerica Life Insurance Company

Product Name: Custom Protection IV B

TOI: L04I Individual Life - Term

Sub-TOI: L04I.500 Other

Filing Type: Form

SERFF Tr Num: PRMD-126409154 State: Arkansas

SERFF Status: Closed-Approved-
Closed State Tr Num: 44351

Co Tr Num: C4B10AR, ET AL

State Status: Approved-Closed

Reviewer(s): Linda Bird

Authors: Freda Beale, Leny Combs Disposition Date: 12/21/2009

Date Submitted: 12/15/2009

Disposition Status: Approved-
Closed

Implementation Date Requested: 06/01/2010

Implementation Date:

State Filing Description:

General Information

Project Name: C4B Policies and Riders

Project Number: C4B10AR, et al

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 12/21/2009

Deemer Date:

Submitted By: Freda Beale

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 12/21/2009

Created By: Freda Beale

Corresponding Filing Tracking Number:
C4B10AR

Filing Description:

Re: Policy Forms: C4B10AR, C4B15AR, C4B20AR – Term Life Insurance to Age 95

Rider Forms: C4B110, C4B115, C4B120 – Insured Term Insurance Rider

Rider Forms: C4BS10, C4BS15, C4BS20 – Spouse Term Insurance Rider

The above-referenced forms are being submitted for your review and approval. These forms are new and do not replace any existing forms.

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Policy Forms C4B10AR, C4B15AR, C4B20AR: These policies provide the Insured with term life insurance to age 95. The initial scheduled level premium period is for 10, 15, or 20 years, respectively. Premiums are guaranteed for one year. These policies will be offered as an exchange product without underwriting to existing policyholders whose policies are approaching a scheduled premium increase.

Rider Forms C4BI10, C4BI15, C4BI20: These riders provide the Insured with term life insurance to age 95.

Rider Forms C4BS10, C4BS15, C4BS20: These riders provide the Insured's Spouse with term life insurance to age 95.

These riders will be offered as an exchange product without underwriting to existing policyholders whose riders are approaching a scheduled premium increase. The initial scheduled level premium period is for 10, 15, or 20 years, respectively. These riders can be attached to Policy Forms C4B10AR, C4B15AR, C4B20AR.

The Bracketed information on the Specifications Pages will change for issue age, premium class and premium payment options.

The application to be used with these plans is PL-EOTE – Coverage Election Form and Application Agreement, which was approved by your Department on April 14, 2006 under SERFF file number SERT-6NMG6F176/00.

These forms are in final print. The Company reserves the right to change the appearance and pagination, but not the text of these forms. No font will be less than a 10-point font size. The Company also reserves the right to change the color and/or weight of the paper on which these forms are printed, the logo and to correct typographical errors without refiling.

Your approval and/or acknowledgement of this filing will be appreciated. If you have any questions or need additional information, please do not hesitate to contact us.

Company and Contact

Filing Contact Information

freda beale, freda.beale@primerica.com
3100 breckinridge blvd 770-564-6122 [Phone]
duluth, GA 30099-0001 770-564-7948 [FAX]

Filing Company Information

Primerica Life Insurance Company CoCode: 65919 State of Domicile: Massachusetts
3100 Breckinridge Blvd Group Code: Company Type: term life insurance
Duluth, GA 30099-0001 Group Name: State ID Number:

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Project Name/Number: C4B Policies and Riders/C4B10AR, et al
(770) 546-6158 ext. [Phone] FEIN Number: 04-1590590

Filing Fees

Fee Required? Yes
Fee Amount: \$675.00
Retaliatory? Yes
Fee Explanation: Masachusetts our domiciliary state requires \$75 per form.

9 forms x \$75 = \$675.00
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Primerica Life Insurance Company	\$675.00	12/15/2009	32798960

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	12/21/2009	12/21/2009

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Disposition

Disposition Date: 12/21/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Life & Annuity - Acturial Memo		No
Form	Term Insurance To Age 95		Yes
Form	Insured Term Insurance Ricer		Yes
Form	Spouse Term Insurance Rider		Yes
Form	Term Life Insurance To Age 95		Yes
Form	Insured Term Insurance To Age 95		Yes
Form	Spouse Term Insurance Rider		Yes
Form	Term Life Insurance To Age 95		Yes
Form	Insured Term Insurance To Age 95		Yes
Form	Spouse Term Insurance Rider		Yes

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Form Schedule

Lead Form Number: C4B10

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	C4B10AR	Policy/Cont Term Insurance To ract/Fratern Age 95 al Certificate	Initial		54.375	C4B10AR.pdf
	C4BI10	Policy/Cont Insured Term ract/Fratern Insurance Ricer al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		59.218	C4BI10.pdf
	C4BS10	Policy/Cont Spouse Term ract/Fratern Insurance Rider al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		58.443	C4BS10.pdf
	C4B15AR	Policy/Cont Term Life Insurance ract/Fratern To Age 95 al Certificate	Initial		54.375	C4B15AR.pdf
	C4BI15	Policy/Cont Insured Term ract/Fratern Insurance To Age 95 al Certificate: Amendmen	Initial		59.218	C4BI15.pdf

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	t, Insert Page, Endorseme nt or Rider			
C4BS15	Policy/Cont Spouse Term ract/Fratern Insurance Rider al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial	58.443	C4BS15.pdf
C4B20AR	Policy/Cont Term Life Insurance ract/Fratern To Age 95 al Certificate	Initial	54.375	C4B20AR.pdf
C4BI20	Policy/Cont Insured Term ract/Fratern Insurance To Age 95 al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial	59.218	C4BI20.pdf
C4BS20	Policy/Cont Spouse Term ract/Fratern Insurance Rider al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial	58.443	C4BS20.pdf

We will pay the Face Amount, in a lump sum, to the Beneficiary upon receiving due proof that the Insured died before the Expiry Date and while this Policy was in force. This agreement is subject to the provisions on the following pages, which constitute the Policy.

RIGHT TO RETURN POLICY: You may return this Policy to Us for any reason within 20 days after You receive it. If returned, it will be considered void from the beginning. Any premium paid will be refunded.

This Policy is effective at 12:01 A.M. on the Date of Issue.

Signed on the Date of Issue at Our Executive Offices.



Secretary



President

TERM LIFE INSURANCE TO AGE 95

INITIAL SCHEDULED LEVEL PREMIUM PERIOD FOR 10 YEARS

PREMIUMS ARE SUBJECT TO CHANGE

**EXCHANGEABLE AFTER FIVE YEARS TO ANNUAL INCREASING PREMIUM
OR DECREASING TERM INSURANCE TO AGE 100**

NONPARTICIPATING

Primerica Life Insurance Company
(A Stock Company)
Home Office: Boston, Massachusetts

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POLICY SPECIFICATIONS (CONT'D)

TABLE A
[ANNUAL] PREMIUMS FOR BASIC POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[01	35	\$437.00	\$437.00	\$200,000.00]
[02	36	\$437.00	\$635.00	\$200,000.00]
[03	37	\$437.00	\$635.00	\$200,000.00]
[04	38	\$437.00	\$635.00	\$200,000.00]
[05	39	\$437.00	\$635.00	\$200,000.00]
[06	40	\$437.00	\$635.00	\$200,000.00]
[07	41	\$437.00	\$635.00	\$200,000.00]
[08	42	\$437.00	\$635.00	\$200,000.00]
[09	43	\$437.00	\$635.00	\$200,000.00]
[10	44	\$437.00	\$635.00	\$200,000.00]
[11	45	\$1,155.00	\$2,145.00	\$200,000.00]
[12	46	\$1,155.00	\$2,145.00	\$200,000.00]
[13	47	\$1,155.00	\$2,145.00	\$200,000.00]
[14	48	\$1,155.00	\$2,145.00	\$200,000.00]
[15	49	\$1,155.00	\$2,145.00	\$200,000.00]
[16	50	\$1,741.00	\$3,021.00	\$200,000.00]
[17	51	\$1,741.00	\$3,021.00	\$200,000.00]
[18	52	\$1,741.00	\$3,021.00	\$200,000.00]
[19	53	\$1,741.00	\$3,021.00	\$200,000.00]
[20	54	\$1,741.00	\$3,021.00	\$200,000.00]
[21	55	\$2,779.00	\$4,213.00	\$200,000.00]
[22	56	\$2,779.00	\$4,213.00	\$200,000.00]
[23	57	\$2,779.00	\$4,213.00	\$200,000.00]
[24	58	\$2,779.00	\$4,213.00	\$200,000.00]
[25	59	\$2,779.00	\$4,213.00	\$200,000.00]
[26	60	\$4,529.00	\$5,759.00	\$200,000.00]
[27	61	\$4,529.00	\$5,759.00	\$200,000.00]
[28	62	\$4,529.00	\$5,759.00	\$200,000.00]
[29	63	\$4,529.00	\$5,759.00	\$200,000.00]
[30	64	\$4,529.00	\$5,759.00	\$200,000.00]
[31	65	\$7,295.00	\$8,799.00	\$200,000.00]
[32	66	\$7,295.00	\$8,799.00	\$200,000.00]
[33	67	\$7,295.00	\$8,799.00	\$200,000.00]
[34	68	\$7,295.00	\$8,799.00	\$200,000.00]
[35	69	\$7,295.00	\$8,799.00	\$200,000.00]
[36	70	\$9,491.00	\$11,007.00	\$200,000.00]
[37	71	\$10,825.00	\$11,985.00	\$200,000.00]
[38	72	\$12,297.00	\$13,197.00	\$200,000.00]
[39	73	\$13,941.00	\$14,675.00	\$200,000.00]
[40	74	\$15,785.00	\$16,401.00	\$200,000.00]

*Scheduled premiums may change, but they will not increase above the maximum premiums. See Part 4, Premium Provisions.

POLICY SPECIFICATIONS (CONT'D)

TABLE A (CONT'D)
 [ANNUAL] PREMIUMS FOR BASIC POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[41	75	\$17,873.00	\$18,317.00	\$200,000.00]
[42	76	\$20,141.00	\$20,383.00	\$200,000.00]
[43	77	\$22,307.00	\$22,549.00	\$200,000.00]
[44	78	\$24,565.00	\$24,807.00	\$200,000.00]
[45	79	\$26,981.00	\$27,223.00	\$200,000.00]
[46	80	\$29,661.00	\$29,903.00	\$200,000.00]
[47	81	\$32,687.00	\$32,929.00	\$200,000.00]
[48	82	\$35,841.00	\$36,387.00	\$200,000.00]
[49	83	\$38,967.00	\$40,311.00	\$200,000.00]
[50	84	\$42,411.00	\$44,917.00	\$200,000.00]
[51	85	\$46,173.00	\$49,521.00	\$200,000.00]
[52	86	\$50,255.00	\$54,751.00	\$200,000.00]
[53	87	\$54,655.00	\$59,789.00	\$200,000.00]
[54	88	\$59,375.00	\$65,483.00	\$200,000.00]
[55	89	\$64,341.00	\$70,897.00	\$200,000.00]
[56	90	\$69,467.00	\$77,131.00	\$200,000.00]
[57	91	\$74,751.00	\$83,777.00	\$200,000.00]
[58	92	\$80,199.00	\$91,029.00	\$200,000.00]
[59	93	\$85,803.00	\$99,245.00	\$200,000.00]
[60	94	\$91,567.00	\$109,321.00	\$200,000.00]

*Scheduled premiums may change, but they will not increase above the maximum premiums. See Part 4, Premium Provisions.

PART 1 DEFINITIONS

These are some key words used in this Policy.

1. *ATTAINED AGE* - The Issue Age plus the number of policy years since the Policy Date.
2. *BENEFICIARY* - The person(s) to whom the Policy proceeds are payable at the death of the Insured. This is the person(s) named in the application as the Beneficiary, unless later changed (see Part 3).
3. *DATE OF ISSUE* - The date shown on Page 3 on which We issue the Policy to You. This date controls the Incontestability and Suicide Exclusion provisions in Part 2.
4. *EXPIRY DATE* - The date shown on the Policy Specifications. This Policy is not in force on or after this date.
5. *FACE AMOUNT* - The amount of insurance for each policy year which is shown in Table A on Page 3A.
6. *INSURED* - The person whose life the Policy insures and who is named in the Policy Specifications.
7. *ISSUE AGE* - The Insured's age on the birthday nearest the Policy Date.
8. *NOTICE TO US* - Information We have received which is written, signed by You, and acceptable to Us.
9. *POLICY DATE* - The date (shown on Page 3) from which premium due dates, policy anniversaries, policy years and policy months are measured.
10. *PREMIUM CLASS* - The risk classification used in determining what premiums You pay.
11. *WE, OUR or US* - Primerica Life Insurance Company.
12. *YOU or YOUR* - The Owner of the Policy. Unless You tell Us otherwise, the Owner is the Insured.

PART 2 GENERAL PROVISIONS

OWNER OF POLICY - This Policy belongs to You. During the Insured's life, You have all of the rights described in this Policy. If You die, Your rights will pass to the named contingent owner, if any. If there is no named contingent owner, Your rights will pass to the Insured.

THE CONTRACT - This Policy is issued in consideration of the application and payment of the first premium. A copy of the application, including any supplemental applications, is attached and is a part of the Policy. Together, they are the entire contract. All statements in the application, except fraudulent ones, are deemed to be representations and not warranties. No statement will void this Policy or be used in defense of a claim unless: (1) it is contained in a written application; and (2) a copy of that application is attached to this Policy.

DUPLICATE POLICY - You may request a duplicate copy of Your current Policy, which will not contain a copy of the application(s), unless requested by You. A duplicate Policy request should be sent to Us at Our Executive Offices. We will charge a fee for each duplicate Policy request.

WAIVER OR MODIFICATION - Any change to this Policy must be in writing and signed by Our President or Secretary. No agent or any other person can change this Policy or waive any of its provisions on Our behalf.

MISSTATEMENT OF AGE - If the age of the Insured has been misstated in the application, We will be liable only for the amount of insurance the premiums paid would have purchased for the correct age.

INCONTESTABILITY - We will not contest this Policy after it has been in force for two years during the Insured's life. The two years begin on the Date of Issue. This provision does not apply to any rider for disability benefits or additional insurance specifically for accidental death.

SUICIDE EXCLUSION - If the Insured dies by suicide, while sane or insane, within two years of the Date of Issue, We are only liable for the premiums paid.

REPLACED COVERAGE - If insurance coverage (excluding group coverage) is to be replaced, as shown in the application, and has terminated: (a) prior to the Insured's death, including death by suicide; and (b) between 60 days before and 60 days after the Date of Issue of this Policy, We will not contest the amount of the replaced coverage that would not have been contestable had it not been replaced. If it is not possible to terminate any coverage to be replaced because of its provisions within 60 days after the Date of Issue of this Policy, such 60-day period will be extended to the earliest possible date for the coverage to be terminated under its provisions. For example, You are insured under another company's policy for \$100,000 and that policy has been in force two years. If this Policy replaced the other company's policy, We would not contest this Policy for up to \$100,000. We would however, be able to contest any amount over \$100,000. You will not lose the time accrued for the amount of insurance replaced due to this Policy's Incontestability and Suicide Exclusion provisions.

NONPARTICIPATION - This Policy does not participate in Our profits or surplus.

ASSIGNMENT - You may assign Your rights under this Policy. You must give Notice to Us of the assignment. We are not responsible for the validity of any assignment. The interest of any Beneficiary not designated irrevocably will be subject to the rights of any assignee.

PAYMENT OF PROCEEDS - Due proof of the death of the Insured must be sent to Us at Our Executive Offices. We must receive a certified death certificate, completed claim forms and a valid authorization for Us to obtain all medical and other records concerning the Insured. Death proceeds equal: (1) the Face Amount of this Policy as shown in Table A on Page 3A; plus (2) any rider benefits; and minus (3) any overdue premium if death occurs during a grace period. Any interest payable on death proceeds will be paid according to applicable state law.

CANCELLATION - You may cancel Your Policy at any time by sending written Notice to Us. Your Policy will be canceled as of the date We receive the Notice, or, if stated in Your Notice, as of a later date. If this Policy is canceled before the Expiry Date and premiums have been paid in advance, We will refund any unearned portion of the premiums paid beyond the end of the policy month in which cancellation occurred.

PART 3 BENEFICIARY PROVISIONS

BENEFICIARY - The Beneficiary's interest will end if the Beneficiary dies before the Insured. If no primary Beneficiary is living at the Insured's death, the death proceeds will be paid to any contingent Beneficiary. The proceeds will be paid to the Owner if the Insured dies and there is no primary or contingent Beneficiary. Proceeds will be paid to the Insured's estate if there is no living Beneficiary or Owner.

We may rely on a sworn statement by any responsible person to discover the identity or nonexistence of any Beneficiary not identified by name. If a Beneficiary is a partnership, We will pay the proceeds to the partnership as it is constituted at the time of the Insured's death.

CHANGE OF BENEFICIARY - You can change a Beneficiary by Notice to Us. You can only change a Beneficiary while the Insured is alive. A Beneficiary designated irrevocably on Our records may not be changed except with the written consent of that Beneficiary. A Beneficiary change will take effect on the date You signed the Notice to Us. If the Insured died before We receive this Notice, the change is effective, subject to any prior payment of proceeds.

PART 4 PREMIUM PROVISIONS

PREMIUM PAYMENTS - Premiums are payable to Us in advance. The first premium is due on or before delivery of this Policy and may be paid to Us through one of Our agents. Subsequent premiums must be paid to Us at Our Executive Offices and are due at 12, 6, 3 or 1 Policy month intervals, depending on the premium payment option You chose in the application. The premiums shown on Page 3A are for the premium payment option You chose. Modal factors are used to determine the premium payment for all payment options. The modal factors are 0.095 for monthly, 0.265 for quarterly, 0.520 for semiannual, and 1.000 for annual. To calculate the approximate premium for a payment option other than the one You chose: (1) divide the premium shown on Page 3A by the modal factor for that payment option; and (2) multiply the result by the modal factor for the premium payment option You would like to determine. You may change the premium payment option for future premium payments upon acceptable Notice to Us. We will provide You with premium rates for other payment options upon written request. Premiums are not due for any period after the Insured's death or the Expiry Date.

If a part of the total premium is no longer payable under the provisions of a Rider, the total premium will be reduced accordingly.

PREMIUM CHANGES BY COMPANY - Premiums for this Policy will be the scheduled premiums shown on Pages 3 and 3A, unless changed by Us. We reserve the right to change the scheduled premiums. We will not change them more often than once a year, and in no event will the scheduled premiums be greater than the maximum premiums shown on Page 3A. Any such change will apply uniformly to all policies of this form issued to Insureds having the same Issue Age, duration, Premium Class, year, month, and state of issue; and will be based on future anticipated or emerging experience, including, but not limited to investment earnings, mortality, persistency, taxes and expenses. No change in premiums or Premium Class will occur because of deterioration of the Insured's health or change in occupation.

We will mail written notice to You at least 60 days prior to the date on which a change in Your scheduled premiums will become effective. We will send You new policy specifications pages to reflect any changes in scheduled premiums.

OTHER PREMIUM CHANGES - Changes requested by You and approved by Us to the Face Amount or Premium Class of this Policy or the Face Amount or Premium Class of any Riders may also change Your scheduled premiums.

RETURN OF UNEARNED PREMIUM AT DEATH - In the event of the Insured's death, the proceeds payable to the Beneficiary under this Policy shall include premiums paid for any period beyond the end of the Policy month in which death occurred.

GRACE PERIOD - This Policy has a 31 day grace period. This means that, except for the first premium, if a premium is not paid on or before the date it is due, it may be paid during the next 31 days. No interest will be charged for this late payment. During this 31 day period, the Policy will stay in force. If You do not pay the premium by the end of the grace period, this Policy will automatically terminate.

REINSTATEMENT - If this Policy terminates due to unpaid premium, it may be reinstated within three years after the date the first unpaid premium was due, if prior to the Expiry Date.

To reinstate this Policy, We must have evidence of insurability satisfactory to Us for all persons to be covered and payment of all unpaid premiums, plus interest at 6% per year compounded annually. The Policy Date of the reinstated policy will remain the original Policy Date. The reinstated date is the date We approve the reinstatement application.

Another option for reinstating this Policy is by providing evidence of insurability satisfactory to Us for all persons to be covered and payment of one month's premium. The Policy Date of the reinstated policy will be adjusted based on the length of time Your policy was lapsed. Reinstatement in this manner may result in changes in insurance age(s) and premiums may increase. You will be notified by Us if there is a premium increase. The reinstated date is the date We approve the reinstatement application.

The reinstated Policy shall be incontestable to the same extent as indicated in the above Incontestability Provision, from the reinstated date. This means that the two year contestable period will begin anew with the reinstatement.

**PART 5
EXCHANGE PROVISIONS**

EXCHANGE AT ATTAINED AGE - You may exchange this Policy at any time after it has been in force for five years to the Annual Increasing Premium Term Insurance to Age 100 Plan described below; or the Decreasing Term Insurance to Age 100 Plan described below; or any other plan of insurance then available for exchange for this Policy, as periodically determined by Us. We will not require evidence of insurability. The new plan will take effect on the exchange date and this Policy will terminate. However, the new plan's Incontestability and Suicide Exclusion provisions will be controlled by the Date of Issue of this Policy. We will issue either revised policy specifications pages or a new policy.

The following conditions are necessary for exchange: (1) We receive Notice to Us requesting an exchange; (2) the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Policy on the exchange date; (3) the required premium is paid within 31 days after the exchange date; (4) the Insured is alive; (5) this Policy is in force on the exchange date; (6) premiums for Your current Policy are not being waived under any rider attached to this Policy; and (7) the exchange plan will be issued at Our premium rates for that plan for the Insured's Attained Age on the exchange date based on the same Premium Class shown on Page 3, provided the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Policy on the exchange date.

ANNUAL INCREASING PREMIUM TERM INSURANCE TO AGE 100 PLAN - For this plan, the face amount remains level while premiums increase each year with Attained Age. Annual premiums per \$1,000 face amount for this plan are shown below in Table B. We reserve the right to change the scheduled premiums shown in Table B. We will not change the premiums to more than the maximum premiums shown in Table B.

**TABLE B
PREFERRED
ANNUAL EXCHANGE PREMIUMS PER \$1,000 FACE AMOUNT
THE ANNUAL POLICY FEE OF \$75 MUST BE ADDED.**

AGE	SCHEDULED					MAXIMUM ALL FACE AMOUNTS	AGE	SCHEDULED					MAXIMUM ALL FACE AMOUNTS
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over				\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over		
20	\$ 1.32	\$ 0.96	\$ 0.86	\$ 0.75	\$ 1.41	60	\$ 11.36	\$ 5.90	\$ 5.47	\$ 5.26	\$ 12.37		
21	1.32	0.96	0.86	0.75	1.41	61	12.57	6.53	6.06	5.82	13.64		
22	1.32	0.96	0.86	0.75	1.41	62	13.92	7.23	6.71	6.44	15.09		
23	1.32	0.96	0.86	0.75	1.41	63	15.35	7.98	7.40	7.11	16.74		
24	1.33	0.96	0.86	0.75	1.41	64	16.91	8.79	8.15	7.83	18.61		
25	1.35	0.96	0.86	0.76	1.41	65	18.62	9.68	8.98	8.62	20.67		
26	1.36	0.97	0.86	0.76	1.41	66	20.51	10.66	9.88	9.49	22.89		
27	1.38	0.97	0.87	0.77	1.41	67	22.58	11.74	10.89	10.46	25.30		
28	1.39	0.97	0.87	0.77	1.41	68	24.88	12.93	11.99	11.52	27.88		
29	1.39	0.97	0.87	0.77	1.41	69	27.40	14.25	13.21	12.69	30.70		
30	1.39	0.97	0.87	0.77	1.41	70	30.15	15.68	14.54	13.97	33.88		
31	1.39	0.97	0.87	0.77	1.44	71	33.12	17.62	16.24	15.46	38.07		
32	1.39	0.97	0.87	0.77	1.47	72	36.29	19.76	18.11	17.08	41.64		
33	1.39	0.97	0.87	0.77	1.52	73	40.50	22.12	20.16	18.89	46.41		
34	1.44	0.98	0.89	0.79	1.58	74	45.18	24.74	22.44	20.88	51.77		
35	1.49	0.98	0.89	0.80	1.65	75	50.41	27.69	24.99	23.10	57.52		
36	1.50	0.99	0.89	0.80	1.73	76	56.30	31.01	27.85	25.58	63.65		
37	1.52	0.99	0.90	0.81	1.84	77	62.87	34.73	31.04	28.33	70.09		
38	1.53	0.99	0.90	0.81	1.96	78	70.19	38.86	34.59	31.38	76.77		
39	1.60	1.03	0.93	0.84	2.09	79	78.27	43.46	38.50	34.72	83.86		
40	1.70	1.07	0.97	0.88	2.24	80	87.14	48.50	42.80	38.37	91.64		
41	1.84	1.14	1.03	0.94	2.42	81	96.82	54.02	47.47	42.33	100.30		
42	1.99	1.23	1.12	1.02	2.59	82	107.26	59.97	52.50	46.55	110.08		
43	2.18	1.32	1.20	1.10	2.80	83	118.53	66.42	57.92	51.08	121.11		
44	2.39	1.41	1.29	1.19	3.00	84	131.10	73.60	63.95	56.11	133.16		
45	2.64	1.53	1.40	1.30	3.25	85	144.50	81.56	70.61	61.09	145.96		
46	2.92	1.66	1.52	1.42	3.51	86	157.68	90.33	77.94	66.50	159.27		
47	3.23	1.80	1.65	1.56	3.80	87	171.23	99.94	85.94	72.33	172.96		
48	3.54	1.93	1.78	1.68	4.10	88	184.88	110.41	94.63	78.58	186.75		
49	3.90	2.07	1.92	1.83	4.44	89	198.83	121.64	103.94	85.16	200.84		
50	4.25	2.21	2.05	1.97	4.80	90	213.26	131.35	112.23	91.96	215.41		
51	4.70	2.45	2.27	2.18	5.23	91	228.41	141.35	120.78	98.96	230.72		
52	5.19	2.70	2.50	2.40	5.73	92	244.80	151.67	129.59	106.19	247.27		
53	5.74	2.98	2.77	2.66	6.29	93	263.08	162.27	138.65	113.61	265.74		
54	6.31	3.29	3.05	2.93	6.94	94	286.35	173.19	147.98	121.25	289.24		
55	6.94	3.60	3.34	3.21	7.65	95	312.94	184.41	157.57	129.11	315.94		
56	7.64	3.97	3.68	3.54	8.44	96	342.06	199.51	170.47	139.68	372.48		
57	8.42	4.37	4.05	3.90	9.28	97	410.38	285.17	233.66	186.79	468.79		
58	9.28	4.83	4.48	4.30	10.19	98	434.34	353.23	301.82	247.31	644.47		
59	10.26	5.34	4.95	4.75	11.22	99	458.86	373.18	318.86	261.27	978.31		

NOTE: AGE IS ATTAINED AGE.

**TABLE B (CONT'D)
NON-TOBACCO USE
ANNUAL EXCHANGE PREMIUMS PER \$1,000 FACE AMOUNT
THE ANNUAL POLICY FEE OF \$75 MUST BE ADDED.**

AGE	SCHEDULED					MAXIMUM ALL FACE AMOUNTS	AGE	SCHEDULED					MAXIMUM ALL FACE AMOUNTS
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over				\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over		
20	\$ 1.32	\$ 1.31	\$ 1.17	\$ 1.06	\$ 1.76	60	\$ 11.36	\$ 10.26	\$ 9.53	\$ 9.09	\$ 15.46		
21	1.32	1.31	1.17	1.06	1.76	61	12.57	11.35	10.54	10.06	17.05		
22	1.32	1.31	1.17	1.06	1.76	62	13.92	12.57	11.67	11.14	18.86		
23	1.32	1.31	1.17	1.06	1.76	63	15.35	13.86	12.87	12.28	20.92		
24	1.33	1.32	1.18	1.07	1.76	64	16.91	15.27	14.18	13.53	23.26		
25	1.35	1.33	1.19	1.08	1.76	65	18.62	16.81	15.61	14.89	25.84		
26	1.36	1.34	1.20	1.09	1.76	66	20.51	18.52	17.20	16.41	28.62		
27	1.38	1.35	1.21	1.10	1.76	67	22.58	20.54	18.94	18.07	31.62		
28	1.39	1.36	1.22	1.11	1.76	68	24.88	22.79	20.87	19.90	34.85		
29	1.39	1.36	1.22	1.11	1.76	69	27.40	25.28	22.98	21.92	38.37		
30	1.39	1.36	1.22	1.11	1.76	70	30.15	28.01	25.29	24.12	42.35		
31	1.39	1.36	1.22	1.11	1.80	71	33.12	30.99	27.83	26.50	47.58		
32	1.39	1.36	1.22	1.11	1.83	72	36.29	34.18	30.55	29.03	52.05		
33	1.39	1.36	1.22	1.11	1.90	73	40.50	37.68	33.51	31.78	58.01		
34	1.44	1.41	1.26	1.15	1.97	74	45.18	41.53	36.76	34.79	64.72		
35	1.49	1.44	1.30	1.19	2.07	75	50.41	45.80	40.35	38.12	71.91		
36	1.50	1.45	1.31	1.20	2.16	76	56.30	50.57	44.33	41.80	79.56		
37	1.52	1.46	1.32	1.21	2.30	77	62.87	55.84	48.72	45.86	87.61		
38	1.53	1.47	1.33	1.22	2.45	78	70.19	61.67	53.55	50.31	95.96		
39	1.60	1.53	1.38	1.28	2.62	79	78.27	68.04	58.81	55.14	104.83		
40	1.70	1.62	1.47	1.36	2.80	80	87.14	74.97	64.50	60.36	114.55		
41	1.84	1.74	1.58	1.47	3.02	81	96.82	82.46	70.62	65.97	125.37		
42	1.99	1.87	1.71	1.59	3.24	82	107.26	90.45	76.97	71.90	137.60		
43	2.18	2.05	1.87	1.75	3.50	83	118.53	98.99	83.70	78.18	151.38		
44	2.39	2.23	2.04	1.91	3.75	84	131.10	108.45	91.12	85.11	166.45		
45	2.64	2.45	2.25	2.11	4.06	85	145.00	118.84	99.22	92.68	182.45		
46	2.92	2.70	2.48	2.33	4.39	86	160.26	130.16	107.99	100.87	199.09		
47	3.23	2.97	2.74	2.59	4.74	87	176.98	142.47	117.47	109.73	216.19		
48	3.54	3.24	2.99	2.83	5.12	88	195.16	155.75	127.63	119.21	233.44		
49	3.90	3.54	3.28	3.12	5.55	89	211.51	169.83	138.31	129.20	251.05		
50	4.25	3.84	3.56	3.40	6.00	90	228.38	184.50	149.34	139.50	269.27		
51	4.70	4.24	3.94	3.76	6.54	91	245.77	198.55	160.72	150.13	288.41		
52	5.19	4.69	4.36	4.15	7.17	92	263.70	213.04	172.44	161.08	309.09		
53	5.74	5.18	4.81	4.59	7.86	93	282.15	227.94	184.51	172.35	332.17		
54	6.31	5.70	5.29	5.05	8.67	94	301.11	243.26	196.91	183.93	361.55		
55	6.94	6.27	5.82	5.56	9.56	95	320.62	259.02	209.67	195.85	430.18		
56	7.64	6.90	6.41	6.11	10.55	96	342.06	276.34	223.68	208.94	473.93		
57	8.42	7.60	7.06	6.73	11.61	97	410.38	331.54	268.37	250.68	554.28		
58	9.28	8.39	7.79	7.43	12.74	98	434.34	350.89	284.03	265.31	703.50		
59	10.26	9.27	8.61	8.21	14.03	99	458.86	370.71	300.07	280.29	978.31		

NOTE: AGE IS ATTAINED AGE.

**TOBACCO USE
ANNUAL EXCHANGE PREMIUMS PER \$1,000 FACE AMOUNT
THE ANNUAL POLICY FEE OF \$75 MUST BE ADDED.**

AGE	SCHEDULED					MAXIMUM ALL FACE AMOUNTS	AGE	SCHEDULED					MAXIMUM ALL FACE AMOUNTS
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over				\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over		
20	\$ 2.17	\$ 2.16	\$ 1.85	\$ 1.77	\$ 2.70	40	\$ 2.71	\$ 2.71	\$ 2.42	\$ 2.33	\$ 5.79		
21	2.17	2.16	1.85	1.77	2.70	41	3.02	2.91	2.60	2.52	6.44		
22	2.17	2.16	1.85	1.77	2.70	42	3.29	3.17	2.85	2.76	7.05		
23	2.17	2.16	1.85	1.77	2.70	43	3.59	3.44	3.11	3.01	7.68		
24	2.19	2.18	1.87	1.79	2.70	44	3.97	3.79	3.44	3.34	8.31		
25	2.21	2.20	1.89	1.81	2.70	45	4.37	4.17	3.80	3.69	8.96		
26	2.24	2.21	1.91	1.83	2.70	46	4.84	4.60	4.21	4.10	9.63		
27	2.26	2.23	1.93	1.85	2.70	47	5.35	5.07	4.67	4.54	10.35		
28	2.28	2.25	1.95	1.87	2.70	48	5.88	5.56	5.14	5.01	11.08		
29	2.28	2.25	1.95	1.87	2.82	49	6.47	6.09	5.66	5.53	11.88		
30	2.28	2.25	1.95	1.87	2.96	50	7.07	6.64	6.20	6.06	12.79		
31	2.28	2.25	1.95	1.87	3.07	51	7.82	7.34	6.86	6.70	13.69		
32	2.28	2.25	1.95	1.87	3.21	52	8.65	8.12	7.59	7.41	14.71		
33	2.28	2.25	1.95	1.87	3.35	53	9.53	8.95	8.36	8.17	15.90		
34	2.36	2.32	2.02	1.94	3.56	54	10.50	9.86	9.21	9.00	17.11		
35	2.43	2.38	2.09	2.01	3.72	55	11.55	10.84	10.14	9.90	18.38		
36	2.46	2.39	2.11	2.03	4.02	56	12.73	11.95	11.17	10.91	19.65		
37	2.48	2.41	2.13	2.05	4.39	57	14.01	13.16	12.30	12.01	20.87		
38	2.50	2.43	2.15	2.07	4.80	58	15.46	14.51	13.57	13.25	22.00		
39	2.64	2.56	2.27	2.19	5.27	59	17.08	16.03	14.99	14.64	23.17		

NOTE: AGE IS ATTAINED AGE.

TABLE B (CONT'D)
TOBACCO USE (CONT'D)
ANNUAL EXCHANGE PREMIUMS PER \$1,000 FACE AMOUNT
THE ANNUAL POLICY FEE OF \$75 MUST BE ADDED.

AGE	SCHEDULED				MAXIMUM	AGE	SCHEDULED				MAXIMUM
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS		\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS
60	\$18.89	\$17.73	\$16.58	\$16.19	\$24.47	80	149.04	147.93	125.54	120.41	149.14
61	20.92	19.64	18.36	17.93	26.13	81	164.17	163.06	138.88	133.00	164.27
62	23.15	21.74	20.32	19.85	28.14	82	181.46	178.83	153.20	146.48	181.56
63	25.53	23.97	22.40	21.88	30.86	83	201.08	194.46	168.58	160.95	201.18
64	28.14	26.42	24.69	24.12	33.89	84	224.11	211.68	185.67	177.00	224.21
65	30.98	29.08	27.19	26.55	37.29	85	247.13	230.49	204.53	194.70	247.23
66	34.12	32.03	29.94	29.24	40.66	86	273.28	250.90	225.21	214.08	273.38
67	37.57	35.27	32.97	32.20	44.16	87	298.47	272.90	247.75	235.18	298.57
68	41.39	38.86	36.32	35.48	47.33	88	326.94	296.50	272.21	258.05	327.04
69	45.58	42.79	40.00	39.07	50.89	89	354.01	321.33	298.30	282.40	354.11
70	50.15	47.08	44.01	42.99	54.66	90	385.18	346.96	325.64	307.88	385.28
71	55.55	53.75	49.03	47.79	59.55	91	418.41	373.38	354.27	334.52	418.51
72	64.81	61.11	54.45	52.98	65.61	92	454.67	400.62	384.21	362.33	454.77
73	72.40	69.33	60.42	58.67	73.00	93	495.75	428.64	415.48	391.34	495.85
74	81.23	78.55	67.03	64.97	81.63	94	546.13	457.46	448.09	421.55	546.23
75	91.01	88.99	74.43	72.00	91.21	95	569.45	487.08	477.11	448.85	569.55
76	101.44	100.33	82.67	79.83	101.54	96	597.60	518.87	508.25	478.14	597.70
77	112.27	111.16	91.87	88.57	112.37	97	658.49	596.56	584.35	549.73	658.59
78	123.56	122.45	102.05	98.21	123.66	98	742.24	631.37	618.44	581.81	775.51
79	135.64	134.53	113.27	108.82	135.74	99	784.17	667.04	653.38	614.68	978.31

NOTE: AGE IS ATTAINED AGE.

DECREASING TERM INSURANCE TO AGE 100 PLAN - For this plan, the face amount decreases while premiums remain level. The face amount decreases each year with Attained Age, as shown in Table C below. We reserve the right to change the scheduled face amount, but not lower than the minimum face amount as determined from Table C.

TABLE C
PREFERRED
FACE AMOUNT PER \$100.00 BASIC ANNUAL PREMIUMS
THE BASIC ANNUAL PREMIUM IS THE ANNUAL PREMIUM FOR THIS PLAN
MINUS THE ANNUAL POLICY FEE OF \$75

AGE	SCHEDULED				MINIMUM	AGE	SCHEDULED				MINIMUM
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS		\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS
20	\$75,757	\$104,166	\$116,279	\$133,333	\$70,921	40	\$58,823	\$93,457	\$103,092	\$113,636	\$44,642
21	75,757	104,166	116,279	133,333	70,921	41	54,347	87,719	97,087	106,382	41,322
22	75,757	104,166	116,279	133,333	70,921	42	50,251	81,300	89,285	98,039	38,610
23	75,757	104,166	116,279	133,333	70,921	43	45,871	75,757	83,333	90,909	35,714
24	75,187	104,166	116,279	133,333	70,921	44	41,841	70,921	77,519	84,033	33,333
25	74,074	104,166	116,279	131,578	70,921	45	37,878	65,359	71,428	76,923	30,769
26	73,529	103,092	116,279	131,578	70,921	46	34,246	60,240	65,789	70,422	28,490
27	72,463	103,092	114,942	129,870	70,921	47	30,959	55,555	60,606	64,102	26,315
28	71,942	103,092	114,942	129,870	70,921	48	28,248	51,813	56,179	59,523	24,390
29	71,942	103,092	114,942	129,870	70,921	49	25,641	48,309	52,083	54,644	22,522
30	71,942	103,092	114,942	129,870	70,921	50	23,529	45,248	48,780	50,761	20,833
31	71,942	103,092	114,942	129,870	69,444	51	21,276	40,816	44,052	45,871	19,120
32	71,942	103,092	114,942	129,870	68,027	52	19,267	37,037	40,000	41,666	17,452
33	71,942	103,092	114,942	129,870	65,789	53	17,421	33,557	36,101	37,593	15,898
34	69,444	102,040	112,359	126,582	63,291	54	15,847	30,395	32,786	34,129	14,409
35	67,114	102,040	112,359	125,000	60,606	55	14,409	27,777	29,940	31,152	13,071
36	66,666	101,010	112,359	125,000	57,803	56	13,089	25,188	27,173	28,248	11,848
37	65,789	101,010	111,111	123,456	54,347	57	11,876	22,883	24,691	25,641	10,775
38	65,359	101,010	111,111	123,456	51,020	58	10,775	20,703	22,321	23,255	9,813
39	62,500	97,087	107,526	119,047	47,846	59	9,746	18,726	20,202	21,052	8,912

NOTE: AGE IS ATTAINED AGE.

**TABLE C (CONT'D)
PREFERRED (CONT'D)
FACE AMOUNT PER \$100.00 BASIC ANNUAL PREMIUMS
THE BASIC ANNUAL PREMIUM IS THE ANNUAL PREMIUM FOR THIS PLAN
MINUS THE ANNUAL POLICY FEE OF \$75**

AGE	SCHEDULED				MINIMUM	AGE	SCHEDULED				MINIMUM
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS		\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS
60	\$8,802	\$16,949	\$18,281	\$19,011	\$8,084	80	\$1,147	\$2,061	\$2,336	\$2,606	\$ 1,091
61	7,955	15,313	16,501	17,182	7,331	81	1,032	1,851	2,106	2,362	997
62	7,183	13,831	14,903	15,527	6,626	82	932	1,667	1,904	2,148	908
63	6,514	12,531	13,513	14,064	5,973	83	843	1,505	1,726	1,957	825
64	5,913	11,376	12,269	12,771	5,373	84	762	1,358	1,563	1,782	750
65	5,370	10,330	11,135	11,600	4,837	85	692	1,226	1,416	1,636	685
66	4,875	9,380	10,121	10,537	4,368	86	634	1,107	1,283	1,503	627
67	4,428	8,517	9,182	9,560	3,952	87	584	1,000	1,163	1,382	578
68	4,019	7,733	8,340	8,680	3,586	88	540	905	1,056	1,272	535
69	3,649	7,017	7,570	7,880	3,257	89	502	822	962	1,174	497
70	3,316	6,377	6,877	7,158	2,951	90	468	761	891	1,087	464
71	3,019	5,675	6,157	6,468	2,626	91	437	707	827	1,010	433
72	2,755	5,060	5,521	5,854	2,401	92	408	659	771	941	404
73	2,469	4,520	4,960	5,293	2,154	93	380	616	721	880	376
74	2,213	4,042	4,456	4,789	1,931	94	349	577	675	824	345
75	1,983	3,611	4,001	4,329	1,738	95	319	542	634	774	316
76	1,776	3,224	3,590	3,909	1,571	96	292	501	586	715	268
77	1,590	2,879	3,221	3,529	1,426	97	243	299	350	427	213
78	1,424	2,573	2,891	3,186	1,302	98	230	283	331	404	155
79	1,277	2,300	2,597	2,880	1,192	99	217	267	313	382	102

NOTE: AGE IS ATTAINED AGE.

**NON-TOBACCO USE
FACE AMOUNT PER \$100.00 BASIC ANNUAL PREMIUMS
THE BASIC ANNUAL PREMIUM IS THE ANNUAL PREMIUM FOR THIS PLAN
MINUS THE ANNUAL POLICY FEE OF \$75**

AGE	SCHEDULED				MINIMUM	AGE	SCHEDULED				MINIMUM
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS		\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS
20	\$75,757	\$76,335	\$85,470	\$94,339	\$56,818	60	\$8,802	\$9,746	\$10,493	\$11,001	\$6,468
21	75,757	76,335	85,470	94,339	56,818	61	7,955	8,810	9,487	9,940	5,865
22	75,757	76,335	85,470	94,339	56,818	62	7,183	7,955	8,568	8,976	5,302
23	75,757	76,335	85,470	94,339	56,818	63	6,514	7,215	7,770	8,143	4,780
24	75,187	75,757	84,745	93,457	56,818	64	5,913	6,548	7,052	7,390	4,299
25	74,074	75,187	84,033	92,592	56,818	65	5,370	5,948	6,406	6,715	3,869
26	73,529	74,626	83,333	91,743	56,818	66	4,875	5,399	5,813	6,093	3,494
27	72,463	74,074	82,644	90,909	56,818	67	4,428	4,868	5,279	5,534	3,162
28	71,942	73,529	81,967	90,090	56,818	68	4,019	4,387	4,791	5,025	2,869
29	71,942	73,529	81,967	90,090	56,818	69	3,649	3,955	4,351	4,562	2,606
30	71,942	73,529	81,967	90,090	56,818	70	3,316	3,570	3,954	4,145	2,361
31	71,942	73,529	81,967	90,090	55,555	71	3,019	3,226	3,593	3,773	2,101
32	71,942	73,529	81,967	90,090	54,644	72	2,755	2,925	3,273	3,444	1,921
33	71,942	73,529	81,967	90,090	52,631	73	2,469	2,653	2,984	3,146	1,723
34	69,444	70,921	79,365	86,956	50,761	74	2,213	2,407	2,720	2,874	1,545
35	67,114	69,444	76,923	84,033	48,309	75	1,983	2,183	2,478	2,623	1,390
36	66,666	68,965	76,335	83,333	46,296	76	1,776	1,977	2,255	2,392	1,256
37	65,789	68,493	75,757	82,644	43,478	77	1,590	1,790	2,052	2,180	1,141
38	65,359	68,027	75,187	81,967	40,816	78	1,424	1,621	1,867	1,987	1,042
39	62,500	65,359	72,463	78,125	38,167	79	1,277	1,469	1,700	1,813	953
40	58,823	61,728	68,027	73,529	35,714	80	1,147	1,333	1,550	1,656	872
41	54,347	57,471	63,291	68,027	33,112	81	1,032	1,212	1,416	1,515	797
42	50,251	53,475	58,479	62,893	30,864	82	932	1,105	1,299	1,390	726
43	45,871	48,780	53,475	57,142	28,571	83	843	1,010	1,194	1,279	660
44	41,841	44,843	49,019	52,356	26,666	84	762	922	1,097	1,174	600
45	37,878	40,816	44,444	47,393	24,630	85	689	841	1,007	1,078	548
46	34,246	37,037	40,322	42,918	22,779	86	623	768	926	991	502
47	30,959	33,670	36,496	38,610	21,097	87	565	701	851	911	462
48	28,248	30,864	33,444	35,335	19,531	88	512	642	783	838	428
49	25,641	28,248	30,487	32,051	18,018	89	472	588	723	773	398
50	23,529	26,041	28,089	29,411	16,666	90	437	542	669	716	371
51	21,276	23,584	25,380	26,595	15,290	91	406	503	622	666	346
52	19,267	21,321	22,935	24,096	13,947	92	379	469	579	620	323
53	17,421	19,305	20,790	21,786	12,722	93	354	438	541	580	301
54	15,847	17,543	18,903	19,801	11,534	94	332	411	507	543	276
55	14,409	15,948	17,182	17,985	10,460	95	311	386	476	510	232
56	13,089	14,492	15,600	16,366	9,478	96	292	361	447	478	211
57	11,876	13,157	14,164	14,858	8,613	97	243	301	372	398	180
58	10,775	11,918	12,836	13,458	7,849	98	230	284	352	376	142
59	9,746	10,787	11,614	12,180	7,127	99	217	269	333	356	102

NOTE: AGE IS ATTAINED AGE.

**TABLE C (CONT'D)
TOBACCO USE
FACE AMOUNT PER \$100.00 BASIC ANNUAL PREMIUMS
THE BASIC ANNUAL PREMIUM IS THE ANNUAL PREMIUM FOR THIS PLAN
MINUS THE ANNUAL POLICY FEE OF \$75**

AGE	SCHEDULED				MINIMUM	AGE	SCHEDULED				MINIMUM
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS		\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS
20	\$46,082	\$46,296	\$54,054	\$56,497	\$37,037	60	\$5,293	\$5,640	\$6,031	\$6,176	\$4,086
21	46,082	46,296	54,054	56,497	37,037	61	4,780	5,091	5,446	5,577	3,827
22	46,082	46,296	54,054	56,497	37,037	62	4,319	4,599	4,921	5,037	3,553
23	46,082	46,296	54,054	56,497	37,037	63	3,916	4,171	4,464	4,570	3,240
24	45,662	45,871	53,475	55,865	37,037	64	3,553	3,785	4,050	4,145	2,950
25	45,248	45,454	52,910	55,248	37,037	65	3,227	3,438	3,677	3,766	2,681
26	44,642	45,248	52,356	54,644	37,037	66	2,930	3,122	3,340	3,419	2,459
27	44,247	44,843	51,813	54,054	37,037	67	2,661	2,835	3,033	3,105	2,264
28	43,859	44,444	51,282	53,475	37,037	68	2,416	2,573	2,753	2,818	2,112
29	43,859	44,444	51,282	53,475	35,460	69	2,193	2,336	2,500	2,559	1,965
30	43,859	44,444	51,282	53,475	33,783	70	1,994	2,124	2,272	2,326	1,829
31	43,859	44,444	51,282	53,475	32,573	71	1,707	1,860	2,039	2,092	1,679
32	43,859	44,444	51,282	53,475	31,152	72	1,542	1,636	1,836	1,887	1,524
33	43,859	44,444	51,282	53,475	29,850	73	1,381	1,442	1,655	1,704	1,369
34	42,372	43,103	49,504	51,546	28,089	74	1,231	1,273	1,491	1,539	1,225
35	41,152	42,016	47,846	49,751	26,881	75	1,098	1,123	1,343	1,388	1,096
36	40,650	41,841	47,393	49,261	24,875	76	985	996	1,209	1,252	984
37	40,322	41,493	46,948	48,780	22,779	77	890	899	1,088	1,129	889
38	40,000	41,152	46,511	48,309	20,833	78	809	816	979	1,018	808
39	37,878	39,062	44,052	45,662	18,975	79	737	743	882	918	736
40	35,714	36,900	41,322	42,918	17,271	80	670	675	796	830	670
41	33,112	34,364	38,461	39,682	15,527	81	609	613	720	751	608
42	30,395	31,545	35,087	36,231	14,184	82	551	559	652	682	550
43	27,855	29,069	32,154	33,222	13,020	83	497	514	593	621	497
44	25,188	26,385	29,069	29,940	12,033	84	446	472	538	564	446
45	22,883	23,980	26,315	27,100	11,160	85	404	433	488	513	404
46	20,661	21,739	23,752	24,390	10,384	86	365	398	444	467	365
47	18,691	19,723	21,413	22,026	9,661	87	335	366	403	425	334
48	17,006	17,985	19,455	19,960	9,025	88	305	337	367	387	305
49	15,455	16,420	17,667	18,083	8,417	89	282	311	335	354	282
50	14,144	15,060	16,129	16,501	7,818	90	259	288	307	324	259
51	12,787	13,623	14,577	14,925	7,304	91	239	267	282	298	238
52	11,560	12,315	13,175	13,495	6,798	92	219	249	260	275	219
53	10,493	11,173	11,961	12,239	6,289	93	201	233	240	255	201
54	9,523	10,141	10,857	11,111	5,844	94	183	218	223	237	183
55	8,658	9,225	9,861	10,101	5,440	95	175	205	209	222	175
56	7,855	8,368	8,952	9,165	5,089	96	167	192	196	209	167
57	7,137	7,598	8,130	8,326	4,791	97	151	167	171	181	151
58	6,468	6,891	7,369	7,547	4,545	98	134	158	161	171	128
59	5,854	6,238	6,671	6,830	4,315	99	127	149	153	162	102

NOTE: AGE IS ATTAINED AGE.

RIDERS - The continuation in the new plan of any benefits provided by Rider(s) attached to this Policy which are not exchanged will be subject to the provision for continuation, if any, in each Rider. The premium for any Rider continued after exchange will be added to the premium for the new plan.

RIDER EXCHANGE AT DEATH OF INSURED - If any Insured Spouse Riders attached to this Policy are in force upon the Insured's death, they may be exchanged for a new policy in accordance with the Exchange provision in each rider except that: (a) the exchange must be made within 30 days after the Insured's death; and (b) the effective date of the new policy will be the day We receive written request for exchange. If the Insured Spouse dies before exchange takes effect and within 30 days after the Insured's death, We will pay to the Beneficiary of the Rider the insurance in force under the Rider at the Insured's death, less any overdue premium for the Rider.

**PART 6
SETTLEMENT OPTIONS**

We will pay any death proceeds in a lump sum, unless one of the settlement options below is selected. If no option has been selected as of the death of the Insured, the Beneficiary may select one of the options below. If the Beneficiary is not an individual receiving payment in his or her own right, settlement options are available only with Our consent. Any election of an option must be by Notice to Us.

A settlement option will be available only if the proceeds are at least \$10,000 and are also sufficient to provide a periodic installment or interest payment of at least \$25.

OPTION A. INSTALLMENTS FOR A FIXED PERIOD - The proceeds will be paid in equal monthly installments for a fixed period, not to exceed 25 years. The frequency of the installments and the fixed period will be as selected. The amount of each installment will be determined from Table 1 on Page 11.

OPTION B. MONTHLY INSTALLMENTS FOR A GUARANTEED MINIMUM PERIOD AND, THEREAFTER, FOR LIFE - The proceeds will be paid in equal monthly installments for a guaranteed minimum period of 10, 15 or 20 years and, thereafter, as long as the Beneficiary lives. The amount of each monthly installment will be determined from Table 2 below, based on the period selected and the age at the nearest birthday of the Beneficiary on the date the first installment is payable. If a monthly payment for a specific age shown in Table 2 is the same for more than one period, payment will be made for the longest period.

OPTION C. PROCEEDS HELD AND AVAILABLE FOR WITHDRAWAL - The proceeds will be held by Us subject to withdrawal in whole or in part at any time. Interest on any unpaid balance will be accumulated or paid annually, semiannually, quarterly or monthly, as selected.

OPTION D. INSTALLMENTS OF A SELECTED AMOUNT - The proceeds will be paid in equal monthly installments for the amount selected until the proceeds and interest are fully paid.

The first installment under Option A, B and D is payable on the date the option becomes effective. The interest rate for Option A, B, and D is 2-1/2% annually. The interest rate for Option C is 2% annually. We may from time to time credit or pay excess interest under any option. The basis of values for Option B is the 1996 US Annuity 2000 Mortality Table (20% male and 80% female). Any proceeds being held by Us under any option will be commingled with Our general funds.

When the Beneficiary under any of the options dies, unless otherwise provided, We will pay in one lump sum to such Beneficiary's estate:

- (1) any unpaid sum left under Options C or D, plus any unpaid interest under that option; or
- (2) the present value of any remaining payments under Option A; or
- (3) the present value of any remaining payments for the minimum fixed period under Option B.

EQUAL MONTHLY INSTALLMENTS UNDER OPTION A AND B FOR EACH \$1,000 PAYABLE

TABLE 1+		TABLE 2											
Fixed Period in Years	Monthly Amount	Age++	Guaranteed Minimum Period in Years			Age++	Guaranteed Minimum Period in Years			Age++	Guaranteed Minimum Period in Years		
			10	15	20		10	15	20		10	15	20
1	\$84.28	*6	\$2.42	\$2.42	\$2.42	31	\$2.83	\$2.83	\$2.83	56	\$3.98	\$3.93	\$3.86
2	42.66	7	2.43	2.43	2.43	32	2.86	2.86	2.85	57	4.06	4.01	3.92
3	28.79	8	2.45	2.44	2.44	33	2.88	2.88	2.88	58	4.14	4.08	3.99
4	21.86	9	2.46	2.46	2.45	34	2.91	2.91	2.90	59	4.23	4.16	4.06
5	17.70	10	2.47	2.47	2.47	35	2.94	2.94	2.93	60	4.33	4.25	4.13
6	14.93	11	2.48	2.48	2.48	36	2.97	2.97	2.96	61	4.42	4.34	4.20
7	12.95	12	2.49	2.49	2.49	37	3.00	3.00	2.99	62	4.53	4.43	4.27
8	11.47	13	2.51	2.50	2.50	38	3.04	3.03	3.02	63	4.64	4.52	4.34
9	10.32	14	2.52	2.52	2.52	39	3.07	3.07	3.06	64	4.76	4.62	4.41
10	9.39	15	2.53	2.53	2.53	40	3.11	3.10	3.09	65	4.88	4.72	4.49
11	8.64	16	2.55	2.55	2.54	41	3.15	3.14	3.13	66	5.01	4.83	4.56
12	8.02	17	2.56	2.56	2.56	42	3.19	3.18	3.16	67	5.14	4.93	4.63
13	7.49	18	2.58	2.57	2.57	43	3.23	3.22	3.20	68	5.29	5.04	4.70
14	7.03	19	2.59	2.59	2.59	44	3.27	3.26	3.24	69	5.44	5.15	4.76
15	6.64	20	2.61	2.61	2.60	45	3.31	3.30	3.28	70	5.59	5.26	4.83
16	6.30	21	2.62	2.62	2.62	46	3.36	3.35	3.33	71	5.76	5.38	4.88
17	6.00	22	2.64	2.64	2.64	47	3.41	3.40	3.37	72	5.93	5.49	4.94
18	5.73	23	2.66	2.66	2.66	48	3.46	3.45	3.42	73	6.11	5.60	4.99
19	5.49	24	2.68	2.68	2.68	49	3.52	3.50	3.47	74	6.29	5.71	5.04
20	5.27	25	2.70	2.70	2.69	50	3.57	3.55	3.52	75	6.48	5.81	5.08
21	5.08	26	2.72	2.72	2.71	51	3.63	3.61	3.57	76	6.68	5.91	5.11
22	4.90	27	2.74	2.74	2.73	52	3.70	3.67	3.62	77	6.87	6.01	5.14
23	4.74	28	2.76	2.76	2.76	53	3.76	3.73	3.68	78	7.07	6.09	5.17
24	4.60	29	2.78	2.78	2.78	54	3.83	3.79	3.74	79	7.27	6.17	5.19
25	4.46	30	2.81	2.81	2.80	55	3.90	3.86	3.80	**80	7.46	6.25	5.21

+ Multiply the monthly installment found in Table 1 by 2.994 to obtain the quarterly installment; by 5.969 to obtain the semiannual installment; and by 11.865 to obtain the annual installment.

++ The age is the age in years at the nearest birthday of the Beneficiary on the date the first installment is payable.

* And under

** And over

TERM LIFE INSURANCE TO AGE 95

INITIAL SCHEDULED LEVEL PREMIUM PERIOD FOR 10 YEARS

PREMIUMS ARE SUBJECT TO CHANGE

**EXCHANGEABLE AFTER FIVE YEARS TO ANNUAL INCREASING PREMIUM
OR DECREASING TERM INSURANCE TO AGE 100**

NONPARTICIPATING

PRIMERICA LIFE INSURANCE COMPANY

Home Office: Boston, Massachusetts
Executive Offices: 3120 Breckinridge Boulevard, Duluth, Georgia 30099-0001

INSURED TERM INSURANCE RIDER INITIAL SCHEDULED LEVEL PREMIUM PERIOD FOR 10 YEARS PREMIUMS ARE SUBJECT TO CHANGE

We have issued this Rider as a part of the Policy to which it is attached. Any payment under this Rider is subject to the provisions of this Rider and the Policy. In case of conflict between this Rider and the Policy, the provisions of this Rider will control.

This Rider is effective at 12:01 A.M. on the Rider Date of Issue.

BENEFIT

We will pay the Rider Face Amount, in a lump sum, to the Beneficiary of this Rider upon receiving due proof that the Insured died before the Rider Expiry Date and while this Rider was in force.

DEFINITIONS

These are some key words used in this Rider.

BENEFICIARY - The person(s) to whom the rider proceeds are payable at the death of the Insured. This is the person(s) named in the application as the Beneficiary, unless later changed. (See Change of Beneficiary Provision, below)

INSURED - The person whose life the Policy insures and who is named in the Policy and Rider Specifications.

NOTICE TO US - Information We have received which is written, signed by You and acceptable to Us.

PREMIUM CLASS - The risk classification used in determining what premiums You pay.

RIDER ATTAINED AGE - The Insured's Rider Issue Age plus the number of rider years since the Rider Date.

RIDER DATE - The date shown on Rider Page 3 from which rider anniversaries, rider years and rider months are measured.

RIDER DATE OF ISSUE - The date shown on Rider Page 3 on which We issue the Rider to You. This date controls the Incontestability and Suicide Exclusion provisions shown below.

RIDER EXPIRY DATE - The date shown on Rider Page 3. This Rider is not in force on or after this date.

RIDER FACE AMOUNT - The amount of insurance for each rider year which is shown in Table A on Rider Page 3A.

RIDER ISSUE AGE - The Insured's age on the birthday nearest the Rider Date.

WE, OUR or US - Primerica Life Insurance Company.

YOU or YOUR - The Owner of the Policy. Unless You tell Us otherwise, the Owner is the Insured.

GENERAL PROVISIONS

CONSIDERATION - This Rider is issued in consideration of: (1) the application for this Rider, a copy of which is attached to the Policy; and (2) payment of the first premium for this Rider.

PREMIUM PAYMENTS - Premiums for this Rider are payable in addition to, but under the same terms and conditions as, the premiums for the Policy. The premiums shown on Rider Page 3A are for the premium payment option You chose. Modal factors are used to determine the premium payment for all payment options. The modal factors are 0.095 for monthly, 0.265 for quarterly, 0.520 for semiannual, and 1.000 for annual. To calculate the approximate premium for a payment option other than the one You chose: (1) divide the premium shown on Rider Page 3A by the modal factor for that payment option; and (2) multiply the result by the modal factor for the premium payment option You would like to determine. You may change the premium payment option for future premium payments upon acceptable Notice to Us. The premium payment option for this Rider must be the same premium payment option as the Policy. We will provide You with premium rates for other payment options upon written request. Premiums are not due for any period after the Insured's death, the Rider Expiry Date or when this Rider terminates.

PREMIUM CHANGES BY COMPANY - Premiums for this Rider will be the scheduled premiums shown on Rider Pages 3 and 3A, unless changed by Us. We reserve the right to change the scheduled premiums. We will not change them more often than once a year, and in no event will the scheduled premiums be greater than the maximum premiums shown on Rider Page 3A. Any such change will apply uniformly to all riders of this form issued to Insureds having the same Rider Issue Age, duration, Premium Class, year, month, and state of issue; and will be based on future anticipated or emerging experience, including, but not limited to investment earnings, mortality, persistency, taxes and expenses. No change in premiums or Premium Class will occur because of deterioration of the Insured's health or change in occupation.

We will mail written notice to You at least 60 days prior to the date on which a change in Your scheduled premiums will become effective. We will send You new rider specifications pages to reflect any changes in scheduled premiums.

OTHER PREMIUM CHANGES - Changes requested by You and approved by Us to the Face Amount or Premium Class of the Policy or the Face Amount or Premium Class of any Riders may also change Your scheduled premiums.

MISSTATEMENT OF AGE - If the age of the Insured has been misstated in the application, We will be liable only for the amount of insurance the premiums paid would have purchased for the correct age.

INCONTESTABILITY - We will not contest this Rider after it has been in force for two years during the Insured's life. The two years begin on the Rider Date of Issue.

SUICIDE EXCLUSION - If the Insured dies by suicide, while sane or insane, within two years of the Rider Date of Issue, We are only liable for the premiums paid.

REPLACED COVERAGE - If insurance coverage (excluding group coverage) is to be replaced, as shown in the application, and has terminated: (a) prior to the Insured's death, including death by suicide; and (b) between 60 days before and 60 days after the Rider Date of Issue, We will not contest the amount of the replaced coverage that would not have been contestable had it not been replaced. If it is not possible to terminate any coverage to be replaced because of its provisions within 60 days after the Rider Date of Issue, such 60-day period will be extended to the earliest possible date for the coverage to be terminated under its provisions. For example, You are insured under another company's plan for \$100,000 and that plan has been in force two years. If this Rider replaced the other company's plan, We would not contest this Rider for up to \$100,000. We would however, be able to contest any amount over \$100,000. You will not lose the time accrued for the amount of insurance replaced due to this Rider's Incontestability and Suicide Exclusion provisions.

NONPARTICIPATION - This Rider does not participate in Our profits or surplus.

CHANGE OF BENEFICIARY - You can change a Beneficiary of this Rider by Notice to Us. You can only change a Beneficiary while the Insured is alive. A Beneficiary designated irrevocably on Our records may not be changed except with the written consent of that Beneficiary. A Beneficiary change will take effect on the date You signed the Notice to Us. If the Insured died before We receive this Notice, the change is effective, subject to any prior payment of proceeds.

TERMINATION - This Rider shall terminate and no longer be in force: (1) if any premium remains unpaid after the end of the grace period; (2) if the Policy terminates or is continued under a nonforfeiture provision, if any; (3) if this Rider is exchanged to a new policy; (4) on and after the Rider Expiry Date; or (5) on and after the date You cancel it.

CANCELLATION - You may cancel this Rider at any time by sending written Notice to Us. Your Rider will be canceled as of the date We receive the Notice, or, if stated in the Notice, as of a later date. If this Rider is canceled before the Rider Expiry Date and premiums have been paid in advance, We will refund any unearned portion of the premiums paid beyond the end of the rider month in which cancellation occurred.

EXCHANGE PROVISION - You may exchange this Rider at any time after it has been in force for five years to the Annual Increasing Premium Term Insurance to Age 100 Plan described in the Policy; or the Decreasing Term Insurance to Age 100 Plan described in the Policy; or any other plan of insurance then available for exchange, as periodically determined by Us. The new plan will be issued at Our premium rates for that plan for the Rider Attained Age on the exchange date based on the same Premium Class shown on Rider Page 3. We will not require evidence of insurability. The new plan will take effect on the exchange date and this Rider will terminate. However, the new plan's Incontestability and Suicide Exclusion provisions will be controlled by this Rider Date of Issue. We will issue either revised specifications pages or a new policy.

The following conditions are necessary for exchange: (1) We receive Notice to Us requesting an exchange; (2) the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Rider on the exchange date; (3) the required premium is paid within 31 days after the exchange date; (4) the Insured is alive; (5) this Rider is in force on the exchange date; (6) premiums for Your current Rider are not being waived; and (7) the exchange plan will be issued at Our premium rates for that plan for the Insured's Attained Age on the exchange date based on the same Premium Class shown on Rider Page 3, provided the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Rider on the exchange date.

EXCHANGE AT POLICY EXPIRY - If this Rider is inforce at expiry of the Policy, it may be exchanged for a policy in accordance with the Exchange Provision except that: (a) the exchange must be made within 30 days after the Policy expiry date; and (b) the effective date of the policy will be the day We receive written request for the exchange.

Signed on the Rider Date of Issue at Our Executive Offices.


Secretary


President

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RIDER SPECIFICATIONS (CONT'D)

TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01	35	\$362.00	\$362.00	\$200,000.00]
[02	36	\$362.00	\$560.00	\$200,000.00]
[03	37	\$362.00	\$560.00	\$200,000.00]
[04	38	\$362.00	\$560.00	\$200,000.00]
[05	39	\$362.00	\$560.00	\$200,000.00]
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[08	42	\$362.00	\$560.00	\$200,000.00]
[09	43	\$362.00	\$560.00	\$200,000.00]
[10	44	\$362.00	\$560.00	\$200,000.00]
[11	45	\$1,080.00	\$2,070.00	\$200,000.00]
[12	46	\$1,080.00	\$2,070.00	\$200,000.00]
[13	47	\$1,080.00	\$2,070.00	\$200,000.00]
[14	48	\$1,080.00	\$2,070.00	\$200,000.00]
[15	49	\$1,080.00	\$2,070.00	\$200,000.00]
[16	50	\$1,666.00	\$2,946.00	\$200,000.00]
[17	51	\$1,666.00	\$2,946.00	\$200,000.00]
[18	52	\$1,666.00	\$2,946.00	\$200,000.00]
[19	53	\$1,666.00	\$2,946.00	\$200,000.00]
[20	54	\$1,666.00	\$2,946.00	\$200,000.00]
[21	55	\$2,704.00	\$4,138.00	\$200,000.00]
[22	56	\$2,704.00	\$4,138.00	\$200,000.00]
[23	57	\$2,704.00	\$4,138.00	\$200,000.00]
[24	58	\$2,704.00	\$4,138.00	\$200,000.00]
[25	59	\$2,704.00	\$4,138.00	\$200,000.00]
[26	60	\$4,454.00	\$5,684.00	\$200,000.00]
[27	61	\$4,454.00	\$5,684.00	\$200,000.00]
[28	62	\$4,454.00	\$5,684.00	\$200,000.00]
[29	63	\$4,454.00	\$5,684.00	\$200,000.00]
[30	64	\$4,454.00	\$5,684.00	\$200,000.00]
[31	65	\$7,220.00	\$8,724.00	\$200,000.00]
[32	66	\$7,220.00	\$8,724.00	\$200,000.00]
[33	67	\$7,220.00	\$8,724.00	\$200,000.00]
[34	68	\$7,220.00	\$8,724.00	\$200,000.00]
[35	69	\$7,220.00	\$8,724.00	\$200,000.00]
[36	70	\$9,416.00	\$10,932.00	\$200,000.00]
[37	71	\$10,750.00	\$11,910.00	\$200,000.00]
[38	72	\$12,222.00	\$13,122.00	\$200,000.00]
[39	73	\$13,866.00	\$14,600.00	\$200,000.00]
[40	74	\$15,710.00	\$16,326.00	\$200,000.00]

*Scheduled premiums may change, but they will not increase above the maximum premiums. See Premium Changes by Company provision.

RIDER SPECIFICATIONS (CONT'D)

TABLE A (CONT'D)
 [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41	75	\$17,798.00	\$18,242.00	\$200,000.00]
[42	76	\$20,066.00	\$20,308.00	\$200,000.00]
[43	77	\$22,232.00	\$22,474.00	\$200,000.00]
[44	78	\$24,490.00	\$24,732.00	\$200,000.00]
[45	79	\$26,906.00	\$27,148.00	\$200,000.00]
[46	80	\$29,586.00	\$29,828.00	\$200,000.00]
[47	81	\$32,612.00	\$32,854.00	\$200,000.00]
[48	82	\$35,766.00	\$36,312.00	\$200,000.00]
[49	83	\$38,892.00	\$40,236.00	\$200,000.00]
[50	84	\$42,336.00	\$44,842.00	\$200,000.00]
[51	85	\$46,098.00	\$49,446.00	\$200,000.00]
[52	86	\$50,180.00	\$54,676.00	\$200,000.00]
[53	87	\$54,580.00	\$59,714.00	\$200,000.00]
[54	88	\$59,300.00	\$65,408.00	\$200,000.00]
[55	89	\$64,266.00	\$70,822.00	\$200,000.00]
[56	90	\$69,392.00	\$77,056.00	\$200,000.00]
[57	91	\$74,676.00	\$83,702.00	\$200,000.00]
[58	92	\$80,124.00	\$90,954.00	\$200,000.00]
[59	93	\$85,728.00	\$99,170.00	\$200,000.00]
[60	94	\$91,492.00	\$109,246.00	\$200,000.00]

*Scheduled premiums may change, but they will not increase above the maximum premiums. See Premium Changes by Company provision.

PRIMERICA LIFE INSURANCE COMPANY

Home Office: Boston, Massachusetts
Executive Offices: 3120 Breckinridge Boulevard, Duluth, Georgia 30099-0001

SPOUSE TERM INSURANCE RIDER **INITIAL SCHEDULED LEVEL PREMIUM PERIOD FOR 10 YEARS** **PREMIUMS ARE SUBJECT TO CHANGE**

We have issued this Rider as a part of the Policy to which it is attached. Any payment under this Rider is subject to the provisions of this Rider and the Policy. In case of conflict between this Rider and the Policy, the provisions of this Rider will control.

This Rider is effective at 12:01 A.M. on the Rider Date of Issue.

BENEFIT

We will pay the Rider Face Amount, in a lump sum, to the Beneficiary of this Rider upon receiving due proof that the Insured Spouse died before the Rider Expiry Date and while this Rider was in force.

DEFINITIONS

These are some key words used in this Rider.

BENEFICIARY - The person(s) to whom the rider proceeds are payable upon the death of the Insured Spouse. Unless otherwise stated in the application or later changed (See Change of Beneficiary Provision, below), the Beneficiary of this Rider will be the Insured, if living; otherwise the estate of the Insured Spouse. If the Beneficiary is a partnership, We will pay the rider proceeds to the partnership as it is constituted at the time of the Insured Spouse's death.

INSURED - The person whose life the Policy insures and who is named in the Policy Specifications.

INSURED SPOUSE - The person whose life this Rider insures. This person is the spouse of the Insured and is named in the Rider Specifications.

NOTICE TO US - Information We have received which is written, signed by You and acceptable to Us.

PREMIUM CLASS - The risk classification used in determining what premiums You pay.

RIDER ATTAINED AGE - The Insured Spouse's Rider Issue Age plus the number of rider years since the Rider Date.

RIDER DATE - The date shown on Rider Page 3 from which rider anniversaries, rider years and rider months are measured.

RIDER DATE OF ISSUE - The date shown on Rider Page 3 on which We issue the Rider to You. This date controls the Incontestability and Suicide Exclusion provisions shown below.

RIDER EXPIRY DATE - The date shown on Rider Page 3. This Rider is not in force on or after this date.

RIDER FACE AMOUNT - The amount of insurance for each rider year which is shown in Table A on Rider Page 3A.

RIDER ISSUE AGE - The Insured Spouse's age on the birthday nearest the Rider Date.

WE, OUR or US - Primerica Life Insurance Company.

YOU or YOUR - The Owner of the Policy. Unless You tell Us otherwise, the Owner is the Insured.

GENERAL PROVISIONS

CONSIDERATION - This Rider is issued in consideration of: (1) the application for this Rider, a copy of which is attached to the Policy; and (2) payment of the first premium for this Rider.

PREMIUM PAYMENTS - Premiums for this Rider are payable in addition to, but under the same terms and conditions as, the premiums for the Policy. The premiums shown on Rider Page 3A are for the premium payment option You chose. Modal factors are used to determine the premium payment for all payment options. The modal factors are 0.095 for monthly, 0.265 for quarterly, 0.520 for semiannual, and 1.000 for annual. To calculate the approximate premium for a payment option other than the one You chose: (1) divide the premium shown on Rider Page 3A by the modal factor for that payment option; and (2) multiply the result by the modal factor for the premium payment option You would like to determine. You may change the premium payment option for future premium payments upon acceptable Notice to Us. The premium payment option for this Rider must be the same premium payment option as the Policy. We will provide You with premium rates for other payment options upon written request. Premiums are not due for any period after the Insured Spouse's death, the Rider Expiry Date or when this Rider terminates.

PREMIUM CHANGES BY COMPANY - Premiums for this Rider will be the scheduled premiums shown on Rider Pages 3 and 3A, unless changed by Us. We reserve the right to change the scheduled premiums. We will not change them more often than once a year, and in no event will the scheduled premiums be greater than the maximum premiums shown on Rider Page 3A. Any such change will apply uniformly to all riders of this form issued to Insured Spouses having the same Rider Issue Age, duration, Premium Class, year, month, and state of issue; and will be based on future anticipated or emerging experience, including, but not limited to investment earnings, mortality, persistency, taxes and expenses. No change in premiums or Premium Class will occur because of deterioration of the Insured Spouse's health or change in occupation.

We will mail written notice to You at least 60 days prior to the date on which a change in Your scheduled premiums will become effective. We will send You new rider specifications pages to reflect any changes in scheduled premiums.

OTHER PREMIUM CHANGES - Changes requested by You and approved by Us to the Face Amount or Premium Class of the Policy or the Face Amount or Premium Class of any Riders may also change Your scheduled premiums.

MISSTATEMENT OF AGE - If the age of the Insured Spouse has been misstated in the application, We will be liable only for the amount of insurance the premiums paid would have purchased for the correct age.

INCONTESTABILITY - We will not contest this Rider after it has been in force for two years during the Insured Spouse's life. The two years begin on the Rider Date of Issue.

SUICIDE EXCLUSION - If the Insured Spouse dies by suicide, while sane or insane, within two years of the Rider Date of Issue, We are only liable for the premiums paid.

REPLACED COVERAGE - If insurance coverage (excluding group coverage) is to be replaced, as shown in the application, and has terminated: (a) prior to the Insured Spouse's death, including death by suicide; and (b) between 60 days before and 60 days after the Rider Date of Issue, We will not contest the amount of the replaced coverage that would not have been contestable had it not been replaced. If it is not possible to terminate any coverage to be replaced because of its provisions within 60 days after the Rider Date of Issue, such 60-day period will be extended to the earliest possible date for the coverage to be terminated under its provisions. For example, the Insured Spouse is insured under another company's plan for \$100,000 and that plan has been in force two years. If this Rider replaced the other company's plan, We would not contest this Rider for up to \$100,000. We would however, be able to contest any amount over \$100,000. You will not lose the time accrued for the amount of insurance replaced due to this Rider's Incontestability and Suicide Exclusion provisions.

NONPARTICIPATION - This Rider does not participate in Our profits or surplus.

PAYMENT OF PROCEEDS - Due proof of the death of the Insured Spouse must be sent to Us at Our Executive Offices. We must receive a certified death certificate, completed claim forms and a valid authorization for Us to obtain all medical and other records concerning the Insured Spouse. Death proceeds equal: (1) the Rider Face Amount; minus (2) any overdue premium for the Policy and any Riders if the Insured Spouse's death occurs during a grace period.

CHANGE OF BENEFICIARY - You can change a Beneficiary of this Rider by Notice to Us. You can only change a Beneficiary while the Insured Spouse is alive. A Beneficiary designated irrevocably on Our records may not be changed except with the written consent of that Beneficiary. A Beneficiary change will take effect on the date You signed the Notice to Us. If the Insured Spouse died before We receive this Notice, the change is effective, subject to any prior payment of proceeds.

TERMINATION - This Rider shall terminate and no longer be in force: (1) if any premium remains unpaid after the end of the grace period; (2) if the Policy terminates (subject to the Exchange at Death of Insured Provision) or is continued under a nonforfeiture provision, if any; (3) if this Rider is exchanged to a new policy; (4) on and after the Rider Expiry Date; or (5) on and after the date You cancel it.

CANCELLATION - You may cancel this Rider at any time by sending written Notice to Us. Your Rider will be canceled as of the date We receive the Notice, or, if stated in the Notice, as of a later date. If this Rider is canceled before the Rider Expiry Date and premiums have been paid in advance, We will refund any unearned portion of the premiums paid beyond the end of the rider month in which cancellation occurred.

EXCHANGE PROVISION - You may exchange this Rider at any time after it has been in force for five years to the Annual Increasing Premium Term Insurance to Age 100 Plan described in the Policy; or the Decreasing Term Insurance to Age 100 Plan described in the Policy; or any other plan of insurance then available for exchange, as periodically determined by Us. The new plan will be issued at Our premium rates for that plan for the Insured Spouse's Rider Attained Age on the exchange date based on the same Premium Class shown on Rider Page 3. We will not require evidence of insurability. The new plan will take effect on the exchange date and this Rider will terminate. However, the new plan's Incontestability and Suicide Exclusion provisions will be controlled by this Rider Date of Issue. We will issue either revised specifications pages or a new policy.

The following conditions are necessary for exchange: (1) We receive Notice to Us requesting an exchange; (2) the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Rider on the exchange date; (3) the required premium is paid within 31 days after the exchange date; (4) the Insured Spouse is alive; (5) this Rider is in force on the exchange date; (6) premiums for Your current Rider are not being waived; and (7) the exchange plan will be issued at Our premium rates for that plan for the Insured Spouse's Attained Age on the exchange date based on the same Premium Class shown on Rider Page 3, provided the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Rider on the exchange date.

EXCHANGE AT DEATH OF INSURED - If this Rider is in force at the Insured's death, it may be exchanged for a new policy in accordance with the Exchange Provision except that: (a) the exchange must be made within 30 days after the Insured's death; and (b) the effective date of the new policy will be the day We receive written request for exchange. If the Insured Spouse dies before exchange takes effect and within 30 days after the Insured's death, We will pay to the Beneficiary of this Rider the insurance in force under this Rider at the Insured's death, less any overdue premium for this Rider.

EXCHANGE AT POLICY EXPIRY - If this Rider is in force at expiry of the Policy, it may be exchanged for a policy in accordance with the Exchange Provision except that: (a) the exchange must be made within 30 days after the Policy expiry date; and (b) the effective date of the policy will be the day We receive written request for the exchange.

Signed on the Rider Date of Issue at Our Executive Offices.



Secretary



President

RIDER SPECIFICATIONS

POLICY NUMBER: [04SPECIMEN] INSURED SPOUSE: [JANE DOE]
 RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [DECEMBER 01, 2009]
 RIDER FACE
 AMOUNT: [\$200,000] RIDER DATE: [DECEMBER 01, 2009]
 PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [DECEMBER 01, 2069]
 [TOBACCO USE]

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-10
C4BS10	SPOUSE TERM INSURANCE RIDER	[\$200,000]	[\$362.00]

*All premiums for the premium payment option You chose are shown on Rider Page 3A and explained in the Premium Changes by Company provision.

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RIDER SPECIFICATIONS (CONT'D)

TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01	35	\$362.00	\$362.00	\$200,000.00]
[02	36	\$362.00	\$560.00	\$200,000.00]
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[40	74	\$15,710.00	\$16,326.00	\$200,000.00]

*Scheduled premiums may change, but they will not increase above the maximum premiums. See Premium Changes by Company provision.

RIDER SPECIFICATIONS (CONT'D)

TABLE A (CONT'D)
 [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41	75	\$17,798.00	\$18,242.00	\$200,000.00]
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[47	81	\$32,612.00	\$32,854.00	\$200,000.00]
[48	82	\$35,766.00	\$36,312.00	\$200,000.00]
[49	83	\$38,892.00	\$40,236.00	\$200,000.00]
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[52	86	\$50,180.00	\$54,676.00	\$200,000.00]
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[54	88	\$59,300.00	\$65,408.00	\$200,000.00]
[55	89	\$64,266.00	\$70,822.00	\$200,000.00]
[56	90	\$69,392.00	\$77,056.00	\$200,000.00]
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[58	92	\$80,124.00	\$90,954.00	\$200,000.00]
[59	93	\$85,728.00	\$99,170.00	\$200,000.00]
[60	94	\$91,492.00	\$109,246.00	\$200,000.00]

*Scheduled premiums may change, but they will not increase above the maximum premiums. See Premium Changes by Company provision.

We will pay the Face Amount, in a lump sum, to the Beneficiary upon receiving due proof that the Insured died before the Expiry Date and while this Policy was in force. This agreement is subject to the provisions on the following pages, which constitute the Policy.

RIGHT TO RETURN POLICY: You may return this Policy to Us for any reason within 20 days after You receive it. If returned, it will be considered void from the beginning. Any premium paid will be refunded.

This Policy is effective at 12:01 A.M. on the Date of Issue.

Signed on the Date of Issue at Our Executive Offices.



Secretary



President

TERM LIFE INSURANCE TO AGE 95

INITIAL SCHEDULED LEVEL PREMIUM PERIOD FOR 15 YEARS

PREMIUMS ARE SUBJECT TO CHANGE

**EXCHANGEABLE AFTER FIVE YEARS TO ANNUAL INCREASING PREMIUM
OR DECREASING TERM INSURANCE TO AGE 100**

NONPARTICIPATING

Primerica Life Insurance Company
(A Stock Company)
Home Office: Boston, Massachusetts

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PART 6: SETTLEMENT OPTIONS Page 10

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POLICY SPECIFICATIONS (CONT'D)

TABLE A
 [ANNUAL] PREMIUMS FOR BASIC POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[01	35	\$659.00	\$659.00	\$200,000.00]
[02	36	\$659.00	\$775.00	\$200,000.00]
[03	37	\$659.00	\$775.00	\$200,000.00]
[04	38	\$659.00	\$775.00	\$200,000.00]
[05	39	\$659.00	\$775.00	\$200,000.00]
[06	40	\$659.00	\$775.00	\$200,000.00]
[07	41	\$659.00	\$775.00	\$200,000.00]
[08	42	\$659.00	\$775.00	\$200,000.00]
[09	43	\$659.00	\$775.00	\$200,000.00]
[10	44	\$659.00	\$775.00	\$200,000.00]
[11	45	\$659.00	\$775.00	\$200,000.00]
[12	46	\$659.00	\$775.00	\$200,000.00]
[13	47	\$659.00	\$775.00	\$200,000.00]
[14	48	\$659.00	\$775.00	\$200,000.00]
[15	49	\$659.00	\$775.00	\$200,000.00]
[16	50	\$1,741.00	\$3,021.00	\$200,000.00]
[17	51	\$1,741.00	\$3,021.00	\$200,000.00]
[18	52	\$1,741.00	\$3,021.00	\$200,000.00]
[19	53	\$1,741.00	\$3,021.00	\$200,000.00]
[20	54	\$1,741.00	\$3,021.00	\$200,000.00]
[21	55	\$2,779.00	\$4,213.00	\$200,000.00]
[22	56	\$2,779.00	\$4,213.00	\$200,000.00]
[23	57	\$2,779.00	\$4,213.00	\$200,000.00]
[24	58	\$2,779.00	\$4,213.00	\$200,000.00]
[25	59	\$2,779.00	\$4,213.00	\$200,000.00]
[26	60	\$4,529.00	\$5,759.00	\$200,000.00]
[27	61	\$4,529.00	\$5,759.00	\$200,000.00]
[28	62	\$4,529.00	\$5,759.00	\$200,000.00]
[29	63	\$4,529.00	\$5,759.00	\$200,000.00]
[30	64	\$4,529.00	\$5,759.00	\$200,000.00]
[31	65	\$7,295.00	\$8,799.00	\$200,000.00]
[32	66	\$7,295.00	\$8,799.00	\$200,000.00]
[33	67	\$7,295.00	\$8,799.00	\$200,000.00]
[34	68	\$7,295.00	\$8,799.00	\$200,000.00]
[35	69	\$7,295.00	\$8,799.00	\$200,000.00]
[36	70	\$9,491.00	\$11,007.00	\$200,000.00]
[37	71	\$10,825.00	\$11,985.00	\$200,000.00]
[38	72	\$12,297.00	\$13,197.00	\$200,000.00]
[39	73	\$13,941.00	\$14,675.00	\$200,000.00]
[40	74	\$15,785.00	\$16,401.00	\$200,000.00]

*Scheduled premiums may change, but they will not increase above the maximum premiums. See Part 4, Premium Provisions.

POLICY SPECIFICATIONS (CONT'D)

TABLE A (CONT'D)
 [ANNUAL] PREMIUMS FOR BASIC POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[41	75	\$17,873.00	\$18,317.00	\$200,000.00]
[42	76	\$20,141.00	\$20,383.00	\$200,000.00]
[43	77	\$22,307.00	\$22,549.00	\$200,000.00]
[44	78	\$24,565.00	\$24,807.00	\$200,000.00]
[45	79	\$26,981.00	\$27,223.00	\$200,000.00]
[46	80	\$29,661.00	\$29,903.00	\$200,000.00]
[47	81	\$32,687.00	\$32,929.00	\$200,000.00]
[48	82	\$35,841.00	\$36,387.00	\$200,000.00]
[49	83	\$38,967.00	\$40,311.00	\$200,000.00]
[50	84	\$42,411.00	\$44,917.00	\$200,000.00]
[51	85	\$46,173.00	\$49,521.00	\$200,000.00]
[52	86	\$50,255.00	\$54,751.00	\$200,000.00]
[53	87	\$54,655.00	\$59,789.00	\$200,000.00]
[54	88	\$59,375.00	\$65,483.00	\$200,000.00]
[55	89	\$64,341.00	\$70,897.00	\$200,000.00]
[56	90	\$69,467.00	\$77,131.00	\$200,000.00]
[57	91	\$74,751.00	\$83,777.00	\$200,000.00]
[58	92	\$80,199.00	\$91,029.00	\$200,000.00]
[59	93	\$85,803.00	\$99,245.00	\$200,000.00]
[60	94	\$91,567.00	\$109,321.00	\$200,000.00]

*Scheduled premiums may change, but they will not increase above the maximum premiums. See Part 4, Premium Provisions.

PART 1 DEFINITIONS

These are some key words used in this Policy.

1. *ATTAINED AGE* - The Issue Age plus the number of policy years since the Policy Date.
2. *BENEFICIARY* - The person(s) to whom the Policy proceeds are payable at the death of the Insured. This is the person(s) named in the application as the Beneficiary, unless later changed (see Part 3).
3. *DATE OF ISSUE* - The date shown on Page 3 on which We issue the Policy to You. This date controls the Incontestability and Suicide Exclusion provisions in Part 2.
4. *EXPIRY DATE* - The date shown on the Policy Specifications. This Policy is not in force on or after this date.
5. *FACE AMOUNT* - The amount of insurance for each policy year which is shown in Table A on Page 3A.
6. *INSURED* - The person whose life the Policy insures and who is named in the Policy Specifications.
7. *ISSUE AGE* - The Insured's age on the birthday nearest the Policy Date.
8. *NOTICE TO US* - Information We have received which is written, signed by You, and acceptable to Us.
9. *POLICY DATE* - The date (shown on Page 3) from which premium due dates, policy anniversaries, policy years and policy months are measured.
10. *PREMIUM CLASS* - The risk classification used in determining what premiums You pay.
11. *WE, OUR or US* - Primerica Life Insurance Company.
12. *YOU or YOUR* - The Owner of the Policy. Unless You tell Us otherwise, the Owner is the Insured.

PART 2 GENERAL PROVISIONS

OWNER OF POLICY - This Policy belongs to You. During the Insured's life, You have all of the rights described in this Policy. If You die, Your rights will pass to the named contingent owner, if any. If there is no named contingent owner, Your rights will pass to the Insured.

THE CONTRACT - This Policy is issued in consideration of the application and payment of the first premium. A copy of the application, including any supplemental applications, is attached and is a part of the Policy. Together, they are the entire contract. All statements in the application, except fraudulent ones, are deemed to be representations and not warranties. No statement will void this Policy or be used in defense of a claim unless: (1) it is contained in a written application; and (2) a copy of that application is attached to this Policy.

DUPLICATE POLICY - You may request a duplicate copy of Your current Policy, which will not contain a copy of the application(s), unless requested by You. A duplicate Policy request should be sent to Us at Our Executive Offices. We will charge a fee for each duplicate Policy request.

WAIVER OR MODIFICATION - Any change to this Policy must be in writing and signed by Our President or Secretary. No agent or any other person can change this Policy or waive any of its provisions on Our behalf.

MISSTATEMENT OF AGE - If the age of the Insured has been misstated in the application, We will be liable only for the amount of insurance the premiums paid would have purchased for the correct age.

INCONTESTABILITY - We will not contest this Policy after it has been in force for two years during the Insured's life. The two years begin on the Date of Issue. This provision does not apply to any rider for disability benefits or additional insurance specifically for accidental death.

SUICIDE EXCLUSION - If the Insured dies by suicide, while sane or insane, within two years of the Date of Issue, We are only liable for the premiums paid.

REPLACED COVERAGE - If insurance coverage (excluding group coverage) is to be replaced, as shown in the application, and has terminated: (a) prior to the Insured's death, including death by suicide; and (b) between 60 days before and 60 days after the Date of Issue of this Policy, We will not contest the amount of the replaced coverage that would not have been contestable had it not been replaced. If it is not possible to terminate any coverage to be replaced because of its provisions within 60 days after the Date of Issue of this Policy, such 60-day period will be extended to the earliest possible date for the coverage to be terminated under its provisions. For example, You are insured under another company's policy for \$100,000 and that policy has been in force two years. If this Policy replaced the other company's policy, We would not contest this Policy for up to \$100,000. We would however, be able to contest any amount over \$100,000. You will not lose the time accrued for the amount of insurance replaced due to this Policy's Incontestability and Suicide Exclusion provisions.

NONPARTICIPATION - This Policy does not participate in Our profits or surplus.

ASSIGNMENT - You may assign Your rights under this Policy. You must give Notice to Us of the assignment. We are not responsible for the validity of any assignment. The interest of any Beneficiary not designated irrevocably will be subject to the rights of any assignee.

PAYMENT OF PROCEEDS - Due proof of the death of the Insured must be sent to Us at Our Executive Offices. We must receive a certified death certificate, completed claim forms and a valid authorization for Us to obtain all medical and other records concerning the Insured. Death proceeds equal: (1) the Face Amount of this Policy as shown in Table A on Page 3A; plus (2) any rider benefits; and minus (3) any overdue premium if death occurs during a grace period. Any interest payable on death proceeds will be paid according to applicable state law.

CANCELLATION - You may cancel Your Policy at any time by sending written Notice to Us. Your Policy will be canceled as of the date We receive the Notice, or, if stated in Your Notice, as of a later date. If this Policy is canceled before the Expiry Date and premiums have been paid in advance, We will refund any unearned portion of the premiums paid beyond the end of the policy month in which cancellation occurred.

PART 3 BENEFICIARY PROVISIONS

BENEFICIARY - The Beneficiary's interest will end if the Beneficiary dies before the Insured. If no primary Beneficiary is living at the Insured's death, the death proceeds will be paid to any contingent Beneficiary. The proceeds will be paid to the Owner if the Insured dies and there is no primary or contingent Beneficiary. Proceeds will be paid to the Insured's estate if there is no living Beneficiary or Owner.

We may rely on a sworn statement by any responsible person to discover the identity or nonexistence of any Beneficiary not identified by name. If a Beneficiary is a partnership, We will pay the proceeds to the partnership as it is constituted at the time of the Insured's death.

CHANGE OF BENEFICIARY - You can change a Beneficiary by Notice to Us. You can only change a Beneficiary while the Insured is alive. A Beneficiary designated irrevocably on Our records may not be changed except with the written consent of that Beneficiary. A Beneficiary change will take effect on the date You signed the Notice to Us. If the Insured died before We receive this Notice, the change is effective, subject to any prior payment of proceeds.

PART 4 PREMIUM PROVISIONS

PREMIUM PAYMENTS - Premiums are payable to Us in advance. The first premium is due on or before delivery of this Policy and may be paid to Us through one of Our agents. Subsequent premiums must be paid to Us at Our Executive Offices and are due at 12, 6, 3 or 1 Policy month intervals, depending on the premium payment option You chose in the application. The premiums shown on Page 3A are for the premium payment option You chose. Modal factors are used to determine the premium payment for all payment options. The modal factors are 0.095 for monthly, 0.265 for quarterly, 0.520 for semiannual, and 1.000 for annual. To calculate the approximate premium for a payment option other than the one You chose: (1) divide the premium shown on Page 3A by the modal factor for that payment option; and (2) multiply the result by the modal factor for the premium payment option You would like to determine. You may change the premium payment option for future premium payments upon acceptable Notice to Us. We will provide You with premium rates for other payment options upon written request. Premiums are not due for any period after the Insured's death or the Expiry Date.

If a part of the total premium is no longer payable under the provisions of a Rider, the total premium will be reduced accordingly.

PREMIUM CHANGES BY COMPANY - Premiums for this Policy will be the scheduled premiums shown on Pages 3 and 3A, unless changed by Us. We reserve the right to change the scheduled premiums. We will not change them more often than once a year, and in no event will the scheduled premiums be greater than the maximum premiums shown on Page 3A. Any such change will apply uniformly to all policies of this form issued to Insureds having the same Issue Age, duration, Premium Class, year, month, and state of issue; and will be based on future anticipated or emerging experience, including, but not limited to investment earnings, mortality, persistency, taxes and expenses. No change in premiums or Premium Class will occur because of deterioration of the Insured's health or change in occupation.

We will mail written notice to You at least 60 days prior to the date on which a change in Your scheduled premiums will become effective. We will send You new policy specifications pages to reflect any changes in scheduled premiums.

OTHER PREMIUM CHANGES - Changes requested by You and approved by Us to the Face Amount or Premium Class of this Policy or the Face Amount or Premium Class of any Riders may also change Your scheduled premiums.

RETURN OF UNEARNED PREMIUM AT DEATH - In the event of the Insured's death, the proceeds payable to the Beneficiary under this Policy shall include premiums paid for any period beyond the end of the Policy month in which death occurred.

GRACE PERIOD - This Policy has a 31 day grace period. This means that, except for the first premium, if a premium is not paid on or before the date it is due, it may be paid during the next 31 days. No interest will be charged for this late payment. During this 31 day period, the Policy will stay in force. If You do not pay the premium by the end of the grace period, this Policy will automatically terminate.

REINSTATEMENT - If this Policy terminates due to unpaid premium, it may be reinstated within three years after the date the first unpaid premium was due, if prior to the Expiry Date.

To reinstate this Policy, We must have evidence of insurability satisfactory to Us for all persons to be covered and payment of all unpaid premiums, plus interest at 6% per year compounded annually. The Policy Date of the reinstated policy will remain the original Policy Date. The reinstated date is the date We approve the reinstatement application.

Another option for reinstating this Policy is by providing evidence of insurability satisfactory to Us for all persons to be covered and payment of one month's premium. The Policy Date of the reinstated policy will be adjusted based on the length of time Your policy was lapsed. Reinstatement in this manner may result in changes in insurance age(s) and premiums may increase. You will be notified by Us if there is a premium increase. The reinstated date is the date We approve the reinstatement application.

The reinstated Policy shall be incontestable to the same extent as indicated in the above Incontestability Provision, from the reinstated date. This means that the two year contestable period will begin anew with the reinstatement.

**PART 5
EXCHANGE PROVISIONS**

EXCHANGE AT ATTAINED AGE - You may exchange this Policy at any time after it has been in force for five years to the Annual Increasing Premium Term Insurance to Age 100 Plan described below; or the Decreasing Term Insurance to Age 100 Plan described below; or any other plan of insurance then available for exchange for this Policy, as periodically determined by Us. We will not require evidence of insurability. The new plan will take effect on the exchange date and this Policy will terminate. However, the new plan's Incontestability and Suicide Exclusion provisions will be controlled by the Date of Issue of this Policy. We will issue either revised policy specifications pages or a new policy.

The following conditions are necessary for exchange: (1) We receive Notice to Us requesting an exchange; (2) the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Policy on the exchange date; (3) the required premium is paid within 31 days after the exchange date; (4) the Insured is alive; (5) this Policy is in force on the exchange date; (6) premiums for Your current Policy are not being waived under any rider attached to this Policy; and (7) the exchange plan will be issued at Our premium rates for that plan for the Insured's Attained Age on the exchange date based on the same Premium Class shown on Page 3, provided the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Policy on the exchange date.

ANNUAL INCREASING PREMIUM TERM INSURANCE TO AGE 100 PLAN - For this plan, the face amount remains level while premiums increase each year with Attained Age. Annual premiums per \$1,000 face amount for this plan are shown below in Table B. We reserve the right to change the scheduled premiums shown in Table B. We will not change the premiums to more than the maximum premiums shown in Table B.

**TABLE B
PREFERRED
ANNUAL EXCHANGE PREMIUMS PER \$1,000 FACE AMOUNT
THE ANNUAL POLICY FEE OF \$75 MUST BE ADDED.**

AGE	SCHEDULED					MAXIMUM ALL FACE AMOUNTS	AGE	SCHEDULED					MAXIMUM ALL FACE AMOUNTS
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over				\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over		
20	\$ 1.32	\$ 0.96	\$ 0.86	\$ 0.75	\$ 1.41	60	\$ 11.36	\$ 5.90	\$ 5.47	\$ 5.26	\$ 12.37		
21	1.32	0.96	0.86	0.75	1.41	61	12.57	6.53	6.06	5.82	13.64		
22	1.32	0.96	0.86	0.75	1.41	62	13.92	7.23	6.71	6.44	15.09		
23	1.32	0.96	0.86	0.75	1.41	63	15.35	7.98	7.40	7.11	16.74		
24	1.33	0.96	0.86	0.75	1.41	64	16.91	8.79	8.15	7.83	18.61		
25	1.35	0.96	0.86	0.76	1.41	65	18.62	9.68	8.98	8.62	20.67		
26	1.36	0.97	0.86	0.76	1.41	66	20.51	10.66	9.88	9.49	22.89		
27	1.38	0.97	0.87	0.77	1.41	67	22.58	11.74	10.89	10.46	25.30		
28	1.39	0.97	0.87	0.77	1.41	68	24.88	12.93	11.99	11.52	27.88		
29	1.39	0.97	0.87	0.77	1.41	69	27.40	14.25	13.21	12.69	30.70		
30	1.39	0.97	0.87	0.77	1.41	70	30.15	15.68	14.54	13.97	33.88		
31	1.39	0.97	0.87	0.77	1.44	71	33.12	17.62	16.24	15.46	38.07		
32	1.39	0.97	0.87	0.77	1.47	72	36.29	19.76	18.11	17.08	41.64		
33	1.39	0.97	0.87	0.77	1.52	73	40.50	22.12	20.16	18.89	46.41		
34	1.44	0.98	0.89	0.79	1.58	74	45.18	24.74	22.44	20.88	51.77		
35	1.49	0.98	0.89	0.80	1.65	75	50.41	27.69	24.99	23.10	57.52		
36	1.50	0.99	0.89	0.80	1.73	76	56.30	31.01	27.85	25.58	63.65		
37	1.52	0.99	0.90	0.81	1.84	77	62.87	34.73	31.04	28.33	70.09		
38	1.53	0.99	0.90	0.81	1.96	78	70.19	38.86	34.59	31.38	76.77		
39	1.60	1.03	0.93	0.84	2.09	79	78.27	43.46	38.50	34.72	83.86		
40	1.70	1.07	0.97	0.88	2.24	80	87.14	48.50	42.80	38.37	91.64		
41	1.84	1.14	1.03	0.94	2.42	81	96.82	54.02	47.47	42.33	100.30		
42	1.99	1.23	1.12	1.02	2.59	82	107.26	59.97	52.50	46.55	110.08		
43	2.18	1.32	1.20	1.10	2.80	83	118.53	66.42	57.92	51.08	121.11		
44	2.39	1.41	1.29	1.19	3.00	84	131.10	73.60	63.95	56.11	133.16		
45	2.64	1.53	1.40	1.30	3.25	85	144.50	81.56	70.61	61.09	145.96		
46	2.92	1.66	1.52	1.42	3.51	86	157.68	90.33	77.94	66.50	159.27		
47	3.23	1.80	1.65	1.56	3.80	87	171.23	99.94	85.94	72.33	172.96		
48	3.54	1.93	1.78	1.68	4.10	88	184.88	110.41	94.63	78.58	186.75		
49	3.90	2.07	1.92	1.83	4.44	89	198.83	121.64	103.94	85.16	200.84		
50	4.25	2.21	2.05	1.97	4.80	90	213.26	131.35	112.23	91.96	215.41		
51	4.70	2.45	2.27	2.18	5.23	91	228.41	141.35	120.78	98.96	230.72		
52	5.19	2.70	2.50	2.40	5.73	92	244.80	151.67	129.59	106.19	247.27		
53	5.74	2.98	2.77	2.66	6.29	93	263.08	162.27	138.65	113.61	265.74		
54	6.31	3.29	3.05	2.93	6.94	94	286.35	173.19	147.98	121.25	289.24		
55	6.94	3.60	3.34	3.21	7.65	95	312.94	184.41	157.57	129.11	315.94		
56	7.64	3.97	3.68	3.54	8.44	96	342.06	199.51	170.47	139.68	372.48		
57	8.42	4.37	4.05	3.90	9.28	97	410.38	285.17	233.66	186.79	468.79		
58	9.28	4.83	4.48	4.30	10.19	98	434.34	353.23	301.82	247.31	644.47		
59	10.26	5.34	4.95	4.75	11.22	99	458.86	373.18	318.86	261.27	978.31		

NOTE: AGE IS ATTAINED AGE.

**TABLE B (CONT'D)
NON-TOBACCO USE
ANNUAL EXCHANGE PREMIUMS PER \$1,000 FACE AMOUNT
THE ANNUAL POLICY FEE OF \$75 MUST BE ADDED.**

AGE	SCHEDULED					MAXIMUM ALL FACE AMOUNTS	AGE	SCHEDULED					MAXIMUM ALL FACE AMOUNTS
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over				\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over		
20	\$ 1.32	\$ 1.31	\$ 1.17	\$ 1.06	\$ 1.76	60	\$ 11.36	\$ 10.26	\$ 9.53	\$ 9.09	\$ 15.46		
21	1.32	1.31	1.17	1.06	1.76	61	12.57	11.35	10.54	10.06	17.05		
22	1.32	1.31	1.17	1.06	1.76	62	13.92	12.57	11.67	11.14	18.86		
23	1.32	1.31	1.17	1.06	1.76	63	15.35	13.86	12.87	12.28	20.92		
24	1.33	1.32	1.18	1.07	1.76	64	16.91	15.27	14.18	13.53	23.26		
25	1.35	1.33	1.19	1.08	1.76	65	18.62	16.81	15.61	14.89	25.84		
26	1.36	1.34	1.20	1.09	1.76	66	20.51	18.52	17.20	16.41	28.62		
27	1.38	1.35	1.21	1.10	1.76	67	22.58	20.54	18.94	18.07	31.62		
28	1.39	1.36	1.22	1.11	1.76	68	24.88	22.79	20.87	19.90	34.85		
29	1.39	1.36	1.22	1.11	1.76	69	27.40	25.28	22.98	21.92	38.37		
30	1.39	1.36	1.22	1.11	1.76	70	30.15	28.01	25.29	24.12	42.35		
31	1.39	1.36	1.22	1.11	1.80	71	33.12	30.99	27.83	26.50	47.58		
32	1.39	1.36	1.22	1.11	1.83	72	36.29	34.18	30.55	29.03	52.05		
33	1.39	1.36	1.22	1.11	1.90	73	40.50	37.68	33.51	31.78	58.01		
34	1.44	1.41	1.26	1.15	1.97	74	45.18	41.53	36.76	34.79	64.72		
35	1.49	1.44	1.30	1.19	2.07	75	50.41	45.80	40.35	38.12	71.91		
36	1.50	1.45	1.31	1.20	2.16	76	56.30	50.57	44.33	41.80	79.56		
37	1.52	1.46	1.32	1.21	2.30	77	62.87	55.84	48.72	45.86	87.61		
38	1.53	1.47	1.33	1.22	2.45	78	70.19	61.67	53.55	50.31	95.96		
39	1.60	1.53	1.38	1.28	2.62	79	78.27	68.04	58.81	55.14	104.83		
40	1.70	1.62	1.47	1.36	2.80	80	87.14	74.97	64.50	60.36	114.55		
41	1.84	1.74	1.58	1.47	3.02	81	96.82	82.46	70.62	65.97	125.37		
42	1.99	1.87	1.71	1.59	3.24	82	107.26	90.45	76.97	71.90	137.60		
43	2.18	2.05	1.87	1.75	3.50	83	118.53	98.99	83.70	78.18	151.38		
44	2.39	2.23	2.04	1.91	3.75	84	131.10	108.45	91.12	85.11	166.45		
45	2.64	2.45	2.25	2.11	4.06	85	145.00	118.84	99.22	92.68	182.45		
46	2.92	2.70	2.48	2.33	4.39	86	160.26	130.16	107.99	100.87	199.09		
47	3.23	2.97	2.74	2.59	4.74	87	176.98	142.47	117.47	109.73	216.19		
48	3.54	3.24	2.99	2.83	5.12	88	195.16	155.75	127.63	119.21	233.44		
49	3.90	3.54	3.28	3.12	5.55	89	211.51	169.83	138.31	129.20	251.05		
50	4.25	3.84	3.56	3.40	6.00	90	228.38	184.50	149.34	139.50	269.27		
51	4.70	4.24	3.94	3.76	6.54	91	245.77	198.55	160.72	150.13	288.41		
52	5.19	4.69	4.36	4.15	7.17	92	263.70	213.04	172.44	161.08	309.09		
53	5.74	5.18	4.81	4.59	7.86	93	282.15	227.94	184.51	172.35	332.17		
54	6.31	5.70	5.29	5.05	8.67	94	301.11	243.26	196.91	183.93	361.55		
55	6.94	6.27	5.82	5.56	9.56	95	320.62	259.02	209.67	195.85	430.18		
56	7.64	6.90	6.41	6.11	10.55	96	342.06	276.34	223.68	208.94	473.93		
57	8.42	7.60	7.06	6.73	11.61	97	410.38	331.54	268.37	250.68	554.28		
58	9.28	8.39	7.79	7.43	12.74	98	434.34	350.89	284.03	265.31	703.50		
59	10.26	9.27	8.61	8.21	14.03	99	458.86	370.71	300.07	280.29	978.31		

NOTE: AGE IS ATTAINED AGE.

**TOBACCO USE
ANNUAL EXCHANGE PREMIUMS PER \$1,000 FACE AMOUNT
THE ANNUAL POLICY FEE OF \$75 MUST BE ADDED.**

AGE	SCHEDULED					MAXIMUM ALL FACE AMOUNTS	AGE	SCHEDULED					MAXIMUM ALL FACE AMOUNTS
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over				\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over		
20	\$ 2.17	\$ 2.16	\$ 1.85	\$ 1.77	\$ 2.70	40	\$ 2.71	\$ 2.71	\$ 2.42	\$ 2.33	\$ 5.79		
21	2.17	2.16	1.85	1.77	2.70	41	3.02	2.91	2.60	2.52	6.44		
22	2.17	2.16	1.85	1.77	2.70	42	3.29	3.17	2.85	2.76	7.05		
23	2.17	2.16	1.85	1.77	2.70	43	3.59	3.44	3.11	3.01	7.68		
24	2.19	2.18	1.87	1.79	2.70	44	3.97	3.79	3.44	3.34	8.31		
25	2.21	2.20	1.89	1.81	2.70	45	4.37	4.17	3.80	3.69	8.96		
26	2.24	2.21	1.91	1.83	2.70	46	4.84	4.60	4.21	4.10	9.63		
27	2.26	2.23	1.93	1.85	2.70	47	5.35	5.07	4.67	4.54	10.35		
28	2.28	2.25	1.95	1.87	2.70	48	5.88	5.56	5.14	5.01	11.08		
29	2.28	2.25	1.95	1.87	2.82	49	6.47	6.09	5.66	5.53	11.88		
30	2.28	2.25	1.95	1.87	2.96	50	7.07	6.64	6.20	6.06	12.79		
31	2.28	2.25	1.95	1.87	3.07	51	7.82	7.34	6.86	6.70	13.69		
32	2.28	2.25	1.95	1.87	3.21	52	8.65	8.12	7.59	7.41	14.71		
33	2.28	2.25	1.95	1.87	3.35	53	9.53	8.95	8.36	8.17	15.90		
34	2.36	2.32	2.02	1.94	3.56	54	10.50	9.86	9.21	9.00	17.11		
35	2.43	2.38	2.09	2.01	3.72	55	11.55	10.84	10.14	9.90	18.38		
36	2.46	2.39	2.11	2.03	4.02	56	12.73	11.95	11.17	10.91	19.65		
37	2.48	2.41	2.13	2.05	4.39	57	14.01	13.16	12.30	12.01	20.87		
38	2.50	2.43	2.15	2.07	4.80	58	15.46	14.51	13.57	13.25	22.00		
39	2.64	2.56	2.27	2.19	5.27	59	17.08	16.03	14.99	14.64	23.17		

NOTE: AGE IS ATTAINED AGE.

**TABLE B (CONT'D)
TOBACCO USE (CONT'D)
ANNUAL EXCHANGE PREMIUMS PER \$1,000 FACE AMOUNT
THE ANNUAL POLICY FEE OF \$75 MUST BE ADDED.**

AGE	SCHEDULED					MAXIMUM	AGE	SCHEDULED					MAXIMUM
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS	\$149,999 and below		\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS		
60	\$18.89	\$17.73	\$16.58	\$16.19	\$24.47	80	149.04	147.93	125.54	120.41	149.14		
61	20.92	19.64	18.36	17.93	26.13	81	164.17	163.06	138.88	133.00	164.27		
62	23.15	21.74	20.32	19.85	28.14	82	181.46	178.83	153.20	146.48	181.56		
63	25.53	23.97	22.40	21.88	30.86	83	201.08	194.46	168.58	160.95	201.18		
64	28.14	26.42	24.69	24.12	33.89	84	224.11	211.68	185.67	177.00	224.21		
65	30.98	29.08	27.19	26.55	37.29	85	247.13	230.49	204.53	194.70	247.23		
66	34.12	32.03	29.94	29.24	40.66	86	273.28	250.90	225.21	214.08	273.38		
67	37.57	35.27	32.97	32.20	44.16	87	298.47	272.90	247.75	235.18	298.57		
68	41.39	38.86	36.32	35.48	47.33	88	326.94	296.50	272.21	258.05	327.04		
69	45.58	42.79	40.00	39.07	50.89	89	354.01	321.33	298.30	282.40	354.11		
70	50.15	47.08	44.01	42.99	54.66	90	385.18	346.96	325.64	307.88	385.28		
71	55.55	53.75	49.03	47.79	59.55	91	418.41	373.38	354.27	334.52	418.51		
72	64.81	61.11	54.45	52.98	65.61	92	454.67	400.62	384.21	362.33	454.77		
73	72.40	69.33	60.42	58.67	73.00	93	495.75	428.64	415.48	391.34	495.85		
74	81.23	78.55	67.03	64.97	81.63	94	546.13	457.46	448.09	421.55	546.23		
75	91.01	88.99	74.43	72.00	91.21	95	569.45	487.08	477.11	448.85	569.55		
76	101.44	100.33	82.67	79.83	101.54	96	597.60	518.87	508.25	478.14	597.70		
77	112.27	111.16	91.87	88.57	112.37	97	658.49	596.56	584.35	549.73	658.59		
78	123.56	122.45	102.05	98.21	123.66	98	742.24	631.37	618.44	581.81	775.51		
79	135.64	134.53	113.27	108.82	135.74	99	784.17	667.04	653.38	614.68	978.31		

NOTE: AGE IS ATTAINED AGE.

DECREASING TERM INSURANCE TO AGE 100 PLAN - For this plan, the face amount decreases while premiums remain level. The face amount decreases each year with Attained Age, as shown in Table C below. We reserve the right to change the scheduled face amount, but not lower than the minimum face amount as determined from Table C.

**TABLE C
PREFERRED
FACE AMOUNT PER \$100.00 BASIC ANNUAL PREMIUMS
THE BASIC ANNUAL PREMIUM IS THE ANNUAL PREMIUM FOR THIS PLAN
MINUS THE ANNUAL POLICY FEE OF \$75**

AGE	SCHEDULED					MINIMUM	AGE	SCHEDULED					MINIMUM
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS	\$149,999 and below		\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS		
20	\$75,757	\$104,166	\$116,279	\$133,333	\$70,921	40	\$58,823	\$93,457	\$103,092	\$113,636	\$44,642		
21	75,757	104,166	116,279	133,333	70,921	41	54,347	87,719	97,087	106,382	41,322		
22	75,757	104,166	116,279	133,333	70,921	42	50,251	81,300	89,285	98,039	38,610		
23	75,757	104,166	116,279	133,333	70,921	43	45,871	75,757	83,333	90,909	35,714		
24	75,187	104,166	116,279	133,333	70,921	44	41,841	70,921	77,519	84,033	33,333		
25	74,074	104,166	116,279	131,578	70,921	45	37,878	65,359	71,428	76,923	30,769		
26	73,529	103,092	116,279	131,578	70,921	46	34,246	60,240	65,789	70,422	28,490		
27	72,463	103,092	114,942	129,870	70,921	47	30,959	55,555	60,606	64,102	26,315		
28	71,942	103,092	114,942	129,870	70,921	48	28,248	51,813	56,179	59,523	24,390		
29	71,942	103,092	114,942	129,870	70,921	49	25,641	48,309	52,083	54,644	22,522		
30	71,942	103,092	114,942	129,870	70,921	50	23,529	45,248	48,780	50,761	20,833		
31	71,942	103,092	114,942	129,870	69,444	51	21,276	40,816	44,052	45,871	19,120		
32	71,942	103,092	114,942	129,870	68,027	52	19,267	37,037	40,000	41,666	17,452		
33	71,942	103,092	114,942	129,870	65,789	53	17,421	33,557	36,101	37,593	15,898		
34	69,444	102,040	112,359	126,582	63,291	54	15,847	30,395	32,786	34,129	14,409		
35	67,114	102,040	112,359	125,000	60,606	55	14,409	27,777	29,940	31,152	13,071		
36	66,666	101,010	112,359	125,000	57,803	56	13,089	25,188	27,173	28,248	11,848		
37	65,789	101,010	111,111	123,456	54,347	57	11,876	22,883	24,691	25,641	10,775		
38	65,359	101,010	111,111	123,456	51,020	58	10,775	20,703	22,321	23,255	9,813		
39	62,500	97,087	107,526	119,047	47,846	59	9,746	18,726	20,202	21,052	8,912		

NOTE: AGE IS ATTAINED AGE.

**TABLE C (CONT'D)
PREFERRED (CONT'D)
FACE AMOUNT PER \$100.00 BASIC ANNUAL PREMIUMS
THE BASIC ANNUAL PREMIUM IS THE ANNUAL PREMIUM FOR THIS PLAN
MINUS THE ANNUAL POLICY FEE OF \$75**

AGE	SCHEDULED				MINIMUM	AGE	SCHEDULED				MINIMUM
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS		\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS
60	\$8,802	\$16,949	\$18,281	\$19,011	\$8,084	80	\$1,147	\$2,061	\$2,336	\$2,606	\$ 1,091
61	7,955	15,313	16,501	17,182	7,331	81	1,032	1,851	2,106	2,362	997
62	7,183	13,831	14,903	15,527	6,626	82	932	1,667	1,904	2,148	908
63	6,514	12,531	13,513	14,064	5,973	83	843	1,505	1,726	1,957	825
64	5,913	11,376	12,269	12,771	5,373	84	762	1,358	1,563	1,782	750
65	5,370	10,330	11,135	11,600	4,837	85	692	1,226	1,416	1,636	685
66	4,875	9,380	10,121	10,537	4,368	86	634	1,107	1,283	1,503	627
67	4,428	8,517	9,182	9,560	3,952	87	584	1,000	1,163	1,382	578
68	4,019	7,733	8,340	8,680	3,586	88	540	905	1,056	1,272	535
69	3,649	7,017	7,570	7,880	3,257	89	502	822	962	1,174	497
70	3,316	6,377	6,877	7,158	2,951	90	468	761	891	1,087	464
71	3,019	5,675	6,157	6,468	2,626	91	437	707	827	1,010	433
72	2,755	5,060	5,521	5,854	2,401	92	408	659	771	941	404
73	2,469	4,520	4,960	5,293	2,154	93	380	616	721	880	376
74	2,213	4,042	4,456	4,789	1,931	94	349	577	675	824	345
75	1,983	3,611	4,001	4,329	1,738	95	319	542	634	774	316
76	1,776	3,224	3,590	3,909	1,571	96	292	501	586	715	268
77	1,590	2,879	3,221	3,529	1,426	97	243	299	350	427	213
78	1,424	2,573	2,891	3,186	1,302	98	230	283	331	404	155
79	1,277	2,300	2,597	2,880	1,192	99	217	267	313	382	102

NOTE: AGE IS ATTAINED AGE.

**NON-TOBACCO USE
FACE AMOUNT PER \$100.00 BASIC ANNUAL PREMIUMS
THE BASIC ANNUAL PREMIUM IS THE ANNUAL PREMIUM FOR THIS PLAN
MINUS THE ANNUAL POLICY FEE OF \$75**

AGE	SCHEDULED				MINIMUM	AGE	SCHEDULED				MINIMUM
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS		\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS
20	\$75,757	\$76,335	\$85,470	\$94,339	\$56,818	60	\$8,802	\$9,746	\$10,493	\$11,001	\$6,468
21	75,757	76,335	85,470	94,339	56,818	61	7,955	8,810	9,487	9,940	5,865
22	75,757	76,335	85,470	94,339	56,818	62	7,183	7,955	8,568	8,976	5,302
23	75,757	76,335	85,470	94,339	56,818	63	6,514	7,215	7,770	8,143	4,780
24	75,187	75,757	84,745	93,457	56,818	64	5,913	6,548	7,052	7,390	4,299
25	74,074	75,187	84,033	92,592	56,818	65	5,370	5,948	6,406	6,715	3,869
26	73,529	74,626	83,333	91,743	56,818	66	4,875	5,399	5,813	6,093	3,494
27	72,463	74,074	82,644	90,909	56,818	67	4,428	4,868	5,279	5,534	3,162
28	71,942	73,529	81,967	90,090	56,818	68	4,019	4,387	4,791	5,025	2,869
29	71,942	73,529	81,967	90,090	56,818	69	3,649	3,955	4,351	4,562	2,606
30	71,942	73,529	81,967	90,090	56,818	70	3,316	3,570	3,954	4,145	2,361
31	71,942	73,529	81,967	90,090	55,555	71	3,019	3,226	3,593	3,773	2,101
32	71,942	73,529	81,967	90,090	54,644	72	2,755	2,925	3,273	3,444	1,921
33	71,942	73,529	81,967	90,090	52,631	73	2,469	2,653	2,984	3,146	1,723
34	69,444	70,921	79,365	86,956	50,761	74	2,213	2,407	2,720	2,874	1,545
35	67,114	69,444	76,923	84,033	48,309	75	1,983	2,183	2,478	2,623	1,390
36	66,666	68,965	76,335	83,333	46,296	76	1,776	1,977	2,255	2,392	1,256
37	65,789	68,493	75,757	82,644	43,478	77	1,590	1,790	2,052	2,180	1,141
38	65,359	68,027	75,187	81,967	40,816	78	1,424	1,621	1,867	1,987	1,042
39	62,500	65,359	72,463	78,125	38,167	79	1,277	1,469	1,700	1,813	953
40	58,823	61,728	68,027	73,529	35,714	80	1,147	1,333	1,550	1,656	872
41	54,347	57,471	63,291	68,027	33,112	81	1,032	1,212	1,416	1,515	797
42	50,251	53,475	58,479	62,893	30,864	82	932	1,105	1,299	1,390	726
43	45,871	48,780	53,475	57,142	28,571	83	843	1,010	1,194	1,279	660
44	41,841	44,843	49,019	52,356	26,666	84	762	922	1,097	1,174	600
45	37,878	40,816	44,444	47,393	24,630	85	689	841	1,007	1,078	548
46	34,246	37,037	40,322	42,918	22,779	86	623	768	926	991	502
47	30,959	33,670	36,496	38,610	21,097	87	565	701	851	911	462
48	28,248	30,864	33,444	35,335	19,531	88	512	642	783	838	428
49	25,641	28,248	30,487	32,051	18,018	89	472	588	723	773	398
50	23,529	26,041	28,089	29,411	16,666	90	437	542	669	716	371
51	21,276	23,584	25,380	26,595	15,290	91	406	503	622	666	346
52	19,267	21,321	22,935	24,096	13,947	92	379	469	579	620	323
53	17,421	19,305	20,790	21,786	12,722	93	354	438	541	580	301
54	15,847	17,543	18,903	19,801	11,534	94	332	411	507	543	276
55	14,409	15,948	17,182	17,985	10,460	95	311	386	476	510	232
56	13,089	14,492	15,600	16,366	9,478	96	292	361	447	478	211
57	11,876	13,157	14,164	14,858	8,613	97	243	301	372	398	180
58	10,775	11,918	12,836	13,458	7,849	98	230	284	352	376	142
59	9,746	10,787	11,614	12,180	7,127	99	217	269	333	356	102

NOTE: AGE IS ATTAINED AGE.

TABLE C (CONT'D)
TOBACCO USE
FACE AMOUNT PER \$100.00 BASIC ANNUAL PREMIUMS
THE BASIC ANNUAL PREMIUM IS THE ANNUAL PREMIUM FOR THIS PLAN
MINUS THE ANNUAL POLICY FEE OF \$75

AGE	SCHEDULED				MINIMUM	AGE	SCHEDULED				MINIMUM
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS		\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS
20	\$46,082	\$46,296	\$54,054	\$56,497	\$37,037	60	\$5,293	\$5,640	\$6,031	\$6,176	\$4,086
21	46,082	46,296	54,054	56,497	37,037	61	4,780	5,091	5,446	5,577	3,827
22	46,082	46,296	54,054	56,497	37,037	62	4,319	4,599	4,921	5,037	3,553
23	46,082	46,296	54,054	56,497	37,037	63	3,916	4,171	4,464	4,570	3,240
24	45,662	45,871	53,475	55,865	37,037	64	3,553	3,785	4,050	4,145	2,950
25	45,248	45,454	52,910	55,248	37,037	65	3,227	3,438	3,677	3,766	2,681
26	44,642	45,248	52,356	54,644	37,037	66	2,930	3,122	3,340	3,419	2,459
27	44,247	44,843	51,813	54,054	37,037	67	2,661	2,835	3,033	3,105	2,264
28	43,859	44,444	51,282	53,475	37,037	68	2,416	2,573	2,753	2,818	2,112
29	43,859	44,444	51,282	53,475	35,460	69	2,193	2,336	2,500	2,559	1,965
30	43,859	44,444	51,282	53,475	33,783	70	1,994	2,124	2,272	2,326	1,829
31	43,859	44,444	51,282	53,475	32,573	71	1,707	1,860	2,039	2,092	1,679
32	43,859	44,444	51,282	53,475	31,152	72	1,542	1,636	1,836	1,887	1,524
33	43,859	44,444	51,282	53,475	29,850	73	1,381	1,442	1,655	1,704	1,369
34	42,372	43,103	49,504	51,546	28,089	74	1,231	1,273	1,491	1,539	1,225
35	41,152	42,016	47,846	49,751	26,881	75	1,098	1,123	1,343	1,388	1,096
36	40,650	41,841	47,393	49,261	24,875	76	985	996	1,209	1,252	984
37	40,322	41,493	46,948	48,780	22,779	77	890	899	1,088	1,129	889
38	40,000	41,152	46,511	48,309	20,833	78	809	816	979	1,018	808
39	37,878	39,062	44,052	45,662	18,975	79	737	743	882	918	736
40	35,714	36,900	41,322	42,918	17,271	80	670	675	796	830	670
41	33,112	34,364	38,461	39,682	15,527	81	609	613	720	751	608
42	30,395	31,545	35,087	36,231	14,184	82	551	559	652	682	550
43	27,855	29,069	32,154	33,222	13,020	83	497	514	593	621	497
44	25,188	26,385	29,069	29,940	12,033	84	446	472	538	564	446
45	22,883	23,980	26,315	27,100	11,160	85	404	433	488	513	404
46	20,661	21,739	23,752	24,390	10,384	86	365	398	444	467	365
47	18,691	19,723	21,413	22,026	9,661	87	335	366	403	425	334
48	17,006	17,985	19,455	19,960	9,025	88	305	337	367	387	305
49	15,455	16,420	17,667	18,083	8,417	89	282	311	335	354	282
50	14,144	15,060	16,129	16,501	7,818	90	259	288	307	324	259
51	12,787	13,623	14,577	14,925	7,304	91	239	267	282	298	238
52	11,560	12,315	13,175	13,495	6,798	92	219	249	260	275	219
53	10,493	11,173	11,961	12,239	6,289	93	201	233	240	255	201
54	9,523	10,141	10,857	11,111	5,844	94	183	218	223	237	183
55	8,658	9,225	9,861	10,101	5,440	95	175	205	209	222	175
56	7,855	8,368	8,952	9,165	5,089	96	167	192	196	209	167
57	7,137	7,598	8,130	8,326	4,791	97	151	167	171	181	151
58	6,468	6,891	7,369	7,547	4,545	98	134	158	161	171	128
59	5,854	6,238	6,671	6,830	4,315	99	127	149	153	162	102

NOTE: AGE IS ATTAINED AGE.

RIDERS - The continuation in the new plan of any benefits provided by Rider(s) attached to this Policy which are not exchanged will be subject to the provision for continuation, if any, in each Rider. The premium for any Rider continued after exchange will be added to the premium for the new plan.

RIDER EXCHANGE AT DEATH OF INSURED - If any Insured Spouse Riders attached to this Policy are in force upon the Insured's death, they may be exchanged for a new policy in accordance with the Exchange provision in each rider except that: (a) the exchange must be made within 30 days after the Insured's death; and (b) the effective date of the new policy will be the day We receive written request for exchange. If the Insured Spouse dies before exchange takes effect and within 30 days after the Insured's death, We will pay to the Beneficiary of the Rider the insurance in force under the Rider at the Insured's death, less any overdue premium for the Rider.

PART 6
SETTLEMENT OPTIONS

We will pay any death proceeds in a lump sum, unless one of the settlement options below is selected. If no option has been selected as of the death of the Insured, the Beneficiary may select one of the options below. If the Beneficiary is not an individual receiving payment in his or her own right, settlement options are available only with Our consent. Any election of an option must be by Notice to Us.

A settlement option will be available only if the proceeds are at least \$10,000 and are also sufficient to provide a periodic installment or interest payment of at least \$25.

OPTION A. INSTALLMENTS FOR A FIXED PERIOD - The proceeds will be paid in equal monthly installments for a fixed period, not to exceed 25 years. The frequency of the installments and the fixed period will be as selected. The amount of each installment will be determined from Table 1 on Page 11.

OPTION B. MONTHLY INSTALLMENTS FOR A GUARANTEED MINIMUM PERIOD AND, THEREAFTER, FOR LIFE - The proceeds will be paid in equal monthly installments for a guaranteed minimum period of 10, 15 or 20 years and, thereafter, as long as the Beneficiary lives. The amount of each monthly installment will be determined from Table 2 below, based on the period selected and the age at the nearest birthday of the Beneficiary on the date the first installment is payable. If a monthly payment for a specific age shown in Table 2 is the same for more than one period, payment will be made for the longest period.

OPTION C. PROCEEDS HELD AND AVAILABLE FOR WITHDRAWAL - The proceeds will be held by Us subject to withdrawal in whole or in part at any time. Interest on any unpaid balance will be accumulated or paid annually, semiannually, quarterly or monthly, as selected.

OPTION D. INSTALLMENTS OF A SELECTED AMOUNT - The proceeds will be paid in equal monthly installments for the amount selected until the proceeds and interest are fully paid.

The first installment under Option A, B and D is payable on the date the option becomes effective. The interest rate for Option A, B, and D is 2-1/2% annually. The interest rate for Option C is 2% annually. We may from time to time credit or pay excess interest under any option. The basis of values for Option B is the 1996 US Annuity 2000 Mortality Table (20% male and 80% female). Any proceeds being held by Us under any option will be commingled with Our general funds.

When the Beneficiary under any of the options dies, unless otherwise provided, We will pay in one lump sum to such Beneficiary's estate:

- (1) any unpaid sum left under Options C or D, plus any unpaid interest under that option; or
- (2) the present value of any remaining payments under Option A; or
- (3) the present value of any remaining payments for the minimum fixed period under Option B.

EQUAL MONTHLY INSTALLMENTS UNDER OPTION A AND B FOR EACH \$1,000 PAYABLE

TABLE 1+		TABLE 2											
Fixed Period in Years	Monthly Amount	Age++	Guaranteed Minimum Period in Years			Age++	Guaranteed Minimum Period in Years			Age++	Guaranteed Minimum Period in Years		
			10	15	20		10	15	20		10	15	20
1	\$84.28	*6	\$2.42	\$2.42	\$2.42	31	\$2.83	\$2.83	\$2.83	56	\$3.98	\$3.93	\$3.86
2	42.66	7	2.43	2.43	2.43	32	2.86	2.86	2.85	57	4.06	4.01	3.92
3	28.79	8	2.45	2.44	2.44	33	2.88	2.88	2.88	58	4.14	4.08	3.99
4	21.86	9	2.46	2.46	2.45	34	2.91	2.91	2.90	59	4.23	4.16	4.06
5	17.70	10	2.47	2.47	2.47	35	2.94	2.94	2.93	60	4.33	4.25	4.13
6	14.93	11	2.48	2.48	2.48	36	2.97	2.97	2.96	61	4.42	4.34	4.20
7	12.95	12	2.49	2.49	2.49	37	3.00	3.00	2.99	62	4.53	4.43	4.27
8	11.47	13	2.51	2.50	2.50	38	3.04	3.03	3.02	63	4.64	4.52	4.34
9	10.32	14	2.52	2.52	2.52	39	3.07	3.07	3.06	64	4.76	4.62	4.41
10	9.39	15	2.53	2.53	2.53	40	3.11	3.10	3.09	65	4.88	4.72	4.49
11	8.64	16	2.55	2.55	2.54	41	3.15	3.14	3.13	66	5.01	4.83	4.56
12	8.02	17	2.56	2.56	2.56	42	3.19	3.18	3.16	67	5.14	4.93	4.63
13	7.49	18	2.58	2.57	2.57	43	3.23	3.22	3.20	68	5.29	5.04	4.70
14	7.03	19	2.59	2.59	2.59	44	3.27	3.26	3.24	69	5.44	5.15	4.76
15	6.64	20	2.61	2.61	2.60	45	3.31	3.30	3.28	70	5.59	5.26	4.83
16	6.30	21	2.62	2.62	2.62	46	3.36	3.35	3.33	71	5.76	5.38	4.88
17	6.00	22	2.64	2.64	2.64	47	3.41	3.40	3.37	72	5.93	5.49	4.94
18	5.73	23	2.66	2.66	2.66	48	3.46	3.45	3.42	73	6.11	5.60	4.99
19	5.49	24	2.68	2.68	2.68	49	3.52	3.50	3.47	74	6.29	5.71	5.04
20	5.27	25	2.70	2.70	2.69	50	3.57	3.55	3.52	75	6.48	5.81	5.08
21	5.08	26	2.72	2.72	2.71	51	3.63	3.61	3.57	76	6.68	5.91	5.11
22	4.90	27	2.74	2.74	2.73	52	3.70	3.67	3.62	77	6.87	6.01	5.14
23	4.74	28	2.76	2.76	2.76	53	3.76	3.73	3.68	78	7.07	6.09	5.17
24	4.60	29	2.78	2.78	2.78	54	3.83	3.79	3.74	79	7.27	6.17	5.19
25	4.46	30	2.81	2.81	2.80	55	3.90	3.86	3.80	**80	7.46	6.25	5.21

+ Multiply the monthly installment found in Table 1 by 2.994 to obtain the quarterly installment; by 5.969 to obtain the semiannual installment; and by 11.865 to obtain the annual installment.

++ The age is the age in years at the nearest birthday of the Beneficiary on the date the first installment is payable.

* And under

** And over

TERM LIFE INSURANCE TO AGE 95

INITIAL SCHEDULED LEVEL PREMIUM PERIOD FOR 15 YEARS

PREMIUMS ARE SUBJECT TO CHANGE

**EXCHANGEABLE AFTER FIVE YEARS TO ANNUAL INCREASING PREMIUM
OR DECREASING TERM INSURANCE TO AGE 100**

NONPARTICIPATING

PRIMERICA LIFE INSURANCE COMPANY

Home Office: Boston, Massachusetts
Executive Offices: 3120 Breckinridge Boulevard, Duluth, Georgia 30099-0001

INSURED TERM INSURANCE RIDER INITIAL SCHEDULED LEVEL PREMIUM PERIOD FOR 15 YEARS PREMIUMS ARE SUBJECT TO CHANGE

We have issued this Rider as a part of the Policy to which it is attached. Any payment under this Rider is subject to the provisions of this Rider and the Policy. In case of conflict between this Rider and the Policy, the provisions of this Rider will control.

This Rider is effective at 12:01 A.M. on the Rider Date of Issue.

BENEFIT

We will pay the Rider Face Amount, in a lump sum, to the Beneficiary of this Rider upon receiving due proof that the Insured died before the Rider Expiry Date and while this Rider was in force.

DEFINITIONS

These are some key words used in this Rider.

BENEFICIARY - The person(s) to whom the rider proceeds are payable at the death of the Insured. This is the person(s) named in the application as the Beneficiary, unless later changed. (See Change of Beneficiary Provision, below)

INSURED - The person whose life the Policy insures and who is named in the Policy and Rider Specifications.

NOTICE TO US - Information We have received which is written, signed by You and acceptable to Us.

PREMIUM CLASS - The risk classification used in determining what premiums You pay.

RIDER ATTAINED AGE - The Insured's Rider Issue Age plus the number of rider years since the Rider Date.

RIDER DATE - The date shown on Rider Page 3 from which rider anniversaries, rider years and rider months are measured.

RIDER DATE OF ISSUE - The date shown on Rider Page 3 on which We issue the Rider to You. This date controls the Incontestability and Suicide Exclusion provisions shown below.

RIDER EXPIRY DATE - The date shown on Rider Page 3. This Rider is not in force on or after this date.

RIDER FACE AMOUNT - The amount of insurance for each rider year which is shown in Table A on Rider Page 3A.

RIDER ISSUE AGE - The Insured's age on the birthday nearest the Rider Date.

WE, OUR or US - Primerica Life Insurance Company.

YOU or YOUR - The Owner of the Policy. Unless You tell Us otherwise, the Owner is the Insured.

GENERAL PROVISIONS

CONSIDERATION - This Rider is issued in consideration of: (1) the application for this Rider, a copy of which is attached to the Policy; and (2) payment of the first premium for this Rider.

PREMIUM PAYMENTS - Premiums for this Rider are payable in addition to, but under the same terms and conditions as, the premiums for the Policy. The premiums shown on Rider Page 3A are for the premium payment option You chose. Modal factors are used to determine the premium payment for all payment options. The modal factors are 0.095 for monthly, 0.265 for quarterly, 0.520 for semiannual, and 1.000 for annual. To calculate the approximate premium for a payment option other than the one You chose: (1) divide the premium shown on Rider Page 3A by the modal factor for that payment option; and (2) multiply the result by the modal factor for the premium payment option You would like to determine. You may change the premium payment option for future premium payments upon acceptable Notice to Us. The premium payment option for this Rider must be the same premium payment option as the Policy. We will provide You with premium rates for other payment options upon written request. Premiums are not due for any period after the Insured's death, the Rider Expiry Date or when this Rider terminates.

PREMIUM CHANGES BY COMPANY - Premiums for this Rider will be the scheduled premiums shown on Rider Pages 3 and 3A, unless changed by Us. We reserve the right to change the scheduled premiums. We will not change them more often than once a year, and in no event will the scheduled premiums be greater than the maximum premiums shown on Rider Page 3A. Any such change will apply uniformly to all riders of this form issued to Insureds having the same Rider Issue Age, duration, Premium Class, year, month, and state of issue; and will be based on future anticipated or emerging experience, including, but not limited to investment earnings, mortality, persistency, taxes and expenses. No change in premiums or Premium Class will occur because of deterioration of the Insured's health or change in occupation.

We will mail written notice to You at least 60 days prior to the date on which a change in Your scheduled premiums will become effective. We will send You new rider specifications pages to reflect any changes in scheduled premiums.

OTHER PREMIUM CHANGES - Changes requested by You and approved by Us to the Face Amount or Premium Class of the Policy or the Face Amount or Premium Class of any Riders may also change Your scheduled premiums.

MISSTATEMENT OF AGE - If the age of the Insured has been misstated in the application, We will be liable only for the amount of insurance the premiums paid would have purchased for the correct age.

INCONTESTABILITY - We will not contest this Rider after it has been in force for two years during the Insured's life. The two years begin on the Rider Date of Issue.

SUICIDE EXCLUSION - If the Insured dies by suicide, while sane or insane, within two years of the Rider Date of Issue, We are only liable for the premiums paid.

REPLACED COVERAGE - If insurance coverage (excluding group coverage) is to be replaced, as shown in the application, and has terminated: (a) prior to the Insured's death, including death by suicide; and (b) between 60 days before and 60 days after the Rider Date of Issue, We will not contest the amount of the replaced coverage that would not have been contestable had it not been replaced. If it is not possible to terminate any coverage to be replaced because of its provisions within 60 days after the Rider Date of Issue, such 60-day period will be extended to the earliest possible date for the coverage to be terminated under its provisions. For example, You are insured under another company's plan for \$100,000 and that plan has been in force two years. If this Rider replaced the other company's plan, We would not contest this Rider for up to \$100,000. We would however, be able to contest any amount over \$100,000. You will not lose the time accrued for the amount of insurance replaced due to this Rider's Incontestability and Suicide Exclusion provisions.

NONPARTICIPATION - This Rider does not participate in Our profits or surplus.

CHANGE OF BENEFICIARY - You can change a Beneficiary of this Rider by Notice to Us. You can only change a Beneficiary while the Insured is alive. A Beneficiary designated irrevocably on Our records may not be changed except with the written consent of that Beneficiary. A Beneficiary change will take effect on the date You signed the Notice to Us. If the Insured died before We receive this Notice, the change is effective, subject to any prior payment of proceeds.

TERMINATION - This Rider shall terminate and no longer be in force: (1) if any premium remains unpaid after the end of the grace period; (2) if the Policy terminates or is continued under a nonforfeiture provision, if any; (3) if this Rider is exchanged to a new policy; (4) on and after the Rider Expiry Date; or (5) on and after the date You cancel it.

CANCELLATION - You may cancel this Rider at any time by sending written Notice to Us. Your Rider will be canceled as of the date We receive the Notice, or, if stated in the Notice, as of a later date. If this Rider is canceled before the Rider Expiry Date and premiums have been paid in advance, We will refund any unearned portion of the premiums paid beyond the end of the rider month in which cancellation occurred.

EXCHANGE PROVISION - You may exchange this Rider at any time after it has been in force for five years to the Annual Increasing Premium Term Insurance to Age 100 Plan described in the Policy; or the Decreasing Term Insurance to Age 100 Plan described in the Policy; or any other plan of insurance then available for exchange, as periodically determined by Us. The new plan will be issued at Our premium rates for that plan for the Rider Attained Age on the exchange date based on the same Premium Class shown on Rider Page 3. We will not require evidence of insurability. The new plan will take effect on the exchange date and this Rider will terminate. However, the new plan's Incontestability and Suicide Exclusion provisions will be controlled by this Rider Date of Issue. We will issue either revised specifications pages or a new policy.

The following conditions are necessary for exchange: (1) We receive Notice to Us requesting an exchange; (2) the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Rider on the exchange date; (3) the required premium is paid within 31 days after the exchange date; (4) the Insured is alive; (5) this Rider is in force on the exchange date; (6) premiums for Your current Rider are not being waived; and (7) the exchange plan will be issued at Our premium rates for that plan for the Insured's Attained Age on the exchange date based on the same Premium Class shown on Rider Page 3, provided the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Rider on the exchange date.

EXCHANGE AT POLICY EXPIRY - If this Rider is in force at expiry of the Policy, it may be exchanged for a policy in accordance with the Exchange Provision except that: (a) the exchange must be made within 30 days after the Policy expiry date; and (b) the effective date of the policy will be the day We receive written request for the exchange.

Signed on the Rider Date of Issue at Our Executive Offices.


Secretary


President

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RIDER SPECIFICATIONS (CONT'D)

TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01	35	\$584.00	\$584.00	\$200,000.00]
[02	36	\$584.00	\$700.00	\$200,000.00]
[03	37	\$584.00	\$700.00	\$200,000.00]
[04	38	\$584.00	\$700.00	\$200,000.00]
[05	39	\$584.00	\$700.00	\$200,000.00]
[06	40	\$584.00	\$700.00	\$200,000.00]
[07	41	\$584.00	\$700.00	\$200,000.00]
[08	42	\$584.00	\$700.00	\$200,000.00]
[09	43	\$584.00	\$700.00	\$200,000.00]
[10	44	\$584.00	\$700.00	\$200,000.00]
[11	45	\$584.00	\$700.00	\$200,000.00]
[12	46	\$584.00	\$700.00	\$200,000.00]
[13	47	\$584.00	\$700.00	\$200,000.00]
[14	48	\$584.00	\$700.00	\$200,000.00]
[15	49	\$584.00	\$700.00	\$200,000.00]
[16	50	\$1,666.00	\$2,946.00	\$200,000.00]
[17	51	\$1,666.00	\$2,946.00	\$200,000.00]
[18	52	\$1,666.00	\$2,946.00	\$200,000.00]
[19	53	\$1,666.00	\$2,946.00	\$200,000.00]
[20	54	\$1,666.00	\$2,946.00	\$200,000.00]
[21	55	\$2,704.00	\$4,138.00	\$200,000.00]
[22	56	\$2,704.00	\$4,138.00	\$200,000.00]
[23	57	\$2,704.00	\$4,138.00	\$200,000.00]
[24	58	\$2,704.00	\$4,138.00	\$200,000.00]
[25	59	\$2,704.00	\$4,138.00	\$200,000.00]
[26	60	\$4,454.00	\$5,684.00	\$200,000.00]
[27	61	\$4,454.00	\$5,684.00	\$200,000.00]
[28	62	\$4,454.00	\$5,684.00	\$200,000.00]
[29	63	\$4,454.00	\$5,684.00	\$200,000.00]
[30	64	\$4,454.00	\$5,684.00	\$200,000.00]
[31	65	\$7,220.00	\$8,724.00	\$200,000.00]
[32	66	\$7,220.00	\$8,724.00	\$200,000.00]
[33	67	\$7,220.00	\$8,724.00	\$200,000.00]
[34	68	\$7,220.00	\$8,724.00	\$200,000.00]
[35	69	\$7,220.00	\$8,724.00	\$200,000.00]
[36	70	\$9,416.00	\$10,932.00	\$200,000.00]
[37	71	\$10,750.00	\$11,910.00	\$200,000.00]
[38	72	\$12,222.00	\$13,122.00	\$200,000.00]
[39	73	\$13,866.00	\$14,600.00	\$200,000.00]
[40	74	\$15,710.00	\$16,326.00	\$200,000.00]

*Scheduled premiums may change, but they will not increase above the maximum premiums. See Premium Changes by Company provision.

RIDER SPECIFICATIONS (CONT'D)

TABLE A (CONT'D)
 [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41	75	\$17,798.00	\$18,242.00	\$200,000.00]
[42	76	\$20,066.00	\$20,308.00	\$200,000.00]
[43	77	\$22,232.00	\$22,474.00	\$200,000.00]
[44	78	\$24,490.00	\$24,732.00	\$200,000.00]
[45	79	\$26,906.00	\$27,148.00	\$200,000.00]
[46	80	\$29,586.00	\$29,828.00	\$200,000.00]
[47	81	\$32,612.00	\$32,854.00	\$200,000.00]
[48	82	\$35,766.00	\$36,312.00	\$200,000.00]
[49	83	\$38,892.00	\$40,236.00	\$200,000.00]
[50	84	\$42,336.00	\$44,842.00	\$200,000.00]
[51	85	\$46,098.00	\$49,446.00	\$200,000.00]
[52	86	\$50,180.00	\$54,676.00	\$200,000.00]
[53	87	\$54,580.00	\$59,714.00	\$200,000.00]
[54	88	\$59,300.00	\$65,408.00	\$200,000.00]
[55	89	\$64,266.00	\$70,822.00	\$200,000.00]
[56	90	\$69,392.00	\$77,056.00	\$200,000.00]
[57	91	\$74,676.00	\$83,702.00	\$200,000.00]
[58	92	\$80,124.00	\$90,954.00	\$200,000.00]
[59	93	\$85,728.00	\$99,170.00	\$200,000.00]
[60	94	\$91,492.00	\$109,246.00	\$200,000.00]

*Scheduled premiums may change, but they will not increase above the maximum premiums. See Premium Changes by Company provision.

PRIMERICA LIFE INSURANCE COMPANY

Home Office: Boston, Massachusetts
Executive Offices: 3120 Breckinridge Boulevard, Duluth, Georgia 30099-0001

SPOUSE TERM INSURANCE RIDER **INITIAL SCHEDULED LEVEL PREMIUM PERIOD FOR 15 YEARS** **PREMIUMS ARE SUBJECT TO CHANGE**

We have issued this Rider as a part of the Policy to which it is attached. Any payment under this Rider is subject to the provisions of this Rider and the Policy. In case of conflict between this Rider and the Policy, the provisions of this Rider will control.

This Rider is effective at 12:01 A.M. on the Rider Date of Issue.

BENEFIT

We will pay the Rider Face Amount, in a lump sum, to the Beneficiary of this Rider upon receiving due proof that the Insured Spouse died before the Rider Expiry Date and while this Rider was in force.

DEFINITIONS

These are some key words used in this Rider.

BENEFICIARY - The person(s) to whom the rider proceeds are payable upon the death of the Insured Spouse. Unless otherwise stated in the application or later changed (See Change of Beneficiary Provision, below), the Beneficiary of this Rider will be the Insured, if living; otherwise the estate of the Insured Spouse. If the Beneficiary is a partnership, We will pay the rider proceeds to the partnership as it is constituted at the time of the Insured Spouse's death.

INSURED - The person whose life the Policy insures and who is named in the Policy Specifications.

INSURED SPOUSE - The person whose life this Rider insures. This person is the spouse of the Insured and is named in the Rider Specifications.

NOTICE TO US - Information We have received which is written, signed by You and acceptable to Us.

PREMIUM CLASS - The risk classification used in determining what premiums You pay.

RIDER ATTAINED AGE - The Insured Spouse's Rider Issue Age plus the number of rider years since the Rider Date.

RIDER DATE - The date shown on Rider Page 3 from which rider anniversaries, rider years and rider months are measured.

RIDER DATE OF ISSUE - The date shown on Rider Page 3 on which We issue the Rider to You. This date controls the Incontestability and Suicide Exclusion provisions shown below.

RIDER EXPIRY DATE - The date shown on Rider Page 3. This Rider is not in force on or after this date.

RIDER FACE AMOUNT - The amount of insurance for each rider year which is shown in Table A on Rider Page 3A.

RIDER ISSUE AGE - The Insured Spouse's age on the birthday nearest the Rider Date.

WE, OUR or US - Primerica Life Insurance Company.

YOU or YOUR - The Owner of the Policy. Unless You tell Us otherwise, the Owner is the Insured.

GENERAL PROVISIONS

CONSIDERATION - This Rider is issued in consideration of: (1) the application for this Rider, a copy of which is attached to the Policy; and (2) payment of the first premium for this Rider.

PREMIUM PAYMENTS - Premiums for this Rider are payable in addition to, but under the same terms and conditions as, the premiums for the Policy. The premiums shown on Rider Page 3A are for the premium payment option You chose. Modal factors are used to determine the premium payment for all payment options. The modal factors are 0.095 for monthly, 0.265 for quarterly, 0.520 for semiannual, and 1.000 for annual. To calculate the approximate premium for a payment option other than the one You chose: (1) divide the premium shown on Rider Page 3A by the modal factor for that payment option; and (2) multiply the result by the modal factor for the premium payment option You would like to determine. You may change the premium payment option for future premium payments upon acceptable Notice to Us. The premium payment option for this Rider must be the same premium payment option as the Policy. We will provide You with premium rates for other payment options upon written request. Premiums are not due for any period after the Insured Spouse's death, the Rider Expiry Date or when this Rider terminates.

PREMIUM CHANGES BY COMPANY - Premiums for this Rider will be the scheduled premiums shown on Rider Pages 3 and 3A, unless changed by Us. We reserve the right to change the scheduled premiums. We will not change them more often than once a year, and in no event will the scheduled premiums be greater than the maximum premiums shown on Rider Page 3A. Any such change will apply uniformly to all riders of this form issued to Insured Spouses having the same Rider Issue Age, duration, Premium Class, year, month, and state of issue; and will be based on future anticipated or emerging experience, including, but not limited to investment earnings, mortality, persistency, taxes and expenses. No change in premiums or Premium Class will occur because of deterioration of the Insured Spouse's health or change in occupation.

We will mail written notice to You at least 60 days prior to the date on which a change in Your scheduled premiums will become effective. We will send You new rider specifications pages to reflect any changes in scheduled premiums.

OTHER PREMIUM CHANGES - Changes requested by You and approved by Us to the Face Amount or Premium Class of the Policy or the Face Amount or Premium Class of any Riders may also change Your scheduled premiums.

MISSTATEMENT OF AGE - If the age of the Insured Spouse has been misstated in the application, We will be liable only for the amount of insurance the premiums paid would have purchased for the correct age.

INCONTESTABILITY - We will not contest this Rider after it has been in force for two years during the Insured Spouse's life. The two years begin on the Rider Date of Issue.

SUICIDE EXCLUSION - If the Insured Spouse dies by suicide, while sane or insane, within two years of the Rider Date of Issue, We are only liable for the premiums paid.

REPLACED COVERAGE - If insurance coverage (excluding group coverage) is to be replaced, as shown in the application, and has terminated: (a) prior to the Insured Spouse's death, including death by suicide; and (b) between 60 days before and 60 days after the Rider Date of Issue, We will not contest the amount of the replaced coverage that would not have been contestable had it not been replaced. If it is not possible to terminate any coverage to be replaced because of its provisions within 60 days after the Rider Date of Issue, such 60-day period will be extended to the earliest possible date for the coverage to be terminated under its provisions. For example, the Insured Spouse is insured under another company's plan for \$100,000 and that plan has been in force two years. If this Rider replaced the other company's plan, We would not contest this Rider for up to \$100,000. We would however, be able to contest any amount over \$100,000. You will not lose the time accrued for the amount of insurance replaced due to this Rider's Incontestability and Suicide Exclusion provisions.

NONPARTICIPATION - This Rider does not participate in Our profits or surplus.

PAYMENT OF PROCEEDS - Due proof of the death of the Insured Spouse must be sent to Us at Our Executive Offices. We must receive a certified death certificate, completed claim forms and a valid authorization for Us to obtain all medical and other records concerning the Insured Spouse. Death proceeds equal: (1) the Rider Face Amount; minus (2) any overdue premium for the Policy and any Riders if the Insured Spouse's death occurs during a grace period.

CHANGE OF BENEFICIARY - You can change a Beneficiary of this Rider by Notice to Us. You can only change a Beneficiary while the Insured Spouse is alive. A Beneficiary designated irrevocably on Our records may not be changed except with the written consent of that Beneficiary. A Beneficiary change will take effect on the date You signed the Notice to Us. If the Insured Spouse died before We receive this Notice, the change is effective, subject to any prior payment of proceeds.

TERMINATION - This Rider shall terminate and no longer be in force: (1) if any premium remains unpaid after the end of the grace period; (2) if the Policy terminates (subject to the Exchange at Death of Insured Provision) or is continued under a nonforfeiture provision, if any; (3) if this Rider is exchanged to a new policy; (4) on and after the Rider Expiry Date; or (5) on and after the date You cancel it.

CANCELLATION - You may cancel this Rider at any time by sending written Notice to Us. Your Rider will be canceled as of the date We receive the Notice, or, if stated in the Notice, as of a later date. If this Rider is canceled before the Rider Expiry Date and premiums have been paid in advance, We will refund any unearned portion of the premiums paid beyond the end of the rider month in which cancellation occurred.

EXCHANGE PROVISION - You may exchange this Rider at any time after it has been in force for five years to the Annual Increasing Premium Term Insurance to Age 100 Plan described in the Policy; or the Decreasing Term Insurance to Age 100 Plan described in the Policy; or any other plan of insurance then available for exchange, as periodically determined by Us. The new plan will be issued at Our premium rates for that plan for the Insured Spouse's Rider Attained Age on the exchange date based on the same Premium Class shown on Rider Page 3. We will not require evidence of insurability. The new plan will take effect on the exchange date and this Rider will terminate. However, the new plan's Incontestability and Suicide Exclusion provisions will be controlled by this Rider Date of Issue. We will issue either revised specifications pages or a new policy.

The following conditions are necessary for exchange: (1) We receive Notice to Us requesting an exchange; (2) the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Rider on the exchange date; (3) the required premium is paid within 31 days after the exchange date; (4) the Insured Spouse is alive; (5) this Rider is in force on the exchange date; (6) premiums for Your current Rider are not being waived; and (7) the exchange plan will be issued at Our premium rates for that plan for the Insured Spouse's Attained Age on the exchange date based on the same Premium Class shown on Rider Page 3, provided the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Rider on the exchange date.

EXCHANGE AT DEATH OF INSURED - If this Rider is in force at the Insured's death, it may be exchanged for a new policy in accordance with the Exchange Provision except that: (a) the exchange must be made within 30 days after the Insured's death; and (b) the effective date of the new policy will be the day We receive written request for exchange. If the Insured Spouse dies before exchange takes effect and within 30 days after the Insured's death, We will pay to the Beneficiary of this Rider the insurance in force under this Rider at the Insured's death, less any overdue premium for this Rider.

EXCHANGE AT POLICY EXPIRY - If this Rider is in force at expiry of the Policy, it may be exchanged for a policy in accordance with the Exchange Provision except that: (a) the exchange must be made within 30 days after the Policy expiry date; and (b) the effective date of the policy will be the day We receive written request for the exchange.

Signed on the Rider Date of Issue at Our Executive Offices.



Secretary



President

RIDER SPECIFICATIONS

POLICY NUMBER: [04SPECIMEN] INSURED SPOUSE: [JANE DOE]
 RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [DECEMBER 01, 2009]
 RIDER FACE
 AMOUNT: [\$200,000] RIDER DATE: [DECEMBER 01, 2009]
 PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [DECEMBER 01, 2069]
 [TOBACCO USE]

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-15
C4BS15	SPOUSE TERM INSURANCE RIDER	[\$200,000]	[\$584.00]

*All premiums for the premium payment option You chose are shown on Rider Page 3A and explained in the Premium Changes by Company provision.

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RIDER SPECIFICATIONS (CONT'D)

TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01	35	\$584.00	\$584.00	\$200,000.00]
[02	36	\$584.00	\$700.00	\$200,000.00]
[03	37	\$584.00	\$700.00	\$200,000.00]
[04	38	\$584.00	\$700.00	\$200,000.00]
[05	39	\$584.00	\$700.00	\$200,000.00]
[06	40	\$584.00	\$700.00	\$200,000.00]
[07	41	\$584.00	\$700.00	\$200,000.00]
[08	42	\$584.00	\$700.00	\$200,000.00]
[09	43	\$584.00	\$700.00	\$200,000.00]
[10	44	\$584.00	\$700.00	\$200,000.00]
[11	45	\$584.00	\$700.00	\$200,000.00]
[12	46	\$584.00	\$700.00	\$200,000.00]
[13	47	\$584.00	\$700.00	\$200,000.00]
[14	48	\$584.00	\$700.00	\$200,000.00]
[15	49	\$584.00	\$700.00	\$200,000.00]
[16	50	\$1,666.00	\$2,946.00	\$200,000.00]
[17	51	\$1,666.00	\$2,946.00	\$200,000.00]
[18	52	\$1,666.00	\$2,946.00	\$200,000.00]
[19	53	\$1,666.00	\$2,946.00	\$200,000.00]
[20	54	\$1,666.00	\$2,946.00	\$200,000.00]
[21	55	\$2,704.00	\$4,138.00	\$200,000.00]
[22	56	\$2,704.00	\$4,138.00	\$200,000.00]
[23	57	\$2,704.00	\$4,138.00	\$200,000.00]
[24	58	\$2,704.00	\$4,138.00	\$200,000.00]
[25	59	\$2,704.00	\$4,138.00	\$200,000.00]
[26	60	\$4,454.00	\$5,684.00	\$200,000.00]
[27	61	\$4,454.00	\$5,684.00	\$200,000.00]
[28	62	\$4,454.00	\$5,684.00	\$200,000.00]
[29	63	\$4,454.00	\$5,684.00	\$200,000.00]
[30	64	\$4,454.00	\$5,684.00	\$200,000.00]
[31	65	\$7,220.00	\$8,724.00	\$200,000.00]
[32	66	\$7,220.00	\$8,724.00	\$200,000.00]
[33	67	\$7,220.00	\$8,724.00	\$200,000.00]
[34	68	\$7,220.00	\$8,724.00	\$200,000.00]
[35	69	\$7,220.00	\$8,724.00	\$200,000.00]
[36	70	\$9,416.00	\$10,932.00	\$200,000.00]
[37	71	\$10,750.00	\$11,910.00	\$200,000.00]
[38	72	\$12,222.00	\$13,122.00	\$200,000.00]
[39	73	\$13,866.00	\$14,600.00	\$200,000.00]
[40	74	\$15,710.00	\$16,326.00	\$200,000.00]

*Scheduled premiums may change, but they will not increase above the maximum premiums. See Premium Changes by Company provision.

RIDER SPECIFICATIONS (CONT'D)

TABLE A (CONT'D)
 [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41	75	\$17,798.00	\$18,242.00	\$200,000.00]
[42	76	\$20,066.00	\$20,308.00	\$200,000.00]
[43	77	\$22,232.00	\$22,474.00	\$200,000.00]
[44	78	\$24,490.00	\$24,732.00	\$200,000.00]
[45	79	\$26,906.00	\$27,148.00	\$200,000.00]
[46	80	\$29,586.00	\$29,828.00	\$200,000.00]
[47	81	\$32,612.00	\$32,854.00	\$200,000.00]
[48	82	\$35,766.00	\$36,312.00	\$200,000.00]
[49	83	\$38,892.00	\$40,236.00	\$200,000.00]
[50	84	\$42,336.00	\$44,842.00	\$200,000.00]
[51	85	\$46,098.00	\$49,446.00	\$200,000.00]
[52	86	\$50,180.00	\$54,676.00	\$200,000.00]
[53	87	\$54,580.00	\$59,714.00	\$200,000.00]
[54	88	\$59,300.00	\$65,408.00	\$200,000.00]
[55	89	\$64,266.00	\$70,822.00	\$200,000.00]
[56	90	\$69,392.00	\$77,056.00	\$200,000.00]
[57	91	\$74,676.00	\$83,702.00	\$200,000.00]
[58	92	\$80,124.00	\$90,954.00	\$200,000.00]
[59	93	\$85,728.00	\$99,170.00	\$200,000.00]
[60	94	\$91,492.00	\$109,246.00	\$200,000.00]

*Scheduled premiums may change, but they will not increase above the maximum premiums. See Premium Changes by Company provision.

We will pay the Face Amount, in a lump sum, to the Beneficiary upon receiving due proof that the Insured died before the Expiry Date and while this Policy was in force. This agreement is subject to the provisions on the following pages, which constitute the Policy.

RIGHT TO RETURN POLICY: You may return this Policy to Us for any reason within 20 days after You receive it. If returned, it will be considered void from the beginning. Any premium paid will be refunded.

This Policy is effective at 12:01 A.M. on the Date of Issue.

Signed on the Date of Issue at Our Executive Offices.



Secretary



President

TERM LIFE INSURANCE TO AGE 95

INITIAL SCHEDULED LEVEL PREMIUM PERIOD FOR 20 YEARS

PREMIUMS ARE SUBJECT TO CHANGE

**EXCHANGEABLE AFTER FIVE YEARS TO ANNUAL INCREASING PREMIUM
OR DECREASING TERM INSURANCE TO AGE 100**

NONPARTICIPATING

Primerica Life Insurance Company
(A Stock Company)
Home Office: Boston, Massachusetts

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POLICY SPECIFICATIONS (CONT'D)

TABLE A
 [ANNUAL] PREMIUMS FOR BASIC POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[01	35	\$801.00	\$801.00	\$200,000.00]
[02	36	\$801.00	\$929.00	\$200,000.00]
[03	37	\$801.00	\$929.00	\$200,000.00]
[04	38	\$801.00	\$929.00	\$200,000.00]
[05	39	\$801.00	\$929.00	\$200,000.00]
[06	40	\$801.00	\$929.00	\$200,000.00]
[07	41	\$801.00	\$929.00	\$200,000.00]
[08	42	\$801.00	\$929.00	\$200,000.00]
[09	43	\$801.00	\$929.00	\$200,000.00]
[10	44	\$801.00	\$929.00	\$200,000.00]
[11	45	\$801.00	\$929.00	\$200,000.00]
[12	46	\$801.00	\$929.00	\$200,000.00]
[13	47	\$801.00	\$929.00	\$200,000.00]
[14	48	\$801.00	\$929.00	\$200,000.00]
[15	49	\$801.00	\$929.00	\$200,000.00]
[16	50	\$801.00	\$929.00	\$200,000.00]
[17	51	\$801.00	\$929.00	\$200,000.00]
[18	52	\$801.00	\$929.00	\$200,000.00]
[19	53	\$801.00	\$929.00	\$200,000.00]
[20	54	\$801.00	\$929.00	\$200,000.00]
[21	55	\$2,779.00	\$4,213.00	\$200,000.00]
[22	56	\$2,779.00	\$4,213.00	\$200,000.00]
[23	57	\$2,779.00	\$4,213.00	\$200,000.00]
[24	58	\$2,779.00	\$4,213.00	\$200,000.00]
[25	59	\$2,779.00	\$4,213.00	\$200,000.00]
[26	60	\$4,529.00	\$5,759.00	\$200,000.00]
[27	61	\$4,529.00	\$5,759.00	\$200,000.00]
[28	62	\$4,529.00	\$5,759.00	\$200,000.00]
[29	63	\$4,529.00	\$5,759.00	\$200,000.00]
[30	64	\$4,529.00	\$5,759.00	\$200,000.00]
[31	65	\$7,295.00	\$8,799.00	\$200,000.00]
[32	66	\$7,295.00	\$8,799.00	\$200,000.00]
[33	67	\$7,295.00	\$8,799.00	\$200,000.00]
[34	68	\$7,295.00	\$8,799.00	\$200,000.00]
[35	69	\$7,295.00	\$8,799.00	\$200,000.00]
[36	70	\$9,491.00	\$11,007.00	\$200,000.00]
[37	71	\$10,825.00	\$11,985.00	\$200,000.00]
[38	72	\$12,297.00	\$13,197.00	\$200,000.00]
[39	73	\$13,941.00	\$14,675.00	\$200,000.00]
[40	74	\$15,785.00	\$16,401.00	\$200,000.00]

*Scheduled premiums may change, but they will not increase above the maximum premiums. See Part 4, Premium Provisions.

POLICY SPECIFICATIONS (CONT'D)

TABLE A (CONT'D)
 [ANNUAL] PREMIUMS FOR BASIC POLICY CONTINUATION TO EXPIRY DATE

POLICY YEARS	ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	FACE AMOUNT
[41	75	\$17,873.00	\$18,317.00	\$200,000.00]
[42	76	\$20,141.00	\$20,383.00	\$200,000.00]
[43	77	\$22,307.00	\$22,549.00	\$200,000.00]
[44	78	\$24,565.00	\$24,807.00	\$200,000.00]
[45	79	\$26,981.00	\$27,223.00	\$200,000.00]
[46	80	\$29,661.00	\$29,903.00	\$200,000.00]
[47	81	\$32,687.00	\$32,929.00	\$200,000.00]
[48	82	\$35,841.00	\$36,387.00	\$200,000.00]
[49	83	\$38,967.00	\$40,311.00	\$200,000.00]
[50	84	\$42,411.00	\$44,917.00	\$200,000.00]
[51	85	\$46,173.00	\$49,521.00	\$200,000.00]
[52	86	\$50,255.00	\$54,751.00	\$200,000.00]
[53	87	\$54,655.00	\$59,789.00	\$200,000.00]
[54	88	\$59,375.00	\$65,483.00	\$200,000.00]
[55	89	\$64,341.00	\$70,897.00	\$200,000.00]
[56	90	\$69,467.00	\$77,131.00	\$200,000.00]
[57	91	\$74,751.00	\$83,777.00	\$200,000.00]
[58	92	\$80,199.00	\$91,029.00	\$200,000.00]
[59	93	\$85,803.00	\$99,245.00	\$200,000.00]
[60	94	\$91,567.00	\$109,321.00	\$200,000.00]

*Scheduled premiums may change, but they will not increase above the maximum premiums. See Part 4, Premium Provisions.

PART 1 DEFINITIONS

These are some key words used in this Policy.

1. *ATTAINED AGE* - The Issue Age plus the number of policy years since the Policy Date.
2. *BENEFICIARY* - The person(s) to whom the Policy proceeds are payable at the death of the Insured. This is the person(s) named in the application as the Beneficiary, unless later changed (see Part 3).
3. *DATE OF ISSUE* - The date shown on Page 3 on which We issue the Policy to You. This date controls the Incontestability and Suicide Exclusion provisions in Part 2.
4. *EXPIRY DATE* - The date shown on the Policy Specifications. This Policy is not in force on or after this date.
5. *FACE AMOUNT* - The amount of insurance for each policy year which is shown in Table A on Page 3A.
6. *INSURED* - The person whose life the Policy insures and who is named in the Policy Specifications.
7. *ISSUE AGE* - The Insured's age on the birthday nearest the Policy Date.
8. *NOTICE TO US* - Information We have received which is written, signed by You, and acceptable to Us.
9. *POLICY DATE* - The date (shown on Page 3) from which premium due dates, policy anniversaries, policy years and policy months are measured.
10. *PREMIUM CLASS* - The risk classification used in determining what premiums You pay.
11. *WE, OUR or US* - Primerica Life Insurance Company.
12. *YOU or YOUR* - The Owner of the Policy. Unless You tell Us otherwise, the Owner is the Insured.

PART 2 GENERAL PROVISIONS

OWNER OF POLICY - This Policy belongs to You. During the Insured's life, You have all of the rights described in this Policy. If You die, Your rights will pass to the named contingent owner, if any. If there is no named contingent owner, Your rights will pass to the Insured.

THE CONTRACT - This Policy is issued in consideration of the application and payment of the first premium. A copy of the application, including any supplemental applications, is attached and is a part of the Policy. Together, they are the entire contract. All statements in the application, except fraudulent ones, are deemed to be representations and not warranties. No statement will void this Policy or be used in defense of a claim unless: (1) it is contained in a written application; and (2) a copy of that application is attached to this Policy.

DUPLICATE POLICY - You may request a duplicate copy of Your current Policy, which will not contain a copy of the application(s), unless requested by You. A duplicate Policy request should be sent to Us at Our Executive Offices. We will charge a fee for each duplicate Policy request.

WAIVER OR MODIFICATION - Any change to this Policy must be in writing and signed by Our President or Secretary. No agent or any other person can change this Policy or waive any of its provisions on Our behalf.

MISSTATEMENT OF AGE - If the age of the Insured has been misstated in the application, We will be liable only for the amount of insurance the premiums paid would have purchased for the correct age.

INCONTESTABILITY - We will not contest this Policy after it has been in force for two years during the Insured's life. The two years begin on the Date of Issue. This provision does not apply to any rider for disability benefits or additional insurance specifically for accidental death.

SUICIDE EXCLUSION - If the Insured dies by suicide, while sane or insane, within two years of the Date of Issue, We are only liable for the premiums paid.

REPLACED COVERAGE - If insurance coverage (excluding group coverage) is to be replaced, as shown in the application, and has terminated: (a) prior to the Insured's death, including death by suicide; and (b) between 60 days before and 60 days after the Date of Issue of this Policy, We will not contest the amount of the replaced coverage that would not have been contestable had it not been replaced. If it is not possible to terminate any coverage to be replaced because of its provisions within 60 days after the Date of Issue of this Policy, such 60-day period will be extended to the earliest possible date for the coverage to be terminated under its provisions. For example, You are insured under another company's policy for \$100,000 and that policy has been in force two years. If this Policy replaced the other company's policy, We would not contest this Policy for up to \$100,000. We would however, be able to contest any amount over \$100,000. You will not lose the time accrued for the amount of insurance replaced due to this Policy's Incontestability and Suicide Exclusion provisions.

NONPARTICIPATION - This Policy does not participate in Our profits or surplus.

ASSIGNMENT - You may assign Your rights under this Policy. You must give Notice to Us of the assignment. We are not responsible for the validity of any assignment. The interest of any Beneficiary not designated irrevocably will be subject to the rights of any assignee.

PAYMENT OF PROCEEDS - Due proof of the death of the Insured must be sent to Us at Our Executive Offices. We must receive a certified death certificate, completed claim forms and a valid authorization for Us to obtain all medical and other records concerning the Insured. Death proceeds equal: (1) the Face Amount of this Policy as shown in Table A on Page 3A; plus (2) any rider benefits; and minus (3) any overdue premium if death occurs during a grace period. Any interest payable on death proceeds will be paid according to applicable state law.

CANCELLATION - You may cancel Your Policy at any time by sending written Notice to Us. Your Policy will be canceled as of the date We receive the Notice, or, if stated in Your Notice, as of a later date. If this Policy is canceled before the Expiry Date and premiums have been paid in advance, We will refund any unearned portion of the premiums paid beyond the end of the policy month in which cancellation occurred.

PART 3 BENEFICIARY PROVISIONS

BENEFICIARY - The Beneficiary's interest will end if the Beneficiary dies before the Insured. If no primary Beneficiary is living at the Insured's death, the death proceeds will be paid to any contingent Beneficiary. The proceeds will be paid to the Owner if the Insured dies and there is no primary or contingent Beneficiary. Proceeds will be paid to the Insured's estate if there is no living Beneficiary or Owner.

We may rely on a sworn statement by any responsible person to discover the identity or nonexistence of any Beneficiary not identified by name. If a Beneficiary is a partnership, We will pay the proceeds to the partnership as it is constituted at the time of the Insured's death.

CHANGE OF BENEFICIARY - You can change a Beneficiary by Notice to Us. You can only change a Beneficiary while the Insured is alive. A Beneficiary designated irrevocably on Our records may not be changed except with the written consent of that Beneficiary. A Beneficiary change will take effect on the date You signed the Notice to Us. If the Insured died before We receive this Notice, the change is effective, subject to any prior payment of proceeds.

PART 4 PREMIUM PROVISIONS

PREMIUM PAYMENTS - Premiums are payable to Us in advance. The first premium is due on or before delivery of this Policy and may be paid to Us through one of Our agents. Subsequent premiums must be paid to Us at Our Executive Offices and are due at 12, 6, 3 or 1 Policy month intervals, depending on the premium payment option You chose in the application. The premiums shown on Page 3A are for the premium payment option You chose. Modal factors are used to determine the premium payment for all payment options. The modal factors are 0.095 for monthly, 0.265 for quarterly, 0.520 for semiannual, and 1.000 for annual. To calculate the approximate premium for a payment option other than the one You chose: (1) divide the premium shown on Page 3A by the modal factor for that payment option; and (2) multiply the result by the modal factor for the premium payment option You would like to determine. You may change the premium payment option for future premium payments upon acceptable Notice to Us. We will provide You with premium rates for other payment options upon written request. Premiums are not due for any period after the Insured's death or the Expiry Date.

If a part of the total premium is no longer payable under the provisions of a Rider, the total premium will be reduced accordingly.

PREMIUM CHANGES BY COMPANY - Premiums for this Policy will be the scheduled premiums shown on Pages 3 and 3A, unless changed by Us. We reserve the right to change the scheduled premiums. We will not change them more often than once a year, and in no event will the scheduled premiums be greater than the maximum premiums shown on Page 3A. Any such change will apply uniformly to all policies of this form issued to Insureds having the same Issue Age, duration, Premium Class, year, month, and state of issue; and will be based on future anticipated or emerging experience, including, but not limited to investment earnings, mortality, persistency, taxes and expenses. No change in premiums or Premium Class will occur because of deterioration of the Insured's health or change in occupation.

We will mail written notice to You at least 60 days prior to the date on which a change in Your scheduled premiums will become effective. We will send You new policy specifications pages to reflect any changes in scheduled premiums.

OTHER PREMIUM CHANGES - Changes requested by You and approved by Us to the Face Amount or Premium Class of this Policy or the Face Amount or Premium Class of any Riders may also change Your scheduled premiums.

RETURN OF UNEARNED PREMIUM AT DEATH - In the event of the Insured's death, the proceeds payable to the Beneficiary under this Policy shall include premiums paid for any period beyond the end of the Policy month in which death occurred.

GRACE PERIOD - This Policy has a 31 day grace period. This means that, except for the first premium, if a premium is not paid on or before the date it is due, it may be paid during the next 31 days. No interest will be charged for this late payment. During this 31 day period, the Policy will stay in force. If You do not pay the premium by the end of the grace period, this Policy will automatically terminate.

REINSTATEMENT - If this Policy terminates due to unpaid premium, it may be reinstated within three years after the date the first unpaid premium was due, if prior to the Expiry Date.

To reinstate this Policy, We must have evidence of insurability satisfactory to Us for all persons to be covered and payment of all unpaid premiums, plus interest at 6% per year compounded annually. The Policy Date of the reinstated policy will remain the original Policy Date. The reinstated date is the date We approve the reinstatement application.

Another option for reinstating this Policy is by providing evidence of insurability satisfactory to Us for all persons to be covered and payment of one month's premium. The Policy Date of the reinstated policy will be adjusted based on the length of time Your policy was lapsed. Reinstatement in this manner may result in changes in insurance age(s) and premiums may increase. You will be notified by Us if there is a premium increase. The reinstated date is the date We approve the reinstatement application.

The reinstated Policy shall be incontestable to the same extent as indicated in the above Incontestability Provision, from the reinstated date. This means that the two year contestable period will begin anew with the reinstatement.

**PART 5
EXCHANGE PROVISIONS**

EXCHANGE AT ATTAINED AGE - You may exchange this Policy at any time after it has been in force for five years to the Annual Increasing Premium Term Insurance to Age 100 Plan described below; or the Decreasing Term Insurance to Age 100 Plan described below; or any other plan of insurance then available for exchange for this Policy, as periodically determined by Us. We will not require evidence of insurability. The new plan will take effect on the exchange date and this Policy will terminate. However, the new plan's Incontestability and Suicide Exclusion provisions will be controlled by the Date of Issue of this Policy. We will issue either revised policy specifications pages or a new policy.

The following conditions are necessary for exchange: (1) We receive Notice to Us requesting an exchange; (2) the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Policy on the exchange date; (3) the required premium is paid within 31 days after the exchange date; (4) the Insured is alive; (5) this Policy is in force on the exchange date; (6) premiums for Your current Policy are not being waived under any rider attached to this Policy; and (7) the exchange plan will be issued at Our premium rates for that plan for the Insured's Attained Age on the exchange date based on the same Premium Class shown on Page 3, provided the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Policy on the exchange date.

ANNUAL INCREASING PREMIUM TERM INSURANCE TO AGE 100 PLAN - For this plan, the face amount remains level while premiums increase each year with Attained Age. Annual premiums per \$1,000 face amount for this plan are shown below in Table B. We reserve the right to change the scheduled premiums shown in Table B. We will not change the premiums to more than the maximum premiums shown in Table B.

**TABLE B
PREFERRED
ANNUAL EXCHANGE PREMIUMS PER \$1,000 FACE AMOUNT
THE ANNUAL POLICY FEE OF \$75 MUST BE ADDED.**

AGE	SCHEDULED				MAXIMUM	AGE	SCHEDULED				MAXIMUM
	\$149,999 and below	\$150,000 to \$249,999	\$250,000 to \$499,999	\$500,000 and over	ALL FACE AMOUNTS		\$149,999 and below	\$150,000 to \$249,999	\$250,000 to \$499,999	\$500,000 and over	ALL FACE AMOUNTS
20	\$ 1.32	\$ 0.96	\$ 0.86	\$ 0.75	\$ 1.41	60	\$ 11.36	\$ 5.90	\$ 5.47	\$ 5.26	\$ 12.37
21	1.32	0.96	0.86	0.75	1.41	61	12.57	6.53	6.06	5.82	13.64
22	1.32	0.96	0.86	0.75	1.41	62	13.92	7.23	6.71	6.44	15.09
23	1.32	0.96	0.86	0.75	1.41	63	15.35	7.98	7.40	7.11	16.74
24	1.33	0.96	0.86	0.75	1.41	64	16.91	8.79	8.15	7.83	18.61
25	1.35	0.96	0.86	0.76	1.41	65	18.62	9.68	8.98	8.62	20.67
26	1.36	0.97	0.86	0.76	1.41	66	20.51	10.66	9.88	9.49	22.89
27	1.38	0.97	0.87	0.77	1.41	67	22.58	11.74	10.89	10.46	25.30
28	1.39	0.97	0.87	0.77	1.41	68	24.88	12.93	11.99	11.52	27.88
29	1.39	0.97	0.87	0.77	1.41	69	27.40	14.25	13.21	12.69	30.70
30	1.39	0.97	0.87	0.77	1.41	70	30.15	15.68	14.54	13.97	33.88
31	1.39	0.97	0.87	0.77	1.44	71	33.12	17.62	16.24	15.46	38.07
32	1.39	0.97	0.87	0.77	1.47	72	36.29	19.76	18.11	17.08	41.64
33	1.39	0.97	0.87	0.77	1.52	73	40.50	22.12	20.16	18.89	46.41
34	1.44	0.98	0.89	0.79	1.58	74	45.18	24.74	22.44	20.88	51.77
35	1.49	0.98	0.89	0.80	1.65	75	50.41	27.69	24.99	23.10	57.52
36	1.50	0.99	0.89	0.80	1.73	76	56.30	31.01	27.85	25.58	63.65
37	1.52	0.99	0.90	0.81	1.84	77	62.87	34.73	31.04	28.33	70.09
38	1.53	0.99	0.90	0.81	1.96	78	70.19	38.86	34.59	31.38	76.77
39	1.60	1.03	0.93	0.84	2.09	79	78.27	43.46	38.50	34.72	83.86
40	1.70	1.07	0.97	0.88	2.24	80	87.14	48.50	42.80	38.37	91.64
41	1.84	1.14	1.03	0.94	2.42	81	96.82	54.02	47.47	42.33	100.30
42	1.99	1.23	1.12	1.02	2.59	82	107.26	59.97	52.50	46.55	110.08
43	2.18	1.32	1.20	1.10	2.80	83	118.53	66.42	57.92	51.08	121.11
44	2.39	1.41	1.29	1.19	3.00	84	131.10	73.60	63.95	56.11	133.16
45	2.64	1.53	1.40	1.30	3.25	85	144.50	81.56	70.61	61.09	145.96
46	2.92	1.66	1.52	1.42	3.51	86	157.68	90.33	77.94	66.50	159.27
47	3.23	1.80	1.65	1.56	3.80	87	171.23	99.94	85.94	72.33	172.96
48	3.54	1.93	1.78	1.68	4.10	88	184.88	110.41	94.63	78.58	186.75
49	3.90	2.07	1.92	1.83	4.44	89	198.83	121.64	103.94	85.16	200.84
50	4.25	2.21	2.05	1.97	4.80	90	213.26	131.35	112.23	91.96	215.41
51	4.70	2.45	2.27	2.18	5.23	91	228.41	141.35	120.78	98.96	230.72
52	5.19	2.70	2.50	2.40	5.73	92	244.80	151.67	129.59	106.19	247.27
53	5.74	2.98	2.77	2.66	6.29	93	263.08	162.27	138.65	113.61	265.74
54	6.31	3.29	3.05	2.93	6.94	94	286.35	173.19	147.98	121.25	289.24
55	6.94	3.60	3.34	3.21	7.65	95	312.94	184.41	157.57	129.11	315.94
56	7.64	3.97	3.68	3.54	8.44	96	342.06	199.51	170.47	139.68	372.48
57	8.42	4.37	4.05	3.90	9.28	97	410.38	285.17	233.66	186.79	468.79
58	9.28	4.83	4.48	4.30	10.19	98	434.34	353.23	301.82	247.31	644.47
59	10.26	5.34	4.95	4.75	11.22	99	458.86	373.18	318.86	261.27	978.31

NOTE: AGE IS ATTAINED AGE.

**TABLE B (CONT'D)
NON-TOBACCO USE
ANNUAL EXCHANGE PREMIUMS PER \$1,000 FACE AMOUNT
THE ANNUAL POLICY FEE OF \$75 MUST BE ADDED.**

AGE	SCHEDULED					MAXIMUM ALL FACE AMOUNTS	AGE	SCHEDULED					MAXIMUM ALL FACE AMOUNTS
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over				\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over		
20	\$ 1.32	\$ 1.31	\$ 1.17	\$ 1.06	\$ 1.76	60	\$ 11.36	\$ 10.26	\$ 9.53	\$ 9.09	\$ 15.46		
21	1.32	1.31	1.17	1.06	1.76	61	12.57	11.35	10.54	10.06	17.05		
22	1.32	1.31	1.17	1.06	1.76	62	13.92	12.57	11.67	11.14	18.86		
23	1.32	1.31	1.17	1.06	1.76	63	15.35	13.86	12.87	12.28	20.92		
24	1.33	1.32	1.18	1.07	1.76	64	16.91	15.27	14.18	13.53	23.26		
25	1.35	1.33	1.19	1.08	1.76	65	18.62	16.81	15.61	14.89	25.84		
26	1.36	1.34	1.20	1.09	1.76	66	20.51	18.52	17.20	16.41	28.62		
27	1.38	1.35	1.21	1.10	1.76	67	22.58	20.54	18.94	18.07	31.62		
28	1.39	1.36	1.22	1.11	1.76	68	24.88	22.79	20.87	19.90	34.85		
29	1.39	1.36	1.22	1.11	1.76	69	27.40	25.28	22.98	21.92	38.37		
30	1.39	1.36	1.22	1.11	1.76	70	30.15	28.01	25.29	24.12	42.35		
31	1.39	1.36	1.22	1.11	1.80	71	33.12	30.99	27.83	26.50	47.58		
32	1.39	1.36	1.22	1.11	1.83	72	36.29	34.18	30.55	29.03	52.05		
33	1.39	1.36	1.22	1.11	1.90	73	40.50	37.68	33.51	31.78	58.01		
34	1.44	1.41	1.26	1.15	1.97	74	45.18	41.53	36.76	34.79	64.72		
35	1.49	1.44	1.30	1.19	2.07	75	50.41	45.80	40.35	38.12	71.91		
36	1.50	1.45	1.31	1.20	2.16	76	56.30	50.57	44.33	41.80	79.56		
37	1.52	1.46	1.32	1.21	2.30	77	62.87	55.84	48.72	45.86	87.61		
38	1.53	1.47	1.33	1.22	2.45	78	70.19	61.67	53.55	50.31	95.96		
39	1.60	1.53	1.38	1.28	2.62	79	78.27	68.04	58.81	55.14	104.83		
40	1.70	1.62	1.47	1.36	2.80	80	87.14	74.97	64.50	60.36	114.55		
41	1.84	1.74	1.58	1.47	3.02	81	96.82	82.46	70.62	65.97	125.37		
42	1.99	1.87	1.71	1.59	3.24	82	107.26	90.45	76.97	71.90	137.60		
43	2.18	2.05	1.87	1.75	3.50	83	118.53	98.99	83.70	78.18	151.38		
44	2.39	2.23	2.04	1.91	3.75	84	131.10	108.45	91.12	85.11	166.45		
45	2.64	2.45	2.25	2.11	4.06	85	145.00	118.84	99.22	92.68	182.45		
46	2.92	2.70	2.48	2.33	4.39	86	160.26	130.16	107.99	100.87	199.09		
47	3.23	2.97	2.74	2.59	4.74	87	176.98	142.47	117.47	109.73	216.19		
48	3.54	3.24	2.99	2.83	5.12	88	195.16	155.75	127.63	119.21	233.44		
49	3.90	3.54	3.28	3.12	5.55	89	211.51	169.83	138.31	129.20	251.05		
50	4.25	3.84	3.56	3.40	6.00	90	228.38	184.50	149.34	139.50	269.27		
51	4.70	4.24	3.94	3.76	6.54	91	245.77	198.55	160.72	150.13	288.41		
52	5.19	4.69	4.36	4.15	7.17	92	263.70	213.04	172.44	161.08	309.09		
53	5.74	5.18	4.81	4.59	7.86	93	282.15	227.94	184.51	172.35	332.17		
54	6.31	5.70	5.29	5.05	8.67	94	301.11	243.26	196.91	183.93	361.55		
55	6.94	6.27	5.82	5.56	9.56	95	320.62	259.02	209.67	195.85	430.18		
56	7.64	6.90	6.41	6.11	10.55	96	342.06	276.34	223.68	208.94	473.93		
57	8.42	7.60	7.06	6.73	11.61	97	410.38	331.54	268.37	250.68	554.28		
58	9.28	8.39	7.79	7.43	12.74	98	434.34	350.89	284.03	265.31	703.50		
59	10.26	9.27	8.61	8.21	14.03	99	458.86	370.71	300.07	280.29	978.31		

NOTE: AGE IS ATTAINED AGE.

**TOBACCO USE
ANNUAL EXCHANGE PREMIUMS PER \$1,000 FACE AMOUNT
THE ANNUAL POLICY FEE OF \$75 MUST BE ADDED.**

AGE	SCHEDULED					MAXIMUM ALL FACE AMOUNTS	AGE	SCHEDULED					MAXIMUM ALL FACE AMOUNTS
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over				\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over		
20	\$ 2.17	\$ 2.16	\$ 1.85	\$ 1.77	\$ 2.70	40	\$ 2.71	\$ 2.71	\$ 2.42	\$ 2.33	\$ 5.79		
21	2.17	2.16	1.85	1.77	2.70	41	3.02	2.91	2.60	2.52	6.44		
22	2.17	2.16	1.85	1.77	2.70	42	3.29	3.17	2.85	2.76	7.05		
23	2.17	2.16	1.85	1.77	2.70	43	3.59	3.44	3.11	3.01	7.68		
24	2.19	2.18	1.87	1.79	2.70	44	3.97	3.79	3.44	3.34	8.31		
25	2.21	2.20	1.89	1.81	2.70	45	4.37	4.17	3.80	3.69	8.96		
26	2.24	2.21	1.91	1.83	2.70	46	4.84	4.60	4.21	4.10	9.63		
27	2.26	2.23	1.93	1.85	2.70	47	5.35	5.07	4.67	4.54	10.35		
28	2.28	2.25	1.95	1.87	2.70	48	5.88	5.56	5.14	5.01	11.08		
29	2.28	2.25	1.95	1.87	2.82	49	6.47	6.09	5.66	5.53	11.88		
30	2.28	2.25	1.95	1.87	2.96	50	7.07	6.64	6.20	6.06	12.79		
31	2.28	2.25	1.95	1.87	3.07	51	7.82	7.34	6.86	6.70	13.69		
32	2.28	2.25	1.95	1.87	3.21	52	8.65	8.12	7.59	7.41	14.71		
33	2.28	2.25	1.95	1.87	3.35	53	9.53	8.95	8.36	8.17	15.90		
34	2.36	2.32	2.02	1.94	3.56	54	10.50	9.86	9.21	9.00	17.11		
35	2.43	2.38	2.09	2.01	3.72	55	11.55	10.84	10.14	9.90	18.38		
36	2.46	2.39	2.11	2.03	4.02	56	12.73	11.95	11.17	10.91	19.65		
37	2.48	2.41	2.13	2.05	4.39	57	14.01	13.16	12.30	12.01	20.87		
38	2.50	2.43	2.15	2.07	4.80	58	15.46	14.51	13.57	13.25	22.00		
39	2.64	2.56	2.27	2.19	5.27	59	17.08	16.03	14.99	14.64	23.17		

NOTE: AGE IS ATTAINED AGE.

**TABLE B (CONT'D)
TOBACCO USE (CONT'D)
ANNUAL EXCHANGE PREMIUMS PER \$1,000 FACE AMOUNT
THE ANNUAL POLICY FEE OF \$75 MUST BE ADDED.**

AGE	SCHEDULED					MAXIMUM	AGE	SCHEDULED					MAXIMUM
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS	\$149,999 and below		\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS		
60	\$18.89	\$17.73	\$16.58	\$16.19	\$24.47	80	149.04	147.93	125.54	120.41	149.14		
61	20.92	19.64	18.36	17.93	26.13	81	164.17	163.06	138.88	133.00	164.27		
62	23.15	21.74	20.32	19.85	28.14	82	181.46	178.83	153.20	146.48	181.56		
63	25.53	23.97	22.40	21.88	30.86	83	201.08	194.46	168.58	160.95	201.18		
64	28.14	26.42	24.69	24.12	33.89	84	224.11	211.68	185.67	177.00	224.21		
65	30.98	29.08	27.19	26.55	37.29	85	247.13	230.49	204.53	194.70	247.23		
66	34.12	32.03	29.94	29.24	40.66	86	273.28	250.90	225.21	214.08	273.38		
67	37.57	35.27	32.97	32.20	44.16	87	298.47	272.90	247.75	235.18	298.57		
68	41.39	38.86	36.32	35.48	47.33	88	326.94	296.50	272.21	258.05	327.04		
69	45.58	42.79	40.00	39.07	50.89	89	354.01	321.33	298.30	282.40	354.11		
70	50.15	47.08	44.01	42.99	54.66	90	385.18	346.96	325.64	307.88	385.28		
71	55.55	53.75	49.03	47.79	59.55	91	418.41	373.38	354.27	334.52	418.51		
72	64.81	61.11	54.45	52.98	65.61	92	454.67	400.62	384.21	362.33	454.77		
73	72.40	69.33	60.42	58.67	73.00	93	495.75	428.64	415.48	391.34	495.85		
74	81.23	78.55	67.03	64.97	81.63	94	546.13	457.46	448.09	421.55	546.23		
75	91.01	88.99	74.43	72.00	91.21	95	569.45	487.08	477.11	448.85	569.55		
76	101.44	100.33	82.67	79.83	101.54	96	597.60	518.87	508.25	478.14	597.70		
77	112.27	111.16	91.87	88.57	112.37	97	658.49	596.56	584.35	549.73	658.59		
78	123.56	122.45	102.05	98.21	123.66	98	742.24	631.37	618.44	581.81	775.51		
79	135.64	134.53	113.27	108.82	135.74	99	784.17	667.04	653.38	614.68	978.31		

NOTE: AGE IS ATTAINED AGE.

DECREASING TERM INSURANCE TO AGE 100 PLAN - For this plan, the face amount decreases while premiums remain level. The face amount decreases each year with Attained Age, as shown in Table C below. We reserve the right to change the scheduled face amount, but not lower than the minimum face amount as determined from Table C.

**TABLE C
PREFERRED
FACE AMOUNT PER \$100.00 BASIC ANNUAL PREMIUMS
THE BASIC ANNUAL PREMIUM IS THE ANNUAL PREMIUM FOR THIS PLAN
MINUS THE ANNUAL POLICY FEE OF \$75**

AGE	SCHEDULED					MINIMUM	AGE	SCHEDULED					MINIMUM
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS	\$149,999 and below		\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS		
20	\$75,757	\$104,166	\$116,279	\$133,333	\$70,921	40	\$58,823	\$93,457	\$103,092	\$113,636	\$44,642		
21	75,757	104,166	116,279	133,333	70,921	41	54,347	87,719	97,087	106,382	41,322		
22	75,757	104,166	116,279	133,333	70,921	42	50,251	81,300	89,285	98,039	38,610		
23	75,757	104,166	116,279	133,333	70,921	43	45,871	75,757	83,333	90,909	35,714		
24	75,187	104,166	116,279	133,333	70,921	44	41,841	70,921	77,519	84,033	33,333		
25	74,074	104,166	116,279	131,578	70,921	45	37,878	65,359	71,428	76,923	30,769		
26	73,529	103,092	116,279	131,578	70,921	46	34,246	60,240	65,789	70,422	28,490		
27	72,463	103,092	114,942	129,870	70,921	47	30,959	55,555	60,606	64,102	26,315		
28	71,942	103,092	114,942	129,870	70,921	48	28,248	51,813	56,179	59,523	24,390		
29	71,942	103,092	114,942	129,870	70,921	49	25,641	48,309	52,083	54,644	22,522		
30	71,942	103,092	114,942	129,870	70,921	50	23,529	45,248	48,780	50,761	20,833		
31	71,942	103,092	114,942	129,870	69,444	51	21,276	40,816	44,052	45,871	19,120		
32	71,942	103,092	114,942	129,870	68,027	52	19,267	37,037	40,000	41,666	17,452		
33	71,942	103,092	114,942	129,870	65,789	53	17,421	33,557	36,101	37,593	15,898		
34	69,444	102,040	112,359	126,582	63,291	54	15,847	30,395	32,786	34,129	14,409		
35	67,114	102,040	112,359	125,000	60,606	55	14,409	27,777	29,940	31,152	13,071		
36	66,666	101,010	112,359	125,000	57,803	56	13,089	25,188	27,173	28,248	11,848		
37	65,789	101,010	111,111	123,456	54,347	57	11,876	22,883	24,691	25,641	10,775		
38	65,359	101,010	111,111	123,456	51,020	58	10,775	20,703	22,321	23,255	9,813		
39	62,500	97,087	107,526	119,047	47,846	59	9,746	18,726	20,202	21,052	8,912		

NOTE: AGE IS ATTAINED AGE.

TABLE C (CONT'D)
PREFERRED (CONT'D)
FACE AMOUNT PER \$100.00 BASIC ANNUAL PREMIUMS
THE BASIC ANNUAL PREMIUM IS THE ANNUAL PREMIUM FOR THIS PLAN
MINUS THE ANNUAL POLICY FEE OF \$75

AGE	SCHEDULED				MINIMUM	AGE	SCHEDULED				MINIMUM
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS		\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS
60	\$8,802	\$16,949	\$18,281	\$19,011	\$8,084	80	\$1,147	\$2,061	\$2,336	\$2,606	\$ 1,091
61	7,955	15,313	16,501	17,182	7,331	81	1,032	1,851	2,106	2,362	997
62	7,183	13,831	14,903	15,527	6,626	82	932	1,667	1,904	2,148	908
63	6,514	12,531	13,513	14,064	5,973	83	843	1,505	1,726	1,957	825
64	5,913	11,376	12,269	12,771	5,373	84	762	1,358	1,563	1,782	750
65	5,370	10,330	11,135	11,600	4,837	85	692	1,226	1,416	1,636	685
66	4,875	9,380	10,121	10,537	4,368	86	634	1,107	1,283	1,503	627
67	4,428	8,517	9,182	9,560	3,952	87	584	1,000	1,163	1,382	578
68	4,019	7,733	8,340	8,680	3,586	88	540	905	1,056	1,272	535
69	3,649	7,017	7,570	7,880	3,257	89	502	822	962	1,174	497
70	3,316	6,377	6,877	7,158	2,951	90	468	761	891	1,087	464
71	3,019	5,675	6,157	6,468	2,626	91	437	707	827	1,010	433
72	2,755	5,060	5,521	5,854	2,401	92	408	659	771	941	404
73	2,469	4,520	4,960	5,293	2,154	93	380	616	721	880	376
74	2,213	4,042	4,456	4,789	1,931	94	349	577	675	824	345
75	1,983	3,611	4,001	4,329	1,738	95	319	542	634	774	316
76	1,776	3,224	3,590	3,909	1,571	96	292	501	586	715	268
77	1,590	2,879	3,221	3,529	1,426	97	243	299	350	427	213
78	1,424	2,573	2,891	3,186	1,302	98	230	283	331	404	155
79	1,277	2,300	2,597	2,880	1,192	99	217	267	313	382	102

NOTE: AGE IS ATTAINED AGE.

NON-TOBACCO USE
FACE AMOUNT PER \$100.00 BASIC ANNUAL PREMIUMS
THE BASIC ANNUAL PREMIUM IS THE ANNUAL PREMIUM FOR THIS PLAN
MINUS THE ANNUAL POLICY FEE OF \$75

AGE	SCHEDULED				MINIMUM	AGE	SCHEDULED				MINIMUM
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS		\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS
20	\$75,757	\$76,335	\$85,470	\$94,339	\$56,818	60	\$8,802	\$9,746	\$10,493	\$11,001	\$6,468
21	75,757	76,335	85,470	94,339	56,818	61	7,955	8,810	9,487	9,940	5,865
22	75,757	76,335	85,470	94,339	56,818	62	7,183	7,955	8,568	8,976	5,302
23	75,757	76,335	85,470	94,339	56,818	63	6,514	7,215	7,770	8,143	4,780
24	75,187	75,757	84,745	93,457	56,818	64	5,913	6,548	7,052	7,390	4,299
25	74,074	75,187	84,033	92,592	56,818	65	5,370	5,948	6,406	6,715	3,869
26	73,529	74,626	83,333	91,743	56,818	66	4,875	5,399	5,813	6,093	3,494
27	72,463	74,074	82,644	90,909	56,818	67	4,428	4,868	5,279	5,534	3,162
28	71,942	73,529	81,967	90,090	56,818	68	4,019	4,387	4,791	5,025	2,869
29	71,942	73,529	81,967	90,090	56,818	69	3,649	3,955	4,351	4,562	2,606
30	71,942	73,529	81,967	90,090	56,818	70	3,316	3,570	3,954	4,145	2,361
31	71,942	73,529	81,967	90,090	55,555	71	3,019	3,226	3,593	3,773	2,101
32	71,942	73,529	81,967	90,090	54,644	72	2,755	2,925	3,273	3,444	1,921
33	71,942	73,529	81,967	90,090	52,631	73	2,469	2,653	2,984	3,146	1,723
34	69,444	70,921	79,365	86,956	50,761	74	2,213	2,407	2,720	2,874	1,545
35	67,114	69,444	76,923	84,033	48,309	75	1,983	2,183	2,478	2,623	1,390
36	66,666	68,965	76,335	83,333	46,296	76	1,776	1,977	2,255	2,392	1,256
37	65,789	68,493	75,757	82,644	43,478	77	1,590	1,790	2,052	2,180	1,141
38	65,359	68,027	75,187	81,967	40,816	78	1,424	1,621	1,867	1,987	1,042
39	62,500	65,359	72,463	78,125	38,167	79	1,277	1,469	1,700	1,813	953
40	58,823	61,728	68,027	73,529	35,714	80	1,147	1,333	1,550	1,656	872
41	54,347	57,471	63,291	68,027	33,112	81	1,032	1,212	1,416	1,515	797
42	50,251	53,475	58,479	62,893	30,864	82	932	1,105	1,299	1,390	726
43	45,871	48,780	53,475	57,142	28,571	83	843	1,010	1,194	1,279	660
44	41,841	44,843	49,019	52,356	26,666	84	762	922	1,097	1,174	600
45	37,878	40,816	44,444	47,393	24,630	85	689	841	1,007	1,078	548
46	34,246	37,037	40,322	42,918	22,779	86	623	768	926	991	502
47	30,959	33,670	36,496	38,610	21,097	87	565	701	851	911	462
48	28,248	30,864	33,444	35,335	19,531	88	512	642	783	838	428
49	25,641	28,248	30,487	32,051	18,018	89	472	588	723	773	398
50	23,529	26,041	28,089	29,411	16,666	90	437	542	669	716	371
51	21,276	23,584	25,380	26,595	15,290	91	406	503	622	666	346
52	19,267	21,321	22,935	24,096	13,947	92	379	469	579	620	323
53	17,421	19,305	20,790	21,786	12,722	93	354	438	541	580	301
54	15,847	17,543	18,903	19,801	11,534	94	332	411	507	543	276
55	14,409	15,948	17,182	17,985	10,460	95	311	386	476	510	232
56	13,089	14,492	15,600	16,366	9,478	96	292	361	447	478	211
57	11,876	13,157	14,164	14,858	8,613	97	243	301	372	398	180
58	10,775	11,918	12,836	13,458	7,849	98	230	284	352	376	142
59	9,746	10,787	11,614	12,180	7,127	99	217	269	333	356	102

NOTE: AGE IS ATTAINED AGE.

TABLE C (CONT'D)
TOBACCO USE
FACE AMOUNT PER \$100.00 BASIC ANNUAL PREMIUMS
THE BASIC ANNUAL PREMIUM IS THE ANNUAL PREMIUM FOR THIS PLAN
MINUS THE ANNUAL POLICY FEE OF \$75

AGE	SCHEDULED				MINIMUM	AGE	SCHEDULED				MINIMUM
	\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS		\$149,999 and below	\$150,000 \$249,999	\$250,000 \$499,999	\$500,000 and over	ALL FACE AMOUNTS
20	\$46,082	\$46,296	\$54,054	\$56,497	\$37,037	60	\$5,293	\$5,640	\$6,031	\$6,176	\$4,086
21	46,082	46,296	54,054	56,497	37,037	61	4,780	5,091	5,446	5,577	3,827
22	46,082	46,296	54,054	56,497	37,037	62	4,319	4,599	4,921	5,037	3,553
23	46,082	46,296	54,054	56,497	37,037	63	3,916	4,171	4,464	4,570	3,240
24	45,662	45,871	53,475	55,865	37,037	64	3,553	3,785	4,050	4,145	2,950
25	45,248	45,454	52,910	55,248	37,037	65	3,227	3,438	3,677	3,766	2,681
26	44,642	45,248	52,356	54,644	37,037	66	2,930	3,122	3,340	3,419	2,459
27	44,247	44,843	51,813	54,054	37,037	67	2,661	2,835	3,033	3,105	2,264
28	43,859	44,444	51,282	53,475	37,037	68	2,416	2,573	2,753	2,818	2,112
29	43,859	44,444	51,282	53,475	35,460	69	2,193	2,336	2,500	2,559	1,965
30	43,859	44,444	51,282	53,475	33,783	70	1,994	2,124	2,272	2,326	1,829
31	43,859	44,444	51,282	53,475	32,573	71	1,707	1,860	2,039	2,092	1,679
32	43,859	44,444	51,282	53,475	31,152	72	1,542	1,636	1,836	1,887	1,524
33	43,859	44,444	51,282	53,475	29,850	73	1,381	1,442	1,655	1,704	1,369
34	42,372	43,103	49,504	51,546	28,089	74	1,231	1,273	1,491	1,539	1,225
35	41,152	42,016	47,846	49,751	26,881	75	1,098	1,123	1,343	1,388	1,096
36	40,650	41,841	47,393	49,261	24,875	76	985	996	1,209	1,252	984
37	40,322	41,493	46,948	48,780	22,779	77	890	899	1,088	1,129	889
38	40,000	41,152	46,511	48,309	20,833	78	809	816	979	1,018	808
39	37,878	39,062	44,052	45,662	18,975	79	737	743	882	918	736
40	35,714	36,900	41,322	42,918	17,271	80	670	675	796	830	670
41	33,112	34,364	38,461	39,682	15,527	81	609	613	720	751	608
42	30,395	31,545	35,087	36,231	14,184	82	551	559	652	682	550
43	27,855	29,069	32,154	33,222	13,020	83	497	514	593	621	497
44	25,188	26,385	29,069	29,940	12,033	84	446	472	538	564	446
45	22,883	23,980	26,315	27,100	11,160	85	404	433	488	513	404
46	20,661	21,739	23,752	24,390	10,384	86	365	398	444	467	365
47	18,691	19,723	21,413	22,026	9,661	87	335	366	403	425	334
48	17,006	17,985	19,455	19,960	9,025	88	305	337	367	387	305
49	15,455	16,420	17,667	18,083	8,417	89	282	311	335	354	282
50	14,144	15,060	16,129	16,501	7,818	90	259	288	307	324	259
51	12,787	13,623	14,577	14,925	7,304	91	239	267	282	298	238
52	11,560	12,315	13,175	13,495	6,798	92	219	249	260	275	219
53	10,493	11,173	11,961	12,239	6,289	93	201	233	240	255	201
54	9,523	10,141	10,857	11,111	5,844	94	183	218	223	237	183
55	8,658	9,225	9,861	10,101	5,440	95	175	205	209	222	175
56	7,855	8,368	8,952	9,165	5,089	96	167	192	196	209	167
57	7,137	7,598	8,130	8,326	4,791	97	151	167	171	181	151
58	6,468	6,891	7,369	7,547	4,545	98	134	158	161	171	128
59	5,854	6,238	6,671	6,830	4,315	99	127	149	153	162	102

NOTE: AGE IS ATTAINED AGE.

RIDERS - The continuation in the new plan of any benefits provided by Rider(s) attached to this Policy which are not exchanged will be subject to the provision for continuation, if any, in each Rider. The premium for any Rider continued after exchange will be added to the premium for the new plan.

RIDER EXCHANGE AT DEATH OF INSURED - If any Insured Spouse Riders attached to this Policy are in force upon the Insured's death, they may be exchanged for a new policy in accordance with the Exchange provision in each rider except that: (a) the exchange must be made within 30 days after the Insured's death; and (b) the effective date of the new policy will be the day We receive written request for exchange. If the Insured Spouse dies before exchange takes effect and within 30 days after the Insured's death, We will pay to the Beneficiary of the Rider the insurance in force under the Rider at the Insured's death, less any overdue premium for the Rider.

PART 6
SETTLEMENT OPTIONS

We will pay any death proceeds in a lump sum, unless one of the settlement options below is selected. If no option has been selected as of the death of the Insured, the Beneficiary may select one of the options below. If the Beneficiary is not an individual receiving payment in his or her own right, settlement options are available only with Our consent. Any election of an option must be by Notice to Us.

A settlement option will be available only if the proceeds are at least \$10,000 and are also sufficient to provide a periodic installment or interest payment of at least \$25.

OPTION A. INSTALLMENTS FOR A FIXED PERIOD - The proceeds will be paid in equal monthly installments for a fixed period, not to exceed 25 years. The frequency of the installments and the fixed period will be as selected. The amount of each installment will be determined from Table 1 on Page 11.

OPTION B. MONTHLY INSTALLMENTS FOR A GUARANTEED MINIMUM PERIOD AND, THEREAFTER, FOR LIFE - The proceeds will be paid in equal monthly installments for a guaranteed minimum period of 10, 15 or 20 years and, thereafter, as long as the Beneficiary lives. The amount of each monthly installment will be determined from Table 2 below, based on the period selected and the age at the nearest birthday of the Beneficiary on the date the first installment is payable. If a monthly payment for a specific age shown in Table 2 is the same for more than one period, payment will be made for the longest period.

OPTION C. PROCEEDS HELD AND AVAILABLE FOR WITHDRAWAL - The proceeds will be held by Us subject to withdrawal in whole or in part at any time. Interest on any unpaid balance will be accumulated or paid annually, semiannually, quarterly or monthly, as selected.

OPTION D. INSTALLMENTS OF A SELECTED AMOUNT - The proceeds will be paid in equal monthly installments for the amount selected until the proceeds and interest are fully paid.

The first installment under Option A, B and D is payable on the date the option becomes effective. The interest rate for Option A, B, and D is 2-1/2% annually. The interest rate for Option C is 2% annually. We may from time to time credit or pay excess interest under any option. The basis of values for Option B is the 1996 US Annuity 2000 Mortality Table (20% male and 80% female). Any proceeds being held by Us under any option will be commingled with Our general funds.

When the Beneficiary under any of the options dies, unless otherwise provided, We will pay in one lump sum to such Beneficiary's estate:

- (1) any unpaid sum left under Options C or D, plus any unpaid interest under that option; or
- (2) the present value of any remaining payments under Option A; or
- (3) the present value of any remaining payments for the minimum fixed period under Option B.

EQUAL MONTHLY INSTALLMENTS UNDER OPTION A AND B FOR EACH \$1,000 PAYABLE

TABLE 1+		TABLE 2											
Fixed Period in Years	Monthly Amount	Age++	Guaranteed Minimum Period in Years			Age++	Guaranteed Minimum Period in Years			Age++	Guaranteed Minimum Period in Years		
			10	15	20		10	15	20		10	15	20
1	\$84.28	*6	\$2.42	\$2.42	\$2.42	31	\$2.83	\$2.83	\$2.83	56	\$3.98	\$3.93	\$3.86
2	42.66	7	2.43	2.43	2.43	32	2.86	2.86	2.85	57	4.06	4.01	3.92
3	28.79	8	2.45	2.44	2.44	33	2.88	2.88	2.88	58	4.14	4.08	3.99
4	21.86	9	2.46	2.46	2.45	34	2.91	2.91	2.90	59	4.23	4.16	4.06
5	17.70	10	2.47	2.47	2.47	35	2.94	2.94	2.93	60	4.33	4.25	4.13
6	14.93	11	2.48	2.48	2.48	36	2.97	2.97	2.96	61	4.42	4.34	4.20
7	12.95	12	2.49	2.49	2.49	37	3.00	3.00	2.99	62	4.53	4.43	4.27
8	11.47	13	2.51	2.50	2.50	38	3.04	3.03	3.02	63	4.64	4.52	4.34
9	10.32	14	2.52	2.52	2.52	39	3.07	3.07	3.06	64	4.76	4.62	4.41
10	9.39	15	2.53	2.53	2.53	40	3.11	3.10	3.09	65	4.88	4.72	4.49
11	8.64	16	2.55	2.55	2.54	41	3.15	3.14	3.13	66	5.01	4.83	4.56
12	8.02	17	2.56	2.56	2.56	42	3.19	3.18	3.16	67	5.14	4.93	4.63
13	7.49	18	2.58	2.57	2.57	43	3.23	3.22	3.20	68	5.29	5.04	4.70
14	7.03	19	2.59	2.59	2.59	44	3.27	3.26	3.24	69	5.44	5.15	4.76
15	6.64	20	2.61	2.61	2.60	45	3.31	3.30	3.28	70	5.59	5.26	4.83
16	6.30	21	2.62	2.62	2.62	46	3.36	3.35	3.33	71	5.76	5.38	4.88
17	6.00	22	2.64	2.64	2.64	47	3.41	3.40	3.37	72	5.93	5.49	4.94
18	5.73	23	2.66	2.66	2.66	48	3.46	3.45	3.42	73	6.11	5.60	4.99
19	5.49	24	2.68	2.68	2.68	49	3.52	3.50	3.47	74	6.29	5.71	5.04
20	5.27	25	2.70	2.70	2.69	50	3.57	3.55	3.52	75	6.48	5.81	5.08
21	5.08	26	2.72	2.72	2.71	51	3.63	3.61	3.57	76	6.68	5.91	5.11
22	4.90	27	2.74	2.74	2.73	52	3.70	3.67	3.62	77	6.87	6.01	5.14
23	4.74	28	2.76	2.76	2.76	53	3.76	3.73	3.68	78	7.07	6.09	5.17
24	4.60	29	2.78	2.78	2.78	54	3.83	3.79	3.74	79	7.27	6.17	5.19
25	4.46	30	2.81	2.81	2.80	55	3.90	3.86	3.80	**80	7.46	6.25	5.21

+ Multiply the monthly installment found in Table 1 by 2.994 to obtain the quarterly installment; by 5.969 to obtain the semiannual installment; and by 11.865 to obtain the annual installment.

++ The age is the age in years at the nearest birthday of the Beneficiary on the date the first installment is payable.

* And under

** And over

TERM LIFE INSURANCE TO AGE 95

INITIAL SCHEDULED LEVEL PREMIUM PERIOD FOR 20 YEARS

PREMIUMS ARE SUBJECT TO CHANGE

**EXCHANGEABLE AFTER FIVE YEARS TO ANNUAL INCREASING PREMIUM
OR DECREASING TERM INSURANCE TO AGE 100**

NONPARTICIPATING

PRIMERICA LIFE INSURANCE COMPANY

Home Office: Boston, Massachusetts
Executive Offices: 3120 Breckinridge Boulevard, Duluth, Georgia 30099-0001

INSURED TERM INSURANCE RIDER INITIAL SCHEDULED LEVEL PREMIUM PERIOD FOR 20 YEARS PREMIUMS ARE SUBJECT TO CHANGE

We have issued this Rider as a part of the Policy to which it is attached. Any payment under this Rider is subject to the provisions of this Rider and the Policy. In case of conflict between this Rider and the Policy, the provisions of this Rider will control.

This Rider is effective at 12:01 A.M. on the Rider Date of Issue.

BENEFIT

We will pay the Rider Face Amount, in a lump sum, to the Beneficiary of this Rider upon receiving due proof that the Insured died before the Rider Expiry Date and while this Rider was in force.

DEFINITIONS

These are some key words used in this Rider.

BENEFICIARY - The person(s) to whom the rider proceeds are payable at the death of the Insured. This is the person(s) named in the application as the Beneficiary, unless later changed. (See Change of Beneficiary Provision, below)

INSURED - The person whose life the Policy insures and who is named in the Policy and Rider Specifications.

NOTICE TO US - Information We have received which is written, signed by You and acceptable to Us.

PREMIUM CLASS - The risk classification used in determining what premiums You pay.

RIDER ATTAINED AGE - The Insured's Rider Issue Age plus the number of rider years since the Rider Date.

RIDER DATE - The date shown on Rider Page 3 from which rider anniversaries, rider years and rider months are measured.

RIDER DATE OF ISSUE - The date shown on Rider Page 3 on which We issue the Rider to You. This date controls the Incontestability and Suicide Exclusion provisions shown below.

RIDER EXPIRY DATE - The date shown on Rider Page 3. This Rider is not in force on or after this date.

RIDER FACE AMOUNT - The amount of insurance for each rider year which is shown in Table A on Rider Page 3A.

RIDER ISSUE AGE - The Insured's age on the birthday nearest the Rider Date.

WE, OUR or US - Primerica Life Insurance Company.

YOU or YOUR - The Owner of the Policy. Unless You tell Us otherwise, the Owner is the Insured.

GENERAL PROVISIONS

CONSIDERATION - This Rider is issued in consideration of: (1) the application for this Rider, a copy of which is attached to the Policy; and (2) payment of the first premium for this Rider.

PREMIUM PAYMENTS - Premiums for this Rider are payable in addition to, but under the same terms and conditions as, the premiums for the Policy. The premiums shown on Rider Page 3A are for the premium payment option You chose. Modal factors are used to determine the premium payment for all payment options. The modal factors are 0.095 for monthly, 0.265 for quarterly, 0.520 for semiannual, and 1.000 for annual. To calculate the approximate premium for a payment option other than the one You chose: (1) divide the premium shown on Rider Page 3A by the modal factor for that payment option; and (2) multiply the result by the modal factor for the premium payment option You would like to determine. You may change the premium payment option for future premium payments upon acceptable Notice to Us. The premium payment option for this Rider must be the same premium payment option as the Policy. We will provide You with premium rates for other payment options upon written request. Premiums are not due for any period after the Insured's death, the Rider Expiry Date or when this Rider terminates.

PREMIUM CHANGES BY COMPANY - Premiums for this Rider will be the scheduled premiums shown on Rider Pages 3 and 3A, unless changed by Us. We reserve the right to change the scheduled premiums. We will not change them more often than once a year, and in no event will the scheduled premiums be greater than the maximum premiums shown on Rider Page 3A. Any such change will apply uniformly to all riders of this form issued to Insureds having the same Rider Issue Age, duration, Premium Class, year, month, and state of issue; and will be based on future anticipated or emerging experience, including, but not limited to investment earnings, mortality, persistency, taxes and expenses. No change in premiums or Premium Class will occur because of deterioration of the Insured's health or change in occupation.

We will mail written notice to You at least 60 days prior to the date on which a change in Your scheduled premiums will become effective. We will send You new rider specifications pages to reflect any changes in scheduled premiums.

OTHER PREMIUM CHANGES - Changes requested by You and approved by Us to the Face Amount or Premium Class of the Policy or the Face Amount or Premium Class of any Riders may also change Your scheduled premiums.

MISSTATEMENT OF AGE - If the age of the Insured has been misstated in the application, We will be liable only for the amount of insurance the premiums paid would have purchased for the correct age.

INCONTESTABILITY - We will not contest this Rider after it has been in force for two years during the Insured's life. The two years begin on the Rider Date of Issue.

SUICIDE EXCLUSION - If the Insured dies by suicide, while sane or insane, within two years of the Rider Date of Issue, We are only liable for the premiums paid.

REPLACED COVERAGE - If insurance coverage (excluding group coverage) is to be replaced, as shown in the application, and has terminated: (a) prior to the Insured's death, including death by suicide; and (b) between 60 days before and 60 days after the Rider Date of Issue, We will not contest the amount of the replaced coverage that would not have been contestable had it not been replaced. If it is not possible to terminate any coverage to be replaced because of its provisions within 60 days after the Rider Date of Issue, such 60-day period will be extended to the earliest possible date for the coverage to be terminated under its provisions. For example, You are insured under another company's plan for \$100,000 and that plan has been in force two years. If this Rider replaced the other company's plan, We would not contest this Rider for up to \$100,000. We would however, be able to contest any amount over \$100,000. You will not lose the time accrued for the amount of insurance replaced due to this Rider's Incontestability and Suicide Exclusion provisions.

NONPARTICIPATION - This Rider does not participate in Our profits or surplus.

CHANGE OF BENEFICIARY - You can change a Beneficiary of this Rider by Notice to Us. You can only change a Beneficiary while the Insured is alive. A Beneficiary designated irrevocably on Our records may not be changed except with the written consent of that Beneficiary. A Beneficiary change will take effect on the date You signed the Notice to Us. If the Insured died before We receive this Notice, the change is effective, subject to any prior payment of proceeds.

TERMINATION - This Rider shall terminate and no longer be in force: (1) if any premium remains unpaid after the end of the grace period; (2) if the Policy terminates or is continued under a nonforfeiture provision, if any; (3) if this Rider is exchanged to a new policy; (4) on and after the Rider Expiry Date; or (5) on and after the date You cancel it.

CANCELLATION - You may cancel this Rider at any time by sending written Notice to Us. Your Rider will be canceled as of the date We receive the Notice, or, if stated in the Notice, as of a later date. If this Rider is canceled before the Rider Expiry Date and premiums have been paid in advance, We will refund any unearned portion of the premiums paid beyond the end of the rider month in which cancellation occurred.

EXCHANGE PROVISION - You may exchange this Rider at any time after it has been in force for five years to the Annual Increasing Premium Term Insurance to Age 100 Plan described in the Policy; or the Decreasing Term Insurance to Age 100 Plan described in the Policy; or any other plan of insurance then available for exchange, as periodically determined by Us. The new plan will be issued at Our premium rates for that plan for the Rider Attained Age on the exchange date based on the same Premium Class shown on Rider Page 3. We will not require evidence of insurability. The new plan will take effect on the exchange date and this Rider will terminate. However, the new plan's Incontestability and Suicide Exclusion provisions will be controlled by this Rider Date of Issue. We will issue either revised specifications pages or a new policy.

The following conditions are necessary for exchange: (1) We receive Notice to Us requesting an exchange; (2) the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Rider on the exchange date; (3) the required premium is paid within 31 days after the exchange date; (4) the Insured is alive; (5) this Rider is in force on the exchange date; (6) premiums for Your current Rider are not being waived; and (7) the exchange plan will be issued at Our premium rates for that plan for the Insured's Attained Age on the exchange date based on the same Premium Class shown on Rider Page 3, provided the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Rider on the exchange date.

EXCHANGE AT POLICY EXPIRY - If this Rider is in force at expiry of the Policy, it may be exchanged for a policy in accordance with the Exchange Provision except that: (a) the exchange must be made within 30 days after the Policy expiry date; and (b) the effective date of the policy will be the day We receive written request for the exchange.

Signed on the Rider Date of Issue at Our Executive Offices.


Secretary


President

RIDER SPECIFICATIONS

POLICY NUMBER: [04SPECIMEN] INSURED: [JOHN DOE]
 RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [DECEMBER 01, 2009]
 RIDER FACE
 AMOUNT: [\$200,000] RIDER DATE: [DECEMBER 01, 2009]
 PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [DECEMBER 01, 2069]
 [TOBACCO USE]

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-20
C4BI20	INSURED TERM INSURANCE RIDER	[\$200,000]	[\$726.00]

*All premiums for the premium payment option You chose are shown on Rider Page 3A and explained in the Premium Changes by Company provision.

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RIDER SPECIFICATIONS (CONT'D)

TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01	35	\$726.00	\$726.00	\$200,000.00]
[02	36	\$726.00	\$854.00	\$200,000.00]
[03	37	\$726.00	\$854.00	\$200,000.00]
[04	38	\$726.00	\$854.00	\$200,000.00]
[05	39	\$726.00	\$854.00	\$200,000.00]
[06	40	\$726.00	\$854.00	\$200,000.00]
[07	41	\$726.00	\$854.00	\$200,000.00]
[08	42	\$726.00	\$854.00	\$200,000.00]
[09	43	\$726.00	\$854.00	\$200,000.00]
[10	44	\$726.00	\$854.00	\$200,000.00]
[11	45	\$726.00	\$854.00	\$200,000.00]
[12	46	\$726.00	\$854.00	\$200,000.00]
[13	47	\$726.00	\$854.00	\$200,000.00]
[14	48	\$726.00	\$854.00	\$200,000.00]
[15	49	\$726.00	\$854.00	\$200,000.00]
[16	50	\$726.00	\$854.00	\$200,000.00]
[17	51	\$726.00	\$854.00	\$200,000.00]
[18	52	\$726.00	\$854.00	\$200,000.00]
[19	53	\$726.00	\$854.00	\$200,000.00]
[20	54	\$726.00	\$854.00	\$200,000.00]
[21	55	\$2,704.00	\$4,138.00	\$200,000.00]
[22	56	\$2,704.00	\$4,138.00	\$200,000.00]
[23	57	\$2,704.00	\$4,138.00	\$200,000.00]
[24	58	\$2,704.00	\$4,138.00	\$200,000.00]
[25	59	\$2,704.00	\$4,138.00	\$200,000.00]
[26	60	\$4,454.00	\$5,684.00	\$200,000.00]
[27	61	\$4,454.00	\$5,684.00	\$200,000.00]
[28	62	\$4,454.00	\$5,684.00	\$200,000.00]
[29	63	\$4,454.00	\$5,684.00	\$200,000.00]
[30	64	\$4,454.00	\$5,684.00	\$200,000.00]
[31	65	\$7,220.00	\$8,724.00	\$200,000.00]
[32	66	\$7,220.00	\$8,724.00	\$200,000.00]
[33	67	\$7,220.00	\$8,724.00	\$200,000.00]
[34	68	\$7,220.00	\$8,724.00	\$200,000.00]
[35	69	\$7,220.00	\$8,724.00	\$200,000.00]
[36	70	\$9,416.00	\$10,932.00	\$200,000.00]
[37	71	\$10,750.00	\$11,910.00	\$200,000.00]
[38	72	\$12,222.00	\$13,122.00	\$200,000.00]
[39	73	\$13,866.00	\$14,600.00	\$200,000.00]
[40	74	\$15,710.00	\$16,326.00	\$200,000.00]

*Scheduled premiums may change, but they will not increase above the maximum premiums. See Premium Changes by Company provision.

RIDER SPECIFICATIONS (CONT'D)

TABLE A (CONT'D)
 [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41	75	\$17,798.00	\$18,242.00	\$200,000.00]
[42	76	\$20,066.00	\$20,308.00	\$200,000.00]
[43	77	\$22,232.00	\$22,474.00	\$200,000.00]
[44	78	\$24,490.00	\$24,732.00	\$200,000.00]
[45	79	\$26,906.00	\$27,148.00	\$200,000.00]
[46	80	\$29,586.00	\$29,828.00	\$200,000.00]
[47	81	\$32,612.00	\$32,854.00	\$200,000.00]
[48	82	\$35,766.00	\$36,312.00	\$200,000.00]
[49	83	\$38,892.00	\$40,236.00	\$200,000.00]
[50	84	\$42,336.00	\$44,842.00	\$200,000.00]
[51	85	\$46,098.00	\$49,446.00	\$200,000.00]
[52	86	\$50,180.00	\$54,676.00	\$200,000.00]
[53	87	\$54,580.00	\$59,714.00	\$200,000.00]
[54	88	\$59,300.00	\$65,408.00	\$200,000.00]
[55	89	\$64,266.00	\$70,822.00	\$200,000.00]
[56	90	\$69,392.00	\$77,056.00	\$200,000.00]
[57	91	\$74,676.00	\$83,702.00	\$200,000.00]
[58	92	\$80,124.00	\$90,954.00	\$200,000.00]
[59	93	\$85,728.00	\$99,170.00	\$200,000.00]
[60	94	\$91,492.00	\$109,246.00	\$200,000.00]

*Scheduled premiums may change, but they will not increase above the maximum premiums. See Premium Changes by Company provision.

PRIMERICA LIFE INSURANCE COMPANY

Home Office: Boston, Massachusetts
Executive Offices: 3120 Breckinridge Boulevard, Duluth, Georgia 30099-0001

SPOUSE TERM INSURANCE RIDER INITIAL SCHEDULED LEVEL PREMIUM PERIOD FOR 20 YEARS PREMIUMS ARE SUBJECT TO CHANGE

We have issued this Rider as a part of the Policy to which it is attached. Any payment under this Rider is subject to the provisions of this Rider and the Policy. In case of conflict between this Rider and the Policy, the provisions of this Rider will control.

This Rider is effective at 12:01 A.M. on the Rider Date of Issue.

BENEFIT

We will pay the Rider Face Amount, in a lump sum, to the Beneficiary of this Rider upon receiving due proof that the Insured Spouse died before the Rider Expiry Date and while this Rider was in force.

DEFINITIONS

These are some key words used in this Rider.

BENEFICIARY - The person(s) to whom the rider proceeds are payable upon the death of the Insured Spouse. Unless otherwise stated in the application or later changed (See Change of Beneficiary Provision, below), the Beneficiary of this Rider will be the Insured, if living; otherwise the estate of the Insured Spouse. If the Beneficiary is a partnership, We will pay the rider proceeds to the partnership as it is constituted at the time of the Insured Spouse's death.

INSURED - The person whose life the Policy insures and who is named in the Policy Specifications.

INSURED SPOUSE - The person whose life this Rider insures. This person is the spouse of the Insured and is named in the Rider Specifications.

NOTICE TO US - Information We have received which is written, signed by You and acceptable to Us.

PREMIUM CLASS - The risk classification used in determining what premiums You pay.

RIDER ATTAINED AGE - The Insured Spouse's Rider Issue Age plus the number of rider years since the Rider Date.

RIDER DATE - The date shown on Rider Page 3 from which rider anniversaries, rider years and rider months are measured.

RIDER DATE OF ISSUE - The date shown on Rider Page 3 on which We issue the Rider to You. This date controls the Incontestability and Suicide Exclusion provisions shown below.

RIDER EXPIRY DATE - The date shown on Rider Page 3. This Rider is not in force on or after this date.

RIDER FACE AMOUNT - The amount of insurance for each rider year which is shown in Table A on Rider Page 3A.

RIDER ISSUE AGE - The Insured Spouse's age on the birthday nearest the Rider Date.

WE, OUR or US - Primerica Life Insurance Company.

YOU or YOUR - The Owner of the Policy. Unless You tell Us otherwise, the Owner is the Insured.

GENERAL PROVISIONS

CONSIDERATION - This Rider is issued in consideration of: (1) the application for this Rider, a copy of which is attached to the Policy; and (2) payment of the first premium for this Rider.

PREMIUM PAYMENTS - Premiums for this Rider are payable in addition to, but under the same terms and conditions as, the premiums for the Policy. The premiums shown on Rider Page 3A are for the premium payment option You chose. Modal factors are used to determine the premium payment for all payment options. The modal factors are 0.095 for monthly, 0.265 for quarterly, 0.520 for semiannual, and 1.000 for annual. To calculate the approximate premium for a payment option other than the one You chose: (1) divide the premium shown on Rider Page 3A by the modal factor for that payment option; and (2) multiply the result by the modal factor for the premium payment option You would like to determine. You may change the premium payment option for future premium payments upon acceptable Notice to Us. The premium payment option for this Rider must be the same premium payment option as the Policy. We will provide You with premium rates for other payment options upon written request. Premiums are not due for any period after the Insured Spouse's death, the Rider Expiry Date or when this Rider terminates.

PREMIUM CHANGES BY COMPANY - Premiums for this Rider will be the scheduled premiums shown on Rider Pages 3 and 3A, unless changed by Us. We reserve the right to change the scheduled premiums. We will not change them more often than once a year, and in no event will the scheduled premiums be greater than the maximum premiums shown on Rider Page 3A. Any such change will apply uniformly to all riders of this form issued to Insured Spouses having the same Rider Issue Age, duration, Premium Class, year, month, and state of issue; and will be based on future anticipated or emerging experience, including, but not limited to investment earnings, mortality, persistency, taxes and expenses. No change in premiums or Premium Class will occur because of deterioration of the Insured Spouse's health or change in occupation.

We will mail written notice to You at least 60 days prior to the date on which a change in Your scheduled premiums will become effective. We will send You new rider specifications pages to reflect any changes in scheduled premiums.

OTHER PREMIUM CHANGES - Changes requested by You and approved by Us to the Face Amount or Premium Class of the Policy or the Face Amount or Premium Class of any Riders may also change Your scheduled premiums.

MISSTATEMENT OF AGE - If the age of the Insured Spouse has been misstated in the application, We will be liable only for the amount of insurance the premiums paid would have purchased for the correct age.

INCONTESTABILITY - We will not contest this Rider after it has been in force for two years during the Insured Spouse's life. The two years begin on the Rider Date of Issue.

SUICIDE EXCLUSION - If the Insured Spouse dies by suicide, while sane or insane, within two years of the Rider Date of Issue, We are only liable for the premiums paid.

REPLACED COVERAGE - If insurance coverage (excluding group coverage) is to be replaced, as shown in the application, and has terminated: (a) prior to the Insured Spouse's death, including death by suicide; and (b) between 60 days before and 60 days after the Rider Date of Issue, We will not contest the amount of the replaced coverage that would not have been contestable had it not been replaced. If it is not possible to terminate any coverage to be replaced because of its provisions within 60 days after the Rider Date of Issue, such 60-day period will be extended to the earliest possible date for the coverage to be terminated under its provisions. For example, the Insured Spouse is insured under another company's plan for \$100,000 and that plan has been in force two years. If this Rider replaced the other company's plan, We would not contest this Rider for up to \$100,000. We would however, be able to contest any amount over \$100,000. You will not lose the time accrued for the amount of insurance replaced due to this Rider's Incontestability and Suicide Exclusion provisions.

NONPARTICIPATION - This Rider does not participate in Our profits or surplus.

PAYMENT OF PROCEEDS - Due proof of the death of the Insured Spouse must be sent to Us at Our Executive Offices. We must receive a certified death certificate, completed claim forms and a valid authorization for Us to obtain all medical and other records concerning the Insured Spouse. Death proceeds equal: (1) the Rider Face Amount; minus (2) any overdue premium for the Policy and any Riders if the Insured Spouse's death occurs during a grace period.

CHANGE OF BENEFICIARY - You can change a Beneficiary of this Rider by Notice to Us. You can only change a Beneficiary while the Insured Spouse is alive. A Beneficiary designated irrevocably on Our records may not be changed except with the written consent of that Beneficiary. A Beneficiary change will take effect on the date You signed the Notice to Us. If the Insured Spouse died before We receive this Notice, the change is effective, subject to any prior payment of proceeds.

TERMINATION - This Rider shall terminate and no longer be in force: (1) if any premium remains unpaid after the end of the grace period; (2) if the Policy terminates (subject to the Exchange at Death of Insured Provision) or is continued under a nonforfeiture provision, if any; (3) if this Rider is exchanged to a new policy; (4) on and after the Rider Expiry Date; or (5) on and after the date You cancel it.

CANCELLATION - You may cancel this Rider at any time by sending written Notice to Us. Your Rider will be canceled as of the date We receive the Notice, or, if stated in the Notice, as of a later date. If this Rider is canceled before the Rider Expiry Date and premiums have been paid in advance, We will refund any unearned portion of the premiums paid beyond the end of the rider month in which cancellation occurred.

EXCHANGE PROVISION - You may exchange this Rider at any time after it has been in force for five years to the Annual Increasing Premium Term Insurance to Age 100 Plan described in the Policy; or the Decreasing Term Insurance to Age 100 Plan described in the Policy; or any other plan of insurance then available for exchange, as periodically determined by Us. The new plan will be issued at Our premium rates for that plan for the Insured Spouse's Rider Attained Age on the exchange date based on the same Premium Class shown on Rider Page 3. We will not require evidence of insurability. The new plan will take effect on the exchange date and this Rider will terminate. However, the new plan's Incontestability and Suicide Exclusion provisions will be controlled by this Rider Date of Issue. We will issue either revised specifications pages or a new policy.

The following conditions are necessary for exchange: (1) We receive Notice to Us requesting an exchange; (2) the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Rider on the exchange date; (3) the required premium is paid within 31 days after the exchange date; (4) the Insured Spouse is alive; (5) this Rider is in force on the exchange date; (6) premiums for Your current Rider are not being waived; and (7) the exchange plan will be issued at Our premium rates for that plan for the Insured Spouse's Attained Age on the exchange date based on the same Premium Class shown on Rider Page 3, provided the face amount of the new plan is not less than the minimum required by Us nor greater than the Face Amount in effect under this Rider on the exchange date.

EXCHANGE AT DEATH OF INSURED - If this Rider is in force at the Insured's death, it may be exchanged for a new policy in accordance with the Exchange Provision except that: (a) the exchange must be made within 30 days after the Insured's death; and (b) the effective date of the new policy will be the day We receive written request for exchange. If the Insured Spouse dies before exchange takes effect and within 30 days after the Insured's death, We will pay to the Beneficiary of this Rider the insurance in force under this Rider at the Insured's death, less any overdue premium for this Rider.

EXCHANGE AT POLICY EXPIRY - If this Rider is in force at expiry of the Policy, it may be exchanged for a policy in accordance with the Exchange Provision except that: (a) the exchange must be made within 30 days after the Policy expiry date; and (b) the effective date of the policy will be the day We receive written request for the exchange.

Signed on the Rider Date of Issue at Our Executive Offices.



Secretary



President

RIDER SPECIFICATIONS

POLICY NUMBER: [04SPECIMEN] INSURED SPOUSE: [JANE DOE]
 RIDER ISSUE AGE: [35] RIDER DATE OF ISSUE: [DECEMBER 01, 2009]
 RIDER FACE
 AMOUNT: [\$200,000] RIDER DATE: [DECEMBER 01, 2009]
 PREMIUM CLASS: [STANDARD/] RIDER EXPIRY DATE: [DECEMBER 01, 2069]
 [TOBACCO USE]

FORM NUMBER	PLAN NAME	RIDER FACE AMOUNT	SCHEDULED ANNUAL PREMIUMS* YEARS 1-20
C4BS20	SPOUSE TERM INSURANCE RIDER	[\$200,000]	[\$726.00]

*All premiums for the premium payment option You chose are shown on Rider Page 3A and explained in the Premium Changes by Company provision.

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RIDER SPECIFICATIONS (CONT'D)

TABLE A
[ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[01	35	\$726.00	\$726.00	\$200,000.00]
[02	36	\$726.00	\$854.00	\$200,000.00]
[03	37	\$726.00	\$854.00	\$200,000.00]
[04	38	\$726.00	\$854.00	\$200,000.00]
[05	39	\$726.00	\$854.00	\$200,000.00]
[06	40	\$726.00	\$854.00	\$200,000.00]
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[14	48	\$726.00	\$854.00	\$200,000.00]
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[19	53	\$726.00	\$854.00	\$200,000.00]
[20	54	\$726.00	\$854.00	\$200,000.00]
[21	55	\$2,704.00	\$4,138.00	\$200,000.00]
[22	56	\$2,704.00	\$4,138.00	\$200,000.00]
[23	57	\$2,704.00	\$4,138.00	\$200,000.00]
[24	58	\$2,704.00	\$4,138.00	\$200,000.00]
[25	59	\$2,704.00	\$4,138.00	\$200,000.00]
[26	60	\$4,454.00	\$5,684.00	\$200,000.00]
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[28	62	\$4,454.00	\$5,684.00	\$200,000.00]
[29	63	\$4,454.00	\$5,684.00	\$200,000.00]
[30	64	\$4,454.00	\$5,684.00	\$200,000.00]
[31	65	\$7,220.00	\$8,724.00	\$200,000.00]
[32	66	\$7,220.00	\$8,724.00	\$200,000.00]
[33	67	\$7,220.00	\$8,724.00	\$200,000.00]
[34	68	\$7,220.00	\$8,724.00	\$200,000.00]
[35	69	\$7,220.00	\$8,724.00	\$200,000.00]
[36	70	\$9,416.00	\$10,932.00	\$200,000.00]
[37	71	\$10,750.00	\$11,910.00	\$200,000.00]
[38	72	\$12,222.00	\$13,122.00	\$200,000.00]
[39	73	\$13,866.00	\$14,600.00	\$200,000.00]
[40	74	\$15,710.00	\$16,326.00	\$200,000.00]

*Scheduled premiums may change, but they will not increase above the maximum premiums. See Premium Changes by Company provision.

RIDER SPECIFICATIONS (CONT'D)

TABLE A (CONT'D)
 [ANNUAL] PREMIUMS FOR RIDER CONTINUATION TO EXPIRY DATE

RIDER YEARS	RIDER ATTAINED AGE	SCHEDULED [ANNUAL] PREMIUMS*	MAXIMUM [ANNUAL] PREMIUMS	RIDER FACE AMOUNT
[41	75	\$17,798.00	\$18,242.00	\$200,000.00]
[42	76	\$20,066.00	\$20,308.00	\$200,000.00]
[43	77	\$22,232.00	\$22,474.00	\$200,000.00]
[44	78	\$24,490.00	\$24,732.00	\$200,000.00]
[45	79	\$26,906.00	\$27,148.00	\$200,000.00]
[46	80	\$29,586.00	\$29,828.00	\$200,000.00]
[47	81	\$32,612.00	\$32,854.00	\$200,000.00]
[48	82	\$35,766.00	\$36,312.00	\$200,000.00]
[49	83	\$38,892.00	\$40,236.00	\$200,000.00]
[50	84	\$42,336.00	\$44,842.00	\$200,000.00]
[51	85	\$46,098.00	\$49,446.00	\$200,000.00]
[52	86	\$50,180.00	\$54,676.00	\$200,000.00]
[53	87	\$54,580.00	\$59,714.00	\$200,000.00]
[54	88	\$59,300.00	\$65,408.00	\$200,000.00]
[55	89	\$64,266.00	\$70,822.00	\$200,000.00]
[56	90	\$69,392.00	\$77,056.00	\$200,000.00]
[57	91	\$74,676.00	\$83,702.00	\$200,000.00]
[58	92	\$80,124.00	\$90,954.00	\$200,000.00]
[59	93	\$85,728.00	\$99,170.00	\$200,000.00]
[60	94	\$91,492.00	\$109,246.00	\$200,000.00]

*Scheduled premiums may change, but they will not increase above the maximum premiums. See Premium Changes by Company provision.

SERFF Tracking Number: PRMD-126409154 State: Arkansas
Filing Company: Primerica Life Insurance Company State Tracking Number: 44351
Company Tracking Number: C4B10AR, ET AL
TOI: L04I Individual Life - Term Sub-TOI: L04I.500 Other
Product Name: Custom Protection IV B
Project Name/Number: C4B Policies and Riders/C4B10AR, et al

Supporting Document Schedules

Item Status: **Status**
Date:

Satisfied - Item: Flesch Certification

Comments:

See documents attached.

Attachments:

AR FORM CERT.pdf
MCF255AR.PDF
AR Read Cert.pdf
MCF197AR.PDF

Item Status: **Status**
Date:

Satisfied - Item: Application

Comments:

The application to be used with the filed forms is form PL-EOTE, which was approved by your Department on April 14, 2006.

Attachment:

PL-EOTE with variables.pdf



Primerica Life Insurance Company
3120 Breckinridge Boulevard
Duluth, Georgia 30099-0001
(770) 381-1000

STATE OF ARKANSAS

FORM CERTIFICATION

**RE: C4B10AR, C4BI10, C4BS10
C4B15AR, C4BI15, C4BS15
C4B20AR, C4BI20, C4BS20**

We hereby certify that we have carefully reviewed the form (or forms) listed above and to the best of our knowledge and ability find that the said form (or forms) conform to Arkansas Regulation 19 Section 10B, Regulation 49, Ark. Code Ann. 23-79-138 and applicable Departmental requirements.

A handwritten signature in black ink, appearing to read "Steven A. Reidich", positioned above a horizontal line.

Steven A. Reidich
Senior Vice President

December 15, 2009

Date

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

Residents of this state who purchase life insurance, annuities or health 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 the 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 this 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
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 Act's 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.

(please turn to back of page)

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 owning 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 contractholders, 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 nonaffiliate 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 Guaranty 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.



Primerica Life Insurance Company
3120 Breckinridge Boulevard
Duluth, Georgia 30099-0001
(770) 381-1000

STATE OF ARKANSAS
READABILITY CERTIFICATION

COMPANY NAME: Primerica Life Insurance Company

This is to certify that the forms referenced below have achieved a Flesch Reading Ease Score as indicated below and complies with the requirements of Ark. Stat. Ann. Section 66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Language Simplification Act.

FORM NUMBER	SCORE
C4B10AR	54.375
C4BI10	59.218
C4BS10	58.443
C4B15AR	54.375
C4BI15	59.218
C4BS15	58.443
C4B20AR	54.375
C4BI20	59.218
C4BS20	58.443

Steven A. Reidich

Senior Vice President
Title

December 15, 2009

Date

IMPORTANT NOTICE TO POLICYHOLDERS

In the event you have questions about your policy for any reason, please contact your agent. Additionally, you may contact the insurance company issuing this policy at the following address and telephone number:

**PRIMERICA LIFE INSURANCE COMPANY
ATTENTION: POLICYOWNER SERVICE
3120 BRECKINRIDGE BOULEVARD
DULUTH, GEORGIA 30099-0001
TOLL-FREE NUMBER: 1-800-257-4725**

If we at Primerica Life Insurance Company fail to provide you with reasonable and adequate service, you should feel free to contact:

**STATE OF ARKANSAS
ARKANSAS INSURANCE DEPARTMENT
CONSUMER SERVICES DIVISION
1200 WEST 3RD STREET
LITTLE ROCK, AR 72201-1904
1-800-852-5494**

Written correspondence is preferable so that a record of your inquiry is maintained. When contacting your agent, company or the Insurance Department, please have your policy number available.

PRIMERICA LIFE INSURANCE COMPANY

3120 Breckinridge Boulevard, Duluth, Georgia 30099-0001, 1-800-977-8190

Coverage Election Form and Application Agreement

Policy Number: [1234567890]

Owner: [John P Owner]

You may exchange your current coverage for new coverage with the same class by choosing one of these options. After you have made your selection, please read and sign the Application Agreement on the reverse side and return this completed Application in the enclosed self-addressed envelope. If you do not exchange your current coverage, it will continue.

	Coverage Amount			Premium	Choose One
	Primary	Spouse	Other	Beginning [07/01/2008]	
Continue your current coverage Allow your current [CST 95] term insurance coverage to continue with the same coverage amount and new scheduled premium.	[\$100,000]	[\$100,000]	[\$10,000]	[\$151.34]	<input type="checkbox"/>
Exchange Option 1 Exchange to our [Custom IV 20] year term insurance coverage with the same coverage amount and lower premium.	[\$100,000]	[\$100,000]	[\$10,000]	[\$97.57]	<input type="checkbox"/>
Exchange Option 2 Exchange to our [Custom IV 10] year term insurance coverage with the same coverage amount and lower premium.	[\$100,000]	[\$100,000]	[\$10,000]	[\$62.71]	<input type="checkbox"/>
Exchange Option 3 Have your insurance needs changed? There may be other options that better suit your needs.	Contact your agent for assistance on completing this section.				<input type="checkbox"/>
	\$	\$	\$		<input type="checkbox"/>
	<input type="checkbox"/> 10 <input type="checkbox"/> 15 <input type="checkbox"/> 20 _____ Other	<input type="checkbox"/> 10 <input type="checkbox"/> 15 <input type="checkbox"/> 20 _____ Other			

A policy fee is included in this premium.

Current Agent's Name [James L Agent]

Agent Code No. [xxxxx]

Current Agent's Phone No. [xxx/xxx-xxxx]

If you have talked to a different agent and would like to add him or her as your new servicing agent:

New Agent's Name _____ New Agent Code No.

2nd Agent's Name _____ 2nd Agent Code No.



ECF1234567890

Coverage Election Form and Application Agreement (Cont'd)

I agree that: (1) this application shall form a part of the policy; (2) the change requested shall not take effect unless and until this Application is approved by the Company at its Executive Office and any consideration required is paid to the Company; (3) if a new policy is issued, it shall be subject to any assignment of the original policy in force and on file with the Company at its Executive Office; and (4) if a new policy is issued, the beneficiary or beneficiaries and method of settlement shall be the same as under the original policy.

The Owner hereby represents and certifies that he has not made any assignment of the Policy which has not been filed with the Company at its Executive Office.

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance may be guilty of a crime and may be subject to fines and confinement in prison.

(AK)
A person who knowingly and with intent to injure, defraud, or deceive an insurance company files a claim containing false, incomplete, or misleading information is guilty of a felony.

(CA)
For your protection California law requires the following to appear on this form. Any person who knowingly presents a false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

(CO)
It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policy holder or claimant for the purpose of defrauding or attempting to defraud the policy holder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

(DE)
Any person who knowingly, and with intent to injure, defraud or deceive any insurer, files a statement of claim containing any false, incomplete or misleading information is guilty of a felony.

(IN)
A person who knowingly and with intent to defraud an insurer files a statement of claim containing any false, incomplete, or misleading information commits a felony.

(KS)
Any person who knowingly and with intent to defraud, presents any written statement as part of an application for the issuance of insurance or a claim for payment, which such person knows contains materially false information, is guilty of a crime and may be subject to fines and confinement in prison.

(KY)
Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime.

**(LA)
Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.**

(MD)
Any person who knowingly and willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly and willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

(ME)

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefits.

(MN)

A person who files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime.

(NH)

Any person who, with a purpose to injure, defraud or deceive any insurance company, files a statement of claim containing any false, incomplete or misleading information is subject to prosecution and punishment for insurance fraud, as provided in RSA 638:20.

(NJ)

Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

(NM)

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to civil fines and criminal penalties.

(OH)

Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

(OK)

Warning: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

(PA)

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

(TN)

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

(TX)

Any person who knowingly presents a false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

(VA)

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

(WA)

It is a crime to knowingly provide false, incomplete, or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

Dated at: _____ on _____
(State) (Date)

Signature of Owner

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Owner's SSN

Print Primary Insured's Name

--	--	--

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--	--	--	--	--

Primary Insured's SSN

Print Spouse's Name

--	--	--

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Spouse's SSN

Additional Comments: _____

