

SERFF Tracking Number: NALF-126071381 State: Arkansas
Filing Company: Life Insurance Company of the Southwest State Tracking Number: 42319
Company Tracking Number: 8733(0709)
TOI: L09I Individual Life - Flexible Premium Sub-TOI: L09I.101 External Indexed - Single Life
Adjustable Life
Product Name: LSW SecurePlus Paragon
Project Name/Number: LSW SecurePlus Paragon/8733(0709)

Filing at a Glance

Company: Life Insurance Company of the Southwest

Product Name: LSW SecurePlus Paragon SERFF Tr Num: NALF-126071381 State: Arkansas
TOI: L09I Individual Life - Flexible Premium SERFF Status: Closed-Approved- State Tr Num: 42319
Adjustable Life Closed
Sub-TOI: L09I.101 External Indexed - Single Co Tr Num: 8733(0709) State Status: Approved-Closed
Life
Filing Type: Form Reviewer(s): Linda Bird
Authors: Susan Carey, Laurie Disposition Date: 05/18/2009
Trombly, Michelle Goodwin, Susan
Preedom
Date Submitted: 05/12/2009 Disposition Status: Approved-Closed
Implementation Date Requested: On Approval Implementation Date:
State Filing Description:

General Information

Project Name: LSW SecurePlus Paragon Status of Filing in Domicile: Pending
Project Number: 8733(0709) Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:
Explanation for Combination/Other: Market Type: Individual
Submission Type: New Submission Group Market Size:
Overall Rate Impact: Group Market Type:
Filing Status Changed: 05/18/2009 Explanation for Other Group Market Type:
State Status Changed: 05/18/2009
Deemer Date: Created By: Susan Preedom
Submitted By: Susan Preedom Corresponding Filing Tracking Number:
Filing Description:

Today we submit for your review and approval a new Indexed Flexible Premium Adjustable Benefit Life Insurance unisex policy as well as revised rates for four previously approved riders.

Company and Contact

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	05/18/2009	05/18/2009

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Linda Bird	05/15/2009	05/15/2009	Susan Freedom	05/18/2009	05/18/2009

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Disposition

Disposition Date: 05/18/2009

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	Yes
Supporting Document	Application	Yes	Yes
Supporting Document	Health - Actuarial Justification	No	No
Supporting Document	Outline of Coverage	No	No
Supporting Document	Actuarial Memorandum	No	No
Supporting Document	Sample Annual Stmt.	Yes	Yes
Supporting Document	Sample Illustration	Yes	Yes
Supporting Document	Illustration Certification	Yes	Yes
Supporting Document	Responsible Officer	Yes	Yes
Supporting Document	Reserve Methodology	Yes	Yes
Supporting Document	Indexed Procedures	Yes	Yes
Supporting Document	Statement of Variability	Yes	Yes
Supporting Document	Riders - Revised Rates	Yes	Yes
Supporting Document	Third Party Authorization	Yes	Yes
Supporting Document	Cover Letter	Yes	Yes
Supporting Document	Certifications	Yes	Yes
Form	Paragon Unisex	Yes	Yes

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Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 05/15/2009
Submitted Date 05/15/2009
Respond By Date

Dear Susan Freedom,

This will acknowledge receipt of the captioned filing.

Objection 1

No Objections

Comment: Regulation 19s10B requires that all new or revised filings submitted must contain a certification that the submission meets the provisions of this rule as well as all applicable requirements of this Department.

External Indexed contracts are subject to the External Indexed guidelines. Please furnish certification that this filing is in compliance with these guidelines and certifications required by these guidelines.

Please feel free to contact me if you have questions.

Sincerely,

Linda Bird

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Response Letter

Response Letter Status Submitted to State
Response Letter Date 05/18/2009
Submitted Date 05/18/2009

Dear Linda Bird,

Comments:

Response 1

Comments: The certifications are now attached as required.

Thank you for your time and effort.

Related Objection 1

Comment:

Regulation 19s10B requires that all new or revised filings submitted must contain a certification that the submission meets the provisions of this rule as well as all applicable requirements of this Department.

External Indexed contracts are subject to the External Indexed guidelines. Please furnish certification that this filing is in compliance with these guidelines and certifications required by these guidelines.

Changed Items:

Supporting Document Schedule Item Changes

Satisfied -Name: Certifications

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Sincerely,

Laurie Trombly, Michelle Goodwin, Susan Carey, Susan Preedom

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Form Schedule

Lead Form Number:

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	8733AR(0709)	Policy/Cont Paragon Unisex ract/Fraternal Certificate	Initial		72.100	Arkansas.pdf

We, Life Insurance Company of the Southwest, agree to pay the Death Benefit to the Beneficiary, subject to the terms of this policy, when we receive at our Administrative Office due proof that the Insured died while this policy was in force.

Indexed Flexible Premium Adjustable Benefit Life Insurance. Unisex Version. Flexible premiums are payable through the end of the Premium Payment Period or until the prior death of the Insured. The adjustable Death Benefit is payable upon the death of the Insured. This policy is nonparticipating.

Right to Review Policy. This policy, at any time within ten days after its receipt by the Owner, may be returned in person or by mail to us or to the agent through whom it was bought. Upon such return, the policy will be deemed void as of its Effective Date. We will then refund any premium paid.

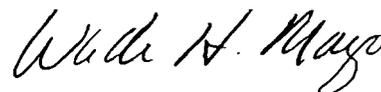
Effective Date: 12/01/2008
Policy Number: LS6100003
Face Amount: \$100,000
Insured: Ethan Allen
Issue Age: 35
Owner: Peter Allen
Beneficiary: As stated in the application unless later changed

The data and the terms on this and all following pages are part of this policy.

This contract is a legal contract between the contract Owner and Life Insurance Company of the Southwest. READ YOUR POLICY CAREFULLY.

Signed for Life Insurance Company of the Southwest at Dallas, Texas, as of the Date of Issue, by


Chairman of the Board


President


Secretary



LIFE INSURANCE COMPANY OF THE SOUTHWEST

ADMINISTRATIVE OFFICE MAILING ADDRESS:

**LIFE INSURANCE COMPANY OF THE SOUTHWEST, ONE NATIONAL LIFE DRIVE, MONTPELIER, VT 05604
CUSTOMER SERVICE: 800-732-8939**

HOME OFFICE ADDRESS:

**LIFE INSURANCE COMPANY OF THE SOUTHWEST, 1300 WEST MOCKINGBIRD LANE, DALLAS, TX 75247
LSW IS A STOCK COMPANY.**

8733AR(0709)

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

Residents of this state who purchase life insurance, annuities or health and accident insurance should know that the insurance companies licensed in this state to write these types of insurance are members of the Arkansas Life and Health Insurance Guaranty Association. ("Guaranty Association"). The purpose of the Guaranty Association is to assure that policy and contract holders 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 policyowners 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 companies that are well-managed and financially stable.

DISCLAIMER

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

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

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

**The Arkansas Life and Health Insurance Guaranty Association
c/o the Liquidation Division
1023 West Capital
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"). On the next page is a brief summary of this 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.

COVERAGE

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

EXCLUSIONS FROM COVERAGE

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

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

The Guaranty Association also does **NOT** provide coverage for:

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

Life Insurance Company of the Southwest

NOTICE TO POLICYHOLDERS

For additional information about your policy benefits or claims, please write or call our administrative offices:

Life Insurance Company of the Southwest (LSW)

One National Life Drive
Montpelier, Vermont 05604
Attention: Customer Service

Telephone: 1-800-732-8939

or call your agent:

Agents Name: _____
Agents Address: _____

Agents Phone Number: _____

If you are not satisfied, you may write or call:

Arkansas Insurance Division
Consumer Services Division
1200 West Third Street
Little Rock, Arkansas 72201-1904

(501) 371-2640

Toll free within Arkansas:

1-800-852-5494

(who code/agency #)

DATA SECTION

POLICY NUMBER: [LS9876543]

EFFECTIVE DATE: [APRIL 15, 2009]

MATURITY DATE: [APRIL 15, 2094]

INSURED: [ETHAN ALLEN]

ISSUE AGE: [35]

FACE AMOUNT: \$[100,000.00]

OWNER: [AS STATED IN THE APPLICATION UNLESS LATER CHANGED]

BENEFICIARY: [AS STATED IN THE APPLICATION UNLESS LATER CHANGED]

MONTHLY POLICY DATE: [15TH]

DEATH BENEFIT OPTION: [A]

MINIMUM MONTHLY PREMIUM: \$ [42.76]

PLANNED PERIODIC PREMIUM: \$ [513.12] PAYABLE [ANNUALLY]

FOR PREMIUM PAYMENT PERIOD: [APRIL 15, 2009 TO APRIL 15, 2094]

THIS POLICY MAY TERMINATE PRIOR TO THE END OF THE PREMIUM PAYMENT PERIOD IF PREMIUMS PAID ARE INSUFFICIENT TO CONTINUE COVERAGE. PREMIUMS IN ADDITION TO THE PLANNED PERIODIC PREMIUM MAY BE NECESSARY TO KEEP THIS COVERAGE IN FORCE.

POLICY LOANS AND WITHDRAWALS WILL REDUCE THE CASH SURRENDER VALUE OF THIS POLICY AND MAY RESULT IN TERMINATION OF THIS POLICY PRIOR TO THE DEATH OF THE INSURED.

MINIMUM COVERAGE AMOUNT: \$100,000.00

WITHDRAWAL FEE: \$25 FOR EACH WITHDRAWAL

ADDITIONAL BENEFIT RIDERS:

THE LOAN INTEREST RATE IS VARIABLE. THE LOAN INTEREST RATE AT THE EFFECTIVE DATE IS [6.50%].

PRGN/U [LS9876543]

DATA SECTION
COVER PAGE

DATA SECTION

GUARANTEED BASIS OF CALCULATIONS

FACE AMOUNT: \$[100,000.00]
EFFECTIVE DATE: [APRIL 15, 2009]

ACCUMULATED VALUE INTEREST RATE: 0.20598% COMPOUNDED MONTHLY, WHICH IS
EQUIVALENT TO 2.50% COMPOUNDED PER YEAR

MORTALITY TABLE: COMMISSIONERS 2001 CSO ULTIMATE, [NON-SMOKER],
AGE NEAREST BIRTHDAY

THE INSURED HAS BEEN CLASSIFIED [PREFERRED NON-TOBACCO].

TABLE OF GUARANTEED MAXIMUM COST OF INSURANCE RATES
(PER \$1,000 PER MONTH)

Attained Age	Rate	Attained Age	Rate	Attained Age	Rate
[35	0.08	65	1.22	95	22.60
36	0.08	66	1.34	96	24.55
37	0.08	67	1.47	97	26.70
38	0.08	68	1.60	98	27.89
39	0.09	69	1.74	99	29.60
40	0.10	70	1.91	100	31.85
41	0.10	71	2.09	101	34.04
42	0.11	72	2.33	102	36.60
43	0.12	73	2.59	103	39.60
44	0.13	74	2.86	104	43.12
45	0.18	75	3.16	105	47.21
46	0.20	76	3.48	106	51.76
47	0.22	77	3.86	107	56.83
48	0.23	78	4.30	108	62.39
49	0.25	79	4.80	109	68.68
50	0.27	80	5.34	110	75.75
51	0.29	81	5.99	111	83.35
52	0.32	82	6.67	112	91.63
53	0.36	83	7.40	113	100.29
54	0.40	84	8.21	114	113.26
55	0.45	85	9.12	115	127.84
56	0.50	86	10.09	116	146.20
57	0.55	87	11.23	117	171.80
58	0.60	88	12.45	118	205.60
59	0.66	89	13.75	119	260.87
60	0.72	90	15.07	Maturity	260.87]
61	0.80	91	16.14	Date	
62	0.89	92	17.38		
63	1.00	93	18.86		
64	1.11	94	20.57		

DATA SECTION

DEFINITION OF LIFE INSURANCE TEST: [GUIDELINE PREMIUM TEST]

GUIDELINE SINGLE PREMIUM: \$[13,695.98]
 GUIDELINE LEVEL PREMIUM: \$[1,176.42]

TABLE OF DEATH BENEFIT STANDARD FACTORS

<u>ATTAINED AGE</u>	<u>DEATH BENEFIT FACTOR</u>	<u>ATTAINED AGE</u>	<u>DEATH BENEFIT FACTOR</u>	<u>ATTAINED AGE</u>	<u>DEATH BENEFIT FACTOR</u>
0 - 40	2.50	54	1.57	68	1.17
41	2.43	55	1.50	69	1.16
42	2.36	56	1.46	70	1.15
43	2.29	57	1.42	71	1.13
44	2.22	58	1.38	72	1.11
45	2.15	59	1.34	73	1.09
46	2.09	60	1.30	74	1.07
47	2.03	61	1.28	75 - 90	1.05
48	1.97	62	1.26	91	1.04
49	1.91	63	1.24	92	1.03
50	1.85	64	1.22	93	1.02
51	1.78	65	1.20	94+	1.01
52	1.71	66	1.19		
53	1.64	67	1.18		

DATA SECTION

FACE AMOUNT: \$[100,000.00]
EFFECTIVE DATE: [APRIL 15, 2009]

AS OF THE EFFECTIVE DATE, THE FOLLOWING RATES ARE APPLICABLE TO INTEREST CREDITING STRATEGIES TO WHICH YOU MAY DIRECT YOUR PREMIUM. THESE RATES ARE IN EFFECT UNTIL FURTHER NOTICE.

FIXED-TERM STRATEGY

FIXED-TERM SEGMENT LENGTH:	1 YEAR
MINIMUM FIXED-TERM SEGMENT INTEREST RATE:	2.50% ANNUAL EFFECTIVE RATE
INITIAL FIXED-TERM SEGMENT INTEREST RATE:	[6.00]% ANNUAL EFFECTIVE RATE

INDEXED STRATEGY 1 – POINT TO POINT

INDEX:	STANDARD & POOR'S 500 INDEX
INDEXED TERM:	1 YEAR
INITIAL PARTICIPATION RATE:	[100]%
GUARANTEED MINIMUM PARTICIPATION RATE:	100%
INITIAL INDEX EARNINGS CAP:	[14.00]%
GUARANTEED MINIMUM INDEX EARNINGS CAP:	3.10%

INDEXED STRATEGY 2 – POINT TO POINT

INDEX:	STANDARD & POOR'S 500 INDEX
INDEXED TERM:	1 YEAR
INITIAL PARTICIPATION RATE:	[140]%
GUARANTEED MINIMUM PARTICIPATION RATE:	110%
INITIAL INDEX EARNINGS CAP:	[12.50]%
GUARANTEED MINIMUM INDEX EARNINGS CAP:	3.00%

INDEXED STRATEGY 3 – POINT TO POINT

INDEX:	STANDARD & POOR'S 500 INDEX
INDEXED TERM:	1 YEAR
INITIAL PARTICIPATION RATE:	[45]%
GUARANTEED MINIMUM PARTICIPATION RATE:	25%
INITIAL INDEX EARNINGS CAP:	NO CAP

INDEXED STRATEGY 4 – POINT TO AVERAGE

INDEX:	STANDARD & POOR'S 500 INDEX
INDEXED TERM:	1 YEAR
INITIAL PARTICIPATION RATE:	[80]%
GUARANTEED MINIMUM PARTICIPATION RATE:	30%
INITIAL INDEX EARNINGS CAP:	NO CAP

DATA SECTION

FACE AMOUNT: \$[100,000.00]
EFFECTIVE DATE: [APRIL 15, 2009]

PERCENT OF PREMIUM EXPENSE CHARGE: 6%

MONTHLY PERCENT OF ACCUMULATED VALUE CHARGE: .04%

MONTHLY ADMINISTRATIVE CHARGE PER THOUSAND: \$[0.185]

MONTHLY POLICY FEE: \$5.00

SURRENDER CHARGES

TWELVE MONTH PERIOD <u>BEGINNING</u>	<u>SURRENDER CHARGE</u>
[APR 15, 2009	\$1,200.00
APR 15, 2010	\$1,200.00
APR 15, 2011	\$1,200.00
APR 15, 2012	\$1,200.00
APR 15, 2013	\$1,200.00
APR 15, 2014	\$1,013.00
APR 15, 2015	\$821.00
APR 15, 2016	\$623.00
APR 15, 2017	\$421.00
APR 15, 2018	\$213.00
APR 15, 2019 AND LATER	\$0.00]

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We, Life Insurance Company of the Southwest, agree to pay the Death Benefit to the Beneficiary, subject to the terms of this policy, when we receive at our Administrative Office due proof that the Insured died while this policy was in force.

GENERAL TERMS OF THIS POLICY

CONSIDERATION

This policy is issued in consideration of the application and payment of the first premium. We will incur no liability if no premium is paid.

ENTIRE CONTRACT

On the Effective Date the entire contract between the parties is this policy and a copy of the application and all riders and endorsements which are attached at issue. Any change of this contract must be written and may be made only by one of our authorized officers or registrars. We will send the Owner a copy of any application for a change which we approve. It and any additional Data Section shall become part of this contract on the effective date of such change.

REPRESENTATIONS

Any statement made by or for the Insured shall be deemed a representation and not a warranty. Unless such statement is in the attached application or in any subsequent application, it shall not be used to:

1. make this policy void; or
2. make any increase in Face Amount void; or
3. make any Reinstatement void; or
4. defend any claim.

INCONTESTABILITY

After this policy has been in force during the life of the Insured for two years from the Effective Date of the policy, we will not contest it; however,

1. we may contest any increase in Face Amount for which an application is required until such increase has been in force during the life of the Insured for two years from its Effective Date; and
2. we may contest any Reinstatement until such Reinstatement has been in force during the life of the Insured for two years from its Effective Date.

*Life Insurance Company of the Southwest
Administrative Office: One National Life Drive * Montpelier, Vermont 05604 * (800) 732-8939
Home Office: 1300 West Mockingbird Lane * Dallas, Texas 75247*

POLICY EFFECTIVE
DATES

The insurance coverage goes into effect on the Effective Date shown in the Data Section.

Any increase in Face Amount for which an application is required shall become effective on the Monthly Policy Date on or next following the date we approve the application for such increase in Face Amount.

Any increase in Face Amount for which an application is not required shall become effective on the Monthly Policy Date on or next following the date we receive the request for such increase unless otherwise provided by the policy.

Any decrease in Face Amount requested shall become effective on the Monthly Policy Date on or next following the date we receive the request for such decrease.

Any Reinstatement of this policy shall become effective on the Monthly Policy Date on or next following the date we approve the application for Reinstatement.

Any change of Death Benefit Option shall become effective on the Monthly Policy Date on or next following the date we receive the request for such change.

POLICY MONTHS,
YEARS AND
ANNIVERSARIES

Policy Months, Years and Anniversaries shall be measured from the Effective Date. The Monthly Policy Date shown in the Data Section occurs on the same day each month or on the last day of any month having no such date. The Effective Date is the first Monthly Policy Date.

MISSTATEMENT OF
AGE

The Issue Age shown in the Data Section is the age of the Insured on his or her last birthday as of the Effective Date. It is based on the information shown in the application.

If the age of the Insured has been misstated, we will adjust the Face Amount to be the amount it would have been had the Monthly Deduction on the date the adjustment takes effect been based on the correct age of the Insured. The adjustment shall take effect on the Monthly Policy Date on or next following the date we receive proof to our satisfaction of such misstatement. If the Insured has died, we will adjust the Face Amount as of the last Monthly Policy Date prior to the Insured's death.

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ATTAINED AGE

The Attained Age of the Insured on any date is the Issue Age shown in the Data Section plus the number of Policy Years and Months which have passed since the Effective Date.

PAYMENT OF BENEFITS

We will pay all benefits under this policy at our Administrative Office. Before payment of any Death Benefit we may investigate the death.

POSTPONEMENT OF BENEFITS

We may delay payment of any amounts which are payable as a result of Cash Surrender or Withdrawal for up to six months after we receive written request in a form satisfactory to us. If we defer such payment for more than 30 days, we will pay interest at a rate not less than 2.00% per year or as mandated by state law, from the date we receive such request to the date of payment.

We may also delay payment of any amounts which are payable as a result of a Policy Loan for up to six months after we receive written request in a form satisfactory to us.

We have the right to postpone payment which is derived from any amount recently paid to us by check or draft, until we are satisfied the check or draft has been paid by the bank or other financial institution on which it is drawn.

BASIS OF VALUES

The guaranteed values for this policy are equal to or greater than those required by the law of the state where this policy is delivered. The guaranteed values are based on the Accumulated Value Interest Rate and Mortality Table shown in the Data Section. A detailed statement of the method of computing values has been filed in the state in which this policy is delivered.

The Paid Up Annuity Values, and all tabled values in Payment Options, are based on the 2000 Table for Individual Annuitant Mortality (IAM) and compound interest at a rate of 1.50% per year.

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NOTICES

Unless this policy provides otherwise, any requests for changes or notices:

1. from us to the Owner shall be sent to the last address known to us of the Owner; and
2. from us to an assignee shall be sent to the last address known to us of such assignee; and
3. from the Owner or an assignee to us must be in writing and received by us at our Administrative Office in Montpelier, Vermont.

ANNUAL REPORT

At least once each Policy Year we will send a report to the Owner. The report will show, as of its date:

1. the Accumulated Value; and
2. the Cash Surrender Value; and
3. any debt to us on this policy; and
4. the Death Benefit.

The report will also show a summary of transactions of the previous year and any information required by law.

PROJECTION REPORT

The Owner may request, in writing, a report which projects future values and future Death Benefits for this policy. The report will also show any information required by law. We may charge a fee for the report. The Projection Report will be based on:

1. data the Owner gives us as to Face Amount and premiums; and
2. such assumptions as either the Owner or we specify.

ROLES IN THIS POLICY

OWNER

The Owner may:

1. exercise the rights under this policy; and
2. assign the policy; and
3. release or discharge the policy; and
4. change the policy if we agree to such change; and
5. enjoy the benefits under this policy.

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These actions may be taken without the consent and against the interest of any Beneficiary and any contingent owner. If the Owner cannot change the Beneficiary, these actions may be taken only by the Owner and the Beneficiary jointly. These actions may be taken only while the Insured is alive.

BENEFICIARY

The Owner has the right to change the Beneficiary. If the Owner expressly waives this right, no change can be made. Unless later changed, the Beneficiary shall be as stated in the application. The interest of any Beneficiary who dies before the Insured shall vest in the Owner unless otherwise stated.

If used, the term "children" of any person shall include only lawful children born to or legally adopted by that person.

We may rely on an affidavit by any person who in our judgment knows the facts to identify any Beneficiary or payee not specified by name. All our liability shall cease when we pay on the basis of such affidavit.

TRUST BENEFICIARY

Unless an authorized officer or registrar of the Company explicitly agrees in writing, the following provision shall apply when a trust is named as Beneficiary.

In no event is the Company responsible for the application or disposition of any proceeds it pays to a Trust Beneficiary. Payment to a Trust Beneficiary is a full discharge of the liability of the Company. If a designated trust provides for successor trustees, the designation in this policy includes successor trustees. Likewise, if the trust allows amendments, the trust, if so amended, remains as a designated Beneficiary.

A Trust Beneficiary is considered to be a Beneficiary who did not survive the Insured if:

1. the trust has been terminated; or
2. the specified testamentary trust does not qualify as such; or
3. for any other reason a Trust Beneficiary is not entitled to any proceeds.

CHANGE OF BENEFICIARY

If the Owner has the right, a new Beneficiary may be named from time to time during the life of the Insured by filing at our Administrative Office written notice in such form as we may require. When notice is received at our Administrative Office, the change shall take effect on the date the notice is signed whether or not the Insured is living at the time of receipt. We will not be liable for any payment we make before receipt of the written notice at our Administrative Office.

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ASSIGNMENTS

We are not responsible for the validity or effect of any assignment of this policy. We will not recognize any assignment until it has been filed at our Administrative Office. The interest of any Beneficiary whom the assignor can change and of any contingent owner shall be transferred to the assignee by the terms of any assignment. If the assignee acquires a right to proceeds, they shall be paid in one sum even though a Payment Option may be in effect at the time the assignment was signed.

SPENDTHRIFT PROVISION

If we receive at our Administrative Office written request by the Owner for this Spendthrift Provision, then, to the extent allowed by law:

1. only the Owner may transfer, anticipate, commute, or encumber the proceeds of this policy; and
2. only legal process against the Owner may affect the proceeds of this policy.

Any proceeds payable after this request is withdrawn by the Owner shall not be affected by this provision.

PREMIUMS

POLICY PROTECTION PERIOD

The first 60 policy months following the Effective Date of this policy is referred to as the Policy Protection Period. An increase in coverage does not initiate a new Policy Protection Period.

PAYMENT OF PREMIUMS

The first premium is due on the Date of Issue. This first premium cannot be less than the Minimum Monthly Premium shown in the Data Section.

During the Policy Protection Period the payment of cumulative premiums, in excess of withdrawals and loans, at least equal to the Minimum Monthly Premiums payable since the Effective Date of the policy will keep the policy in force to the next Monthly Policy Date, as long as the Accumulated Value is sufficient to provide for Monthly Deductions. Otherwise, this policy will remain in force as long as the Cash Surrender Value is sufficient to provide for Monthly Deductions.

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The Planned Periodic Premiums are the premiums the Applicant has chosen to pay. Planned Periodic Premiums may be paid on an annual, semi-annual, quarterly, or monthly basis. The Owner may change the amount or frequency of such premiums at any time by sending a written notice to us at our Administrative Office. However, we may limit any increase in either amount or frequency.

Premiums in addition to the Planned Periodic Premiums may be necessary to keep this policy and the coverages provided by this policy and any additional benefit riders in force.

We will accept Unscheduled Premiums, which are premiums in addition to the Planned Periodic Premiums. We may limit the number and amount of Unscheduled Premiums.

All premiums are limited by a minimum and a maximum. The minimum is \$25 per premium. The maximum is the limit imposed by the Internal Revenue Code for qualifying the policy as "Life Insurance" for Federal Income Tax purposes, or such lower amount as we may set. We will not accept any premium in excess of the maximum. We will return any premiums not accepted and any interest credited to such premiums to the Owner within 60 days after the end of the Policy Year in which the premiums were received.

The first premium may be paid to us either through our duly authorized agent in exchange for a receipt signed by that agent or at our Administrative Office. All later premiums must be paid to us at our Administrative Office.

No premium will be accepted on or after the Maturity Date.

NET PREMIUM

A Net Premium is determined by multiplying a premium received times 1 minus the Percent of Premium Expense Charge stated in the Data Section.

GRACE PERIOD

If on any Monthly Policy Date the Cash Surrender Value is less than the Monthly Deduction on such date, a Grace Period shall start, unless:

1. the policy is within the Policy Protection Period; and
2. the Accumulated Value less any debt to us on this policy is greater than the Monthly Deduction on that date; and
3. the cumulative premiums paid since the policy's Effective Date, less any withdrawals and less any debt to us on this policy, are greater than or equal to the cumulative Minimum Monthly Premiums due since the policy's Effective Date.

A Grace Period shall be 61 days. During a Grace Period this policy shall remain in force.

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The premium needed to keep the policy in force beyond a Grace Period which ends during the Policy Protection Period shall equal the greater of (a) or (b) where:

- a) equals the sum of the Minimum Monthly Premiums in effect on the policy over all of the months from the Effective Date of the policy to the start of the Grace Period, plus all withdrawals, plus three times the Minimum Monthly Premium in effect at the beginning of the Grace Period, plus any debt to us on this policy, less all premiums paid; and where
- b) equals the premium which will be sufficient to produce an Accumulated Value, net of policy debt, equal to two times the Monthly Deduction due on the date the Grace Period began.

The premium needed to keep the policy in force beyond a Grace Period which ends after the Policy Protection Period shall be the premium sufficient to produce a Cash Surrender Value equal to three times the Monthly Deduction due on the date the Grace Period began.

We will mail notice of the premium needed to the Owner. If such premium is unpaid on the later of:

1. the last day of the Grace Period; or
2. the 31st day after such notice is sent;

then this policy shall terminate without value.

A Grace Period will not begin solely because payments of Planned Periodic Premiums are discontinued. Whether or not premiums are paid, Monthly Deductions will be made from the Accumulated Value. The terms of this Grace Period provision will determine if and when a Grace Period starts.

REINSTATEMENT

If this policy terminates after the end of a Grace Period, it may be reinstated. It must be reinstated on a Monthly Policy Date within five years from the start of such Grace Period and prior to the Maturity Date.

For Reinstatement we will require:

1. an application for Reinstatement; and
2. proof to our satisfaction that the Insured is insurable; and
3. payment of an amount determined as follows:
 - a) If Reinstatement occurs during a Policy Protection Period, the required payment shall be an amount equal to the premium which will be sufficient to produce an Accumulated Value, net of policy debt, four times the Monthly Deduction due on the date the Grace Period began, or, if greater:
 - i. the sum of the Minimum Monthly Premiums in effect on the policy over all the months from the Effective Date of this policy to the start of the Grace Period; plus
 - ii. all withdrawals; plus
 - iii. three times the Minimum Monthly Premium shown in the Data Section; plus
 - iv. any debt to us on this policy; less
 - v. all premiums paid.
 - b) If Reinstatement occurs after the Policy Protection Period, the required payment shall be a premium which will make the Cash Surrender Value sufficient to provide:
 - i. two times the Monthly Deduction due on the date the Grace Period began; plus
 - ii. three times the Monthly Deduction due on the date of Reinstatement.

We will send the Owner notice of the required payment upon request.

In the event of Reinstatement:

1. the Accumulated Value of the policy at the time of final lapse will be restored along with the Cash Value available for deductions at the time that the Grace Period began; and
2. the schedule of Surrender Charges for the policy months following the date the Grace Period began shall become the schedule of Surrender Charges for the policy months following the date of Reinstatement; and
3. the schedule of Monthly Expense Charges for the policy months following the date the Grace Period began shall become the schedule of Monthly Expense Charges for the policy months following the date of Reinstatement.

DEATH BENEFIT AND POLICY CHANGES

DEATH BENEFIT

We will pay the Death Benefit to the Beneficiary when we receive at our Administrative Office due proof that the Insured died while this policy was in force. We will pay the Death Benefit in one sum unless a Payment Option is chosen. If the Death Benefit is paid in one sum, it shall be increased by interest from the date of the Insured's death to the date of payment. We will set the rate of interest at not less than 2.00% per year or as mandated by state law. If the Death Benefit is not paid within 30 days after we receive at our Administrative Office due proof that the Insured died while this policy was in force, the rate of interest shall be 8% per year.

DEATH BENEFIT OPTIONS

The Owner may elect either of two Death Benefit Options, Option A or Option B, for the period prior to the Insured's Attained Age 120. The Death Benefit Option is stated in the Data Section.

Option A. Under Option A, the Death Benefit is equal to the greater of:

1. the Face Amount of the policy on the date of the Insured's death; or
2. the Death Benefit Factor shown in the Data Section multiplied by the Accumulated Value on the date of the Insured's death;

less the amount of any Monthly Deductions then due and any debt to us on this policy.

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Option B. Under Option B, the Death Benefit is equal to the greater of:

1. the Face Amount plus the Accumulated Value of the policy on the date of the Insured's death; or
2. the Death Benefit Factor shown in the Data Section multiplied by the Accumulated Value on the date of the Insured's death;

less the amount of any Monthly Deductions then due and any debt to us on this policy.

CHANGES IN FACE
AMOUNT AND
DEATH BENEFIT
OPTION

The Owner may request any of the following changes. We will make a change subject to the conditions stated. These changes may be made only while the Insured is living and after the first Policy Anniversary. We will send the Owner a revised or additional Data Section if any of these changes is made.

Face Amount Increases. We will require an application from the Owner and proof to our satisfaction that the Insured is then insurable. An increase in Face Amount must satisfy the Minimum Coverage Amount requirements of the policy and shall be effective upon the Monthly Policy Date on or next following our approval.

Face Amount Decreases. We will require a written request from the Owner. A decrease in Face Amount shall be effective upon the Monthly Policy Date on or next following our receipt of the request.

Decreases shall not be permitted which would reduce the sum of the Face Amount plus the Sums Insured of any riders for Additional Protection Benefit attached to this policy to less than any of the following:

1. the minimum insurance amount for which the policy would qualify as "Life Insurance" for Federal Income Tax purposes under the Internal Revenue Code; or
2. the Minimum Coverage Amount shown in the Data Section; or
3. 75% of the largest sum of the Face Amount plus the Sums Insured of any Riders for Additional Protection Benefit attached to this policy in force at any time in the twelve policy months prior to our receipt of the request.

A decrease in total insurance coverage shall apply in the following order:

1. first, to any increases in Face Amount or to the addition of any rider for Additional Protection Benefit providing coverage on the life of the Insured, in the reverse order in which they were made;
2. second, to the Face Amount on the Date of Issue.

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If both an increase in Face Amount and the addition of a rider for Additional Protection Benefit providing coverage on the life of the Insured became effective on the same date, a decrease in total insurance coverage made effective on that date shall apply in the following order:

1. first, to any increase in total insurance coverage resulting from the addition of a Rider for Additional Protection Benefit providing coverage on the life of the Primary Insured;
2. second, to any increase in Face Amount;
3. third, to the Face Amount on the Date of Issue.

Death Benefit Option Changes.The Death Benefit Option may be changed once each Policy Year after the first Policy Anniversary prior to the Insured's Attained Age 120. We will require a written request from the Owner. A change will be effective on any Monthly Policy Date requested. The change may be made only if after such change the policy would qualify as "Life Insurance" for Federal Income Tax purposes under the Internal Revenue Code. The Minimum Monthly Premium will be recomputed to reflect the change in Options.

1. Upon a change from Option A to Option B, the Face Amount shall decrease by an amount equal to the Accumulated Value of the policy just prior to the Effective Date of the change. However, the change may be made only if after such change the Face Amount would not be less than the Minimum Face Amount shown in the Data Section.
2. Upon a change from Option B to Option A, the Face Amount shall increase by an amount equal to the Accumulated Value just prior to the Effective Date of the change. No additional Surrender Charges shall be imposed solely because of this change.

SUICIDE LIMITATION

If the Insured dies within two years of the Effective Date as the result of suicide, while sane or insane, we will pay only a sum equal to:

1. the premiums paid; less
2. any withdrawals made; less
3. any debt to us on this policy.

Payment will be made to the Beneficiary.

A similar two-year period shall apply to any increase in Face Amount for which an application is required. Such period shall begin on the Effective Date of any such increase. During such period if the Insured dies as the result of suicide, while sane or insane, we will pay, in lieu of any such increase in Face Amount, only a sum equal to the Cost of Insurance that we have deducted from the Accumulated Value for such increase.

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INTEREST CREDITING STRATEGIES

Accumulated Value in this policy is apportioned into one or more segments distinguished by their interest crediting strategies. Six interest crediting strategies are made available under this policy.

BASIC STRATEGY

Interest will be credited to the Accumulated Value in the Basic Strategy on a daily basis at a rate not less than 2.50% per year.

The Basic Strategy Minimum Value for a Policy Year is equal to 12.5 times the Monthly Deduction due on the first day of that Policy Year. It will remain unchanged until the first day of the next Policy Year.

All Net Premiums are paid into the Basic Strategy. On the 21st day of each month, the Accumulated Value in the Basic Strategy that is in excess of the Basic Strategy Minimum Value, subject to a minimum amount of \$50.00, will be transferred to one or more of five interest crediting strategies, including the Fixed-Term Strategy and Strategies 1, 2, 3, and 4, according to an allocation selected by the Applicant at the time of policy application. The Owner has the right to change the allocation selection.

FIXED-TERM STRATEGY

Each transfer of Accumulated Value made to this strategy creates a distinct Fixed-Term Segment. Each Fixed-Term Segment will have a duration of one year. Interest will be credited to the Accumulated Value in each Fixed-Term Segment on a daily basis at a rate not less than 2.50% per year.

Accumulated Value cannot be transferred out of any Fixed-Term Segment prior to the end of its one-year duration and at that time will be automatically transferred to the Basic Strategy. Different Fixed-Term Segments may be credited interest at different rates.

INDEXED STRATEGIES

Each transfer of Accumulated Value made to an Indexed Strategy creates a distinct Indexed Segment. Each Indexed Segment will have a crediting period of one year. Index Earnings will be credited to the Accumulated Value in each segment at the end of the crediting period.

The Index Earnings for Indexed Strategies 1, 2, and 3 will be credited to Accumulated Value in each Indexed Segment at the end of the crediting period based on the performance of the Index on such day (Point-to-Point). The Index Earnings for Indexed Strategy 4 will be credited to Accumulated Value in each Indexed Segment at the end of the crediting period based on the performance of the Index averaged throughout the preceding twelve months (Point-to-Average).

Index. Index refers to the Standard & Poor's 500 Index, excluding dividend income. It will be used in the determination of Index Earnings made to each segment within an Indexed Strategy. If the publication of the Index is discontinued, a suitable index will be substituted and you will be notified of such index.

Index Value. The Index Value as of any date is the published value of the Index at the close of business on that date. If no value was published on that date, the last published value of the Index will be used.

Index Growth. The Index Growth for an Indexed Segment is calculated at the end of the segment's crediting period.

The Index Growth for the Indexed Strategies 1, 2, and 3 is the following:

1. the Index Value as of the one-year anniversary of the Indexed Segment; minus
2. the Index Value as of the inception of the Indexed Segment; this difference divided by
3. the Index Value as of the inception of the Indexed Segment.

The Index Growth for Indexed Strategy 4 is the following:

1. the sum of the Index Values for each day the Index Value was published between the inception of the Indexed Segment and the one-year anniversary of the Indexed Segment, excluding the Index Value at the inception but including the Index Value on its anniversary; divided by
2. the number of days the Index Value was published between the inception of the Indexed Segment and the one-year anniversary of the Indexed Segment excluding the day it was created but including the anniversary; minus
3. the Index Value as of the inception of the Indexed Segment; this difference divided by
4. the Index Value as of the inception of the Indexed Segment.

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Participation Rate. Each Indexed Segment will have a Participation Rate. The Participation Rate is determined in advance of establishment of an Indexed Segment. The Participation Rate will never be less than the Guaranteed Minimum Participation Rate for the applicable strategy shown in the Data Section.

Index Earnings Cap. Each Indexed Segment will have an Index Earnings Cap. The Index Earnings Cap is determined in advance of establishment of an Indexed Segment. The Index Earnings Cap for a segment will never be less than the Guaranteed Minimum Cap for the applicable strategy shown in the Data Section.

Index Earnings. The Index Earnings for each Indexed Segment are calculated at the end of the crediting period of such segment as follows:

1. the Index Growth for the segment multiplied by the segment's Participation Rate, with this product adjusted so that it is no less than zero and no greater than the segment's Index Earnings Cap; multiplied by
2. the value of the Indexed Segment at the end of the crediting period.

The Owner may not transfer Accumulated Value in an Indexed Segment out of that segment prior to the end of the segment's crediting period. At the end of the crediting period the Accumulated Value in the Indexed Segment is automatically transferred to the Basic Strategy.

POLICY VALUES

ACCUMULATED VALUE

The Accumulated Value on the policy Effective Date is the initial Net Premium minus the initial Monthly Deduction.

The Accumulated Value on any other date is equal to the sum of the values of the Basic Strategy, the Fixed-Term Strategy, Indexed Strategies 1, 2, 3, and 4, and the value of any loan collateral account. Upon termination of the policy, however, the Accumulated Value will be no less than the accumulation at 2.50% per year of Net Premiums minus Monthly Deductions minus Withdrawals.

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MONTHLY DEDUCTION

The Monthly Deduction due on a Monthly Policy Date shall be the Monthly Cost of Insurance, plus the Monthly Expense Charge Per Thousand, plus the Monthly Policy Fee, plus the Monthly Percent of Accumulated Value Charge, plus the monthly cost of any additional benefit riders in force on this policy.

Monthly Deductions will be taken from the Accumulated Value of the policy in the following order:

1. first, from the Basic Strategy until exhausted;
2. second, from the Fixed-Term Strategy until exhausted;
3. third, from the Indexed Strategy 4 until exhausted;
4. fourth, from the Indexed Strategy 1 until exhausted;
5. fifth, from the Indexed Strategy 2 until exhausted; and
6. sixth, from the Indexed Strategy 3 until exhausted.

If the Fixed-Term Strategy and/or the Indexed Strategies have multiple segments, deductions are made in the reverse order in which the segments were created.

MONTHLY COST OF INSURANCE

The Monthly Cost of Insurance shall be based on the risk classification and duration of this policy, and the Insureds Issue Age.

The Monthly Cost of Insurance for a given policy is equal to:

1. the applicable Monthly Cost of Insurance Rate; multiplied by
2. the excess of:
 - a) the Death Benefit plus any debt to us on such date, divided by the sum 1 plus the monthly Accumulated Value Interest Rate shown in the Data Section; over
 - b) the Accumulated Value of this policy on such date.

CASH SURRENDER AND WITHDRAWALS

CASH SURRENDER VALUE

The Owner may, by written request to us, surrender this policy while the Insured is living for its Cash Surrender Value. We may require that the policy be returned to us. When this policy has been surrendered, it shall be null and void and all rights shall cease.

The Cash Surrender Value on any day shall be equal to:

1. the Accumulated Value on such day; less
2. any Surrender Charge which applies on such day; less
3. any debt to us on this policy.

The Surrender Charges are shown in the Data Section.

WITHDRAWALS

After the first Policy Anniversary and prior to the last day of the Premium Payment Period, the Owner may make withdrawals by written request to us. Withdrawals shall be subject to all of the following terms.

1. Withdrawals may be made only on a Monthly Policy Date which follows receipt of such request.
2. A Withdrawal Fee of \$25.00 will be charged for each withdrawal made.
3. The amount withdrawn may not exceed the Cash Surrender Value on the Monthly Policy Date less three times the Monthly Deduction for such Monthly Policy Date.
4. The Accumulated Value will be decreased by the amount of the withdrawal.
5. If Death Benefit Option A is in effect on the date of the withdrawal, the Face Amount of the policy will be reduced by an amount equal to the amount of the withdrawal plus the Withdrawal Fee.

Withdrawals, including the Withdrawal Fee, are made from the Accumulated Value in the following order:

1. first, from the Basic Strategy until exhausted;
2. second, from the Fixed-Term Strategy until exhausted;
3. third, from Indexed Strategy 4 until exhausted;
4. fourth, from Indexed Strategy 1 until exhausted;
5. fifth, from the Indexed Strategy 2 until exhausted; and
6. sixth, from the Indexed Strategy 3 until exhausted.

If the Fixed-Term Strategy and/or the Indexed Strategies have multiple segments, withdrawals are made in the reverse order of which the segments were created.

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We may defer payment of any withdrawal for not more than six months. If we defer such payment for more than 30 days, we will pay interest from the date we receive such request to the date of payment at a rate not less than 2.00% or as mandated by state law.

POLICY LOANS

POLICY LOANS

We will loan an amount up to the Loan Value of the policy less the amount of any outstanding debt, at any time after the first Policy Year. At the time of the loan the policy must be in force. The policy shall be the sole security for the loan and must be duly assigned to us.

Two policy loan options are available with this policy: a Fixed Net Cost Loan and a Variable Net Cost Loan. The loan option is selected at the time a loan is taken, and all outstanding loans must use the same loan option. The Owner may change the loan option only on a Policy Anniversary.

LOAN VALUE

The Loan Value on any day is equal to:

1. the Accumulated Value on such day; less
2. the Surrender Charge on such day, if applicable; less
3. three times the Monthly Deductions due on the most recent prior Monthly Policy Date.

LOAN INTEREST RATE

Any loan shall bear interest from the date the loan is made. The Loan Interest Rate may change from Policy Year to Policy Year.

The Loan Interest Rate on the Effective Date of the policy is stated in the Data Section. Such rate shall apply to any debt to us on this policy until the rate is changed by us. We may change the Loan Interest Rate only on a Policy Anniversary, after which the changed rate will apply to any new or existing debt to us on the policy. The Loan Interest Rate is subject to a minimum annual interest rate of 3.00% and shall not exceed the Maximum Rate allowed. The Maximum Rate allowed is the greater of:

1. the Published Monthly Average for the calendar month ending two months before the calendar month in which the Policy Anniversary occurs; or
2. the yearly Accumulated Value Interest Rate shown in the Data Section plus 1%.

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The Published Monthly Average shall be the Moody's Corporate Bond Yield Average - Monthly Average Corporates, as published by Moody's Investors Service, Inc., or any successor to it. If at any time that Published Monthly Average is no longer published, a substantially similar average, established under the law of the state where this policy was delivered, shall be used.

If on any Policy Anniversary the Maximum Rate then allowed is at least 0.50% per year less than the Loan Interest Rate in effect for this policy during the prior Policy Year, we will decrease the Loan Interest Rate for this policy. If on any Policy Anniversary the Maximum Rate then allowed is at least 0.50% per year more than the Loan Interest Rate in effect on this policy during the prior Policy Year, we may increase such Loan Interest Rate. If increased, it shall be increased to a rate not greater than the Maximum Rate then allowed.

We will give to the Owner:

1. notice of the Loan Interest Rate in effect for this policy at the time a loan is made; and
2. at least 30 days' advance notice of any increase in the Loan Interest Rate, if there is any debt to us on this policy.

In no event shall the Loan Interest Rate exceed the highest loan interest rate allowed by law of the state in which this policy is delivered.

FIXED NET COST LOAN

Accumulated Value in the amount of the Fixed Net Cost Loan plus any unpaid loan interest will be removed from the Interest Crediting Strategies of the policy and held in a Loan Collateral Account. Accumulated Value will be removed from the Interest Crediting Strategies in the following order:

1. first, from the Basic Strategy until exhausted;
2. second, from the Fixed-Term Strategy until exhausted;
3. third, from Indexed Strategy 4 until exhausted;
4. fourth, from Indexed Strategy 1 until exhausted;
5. fifth, from the Indexed Strategy 2 until exhausted; and
6. sixth, from the Indexed Strategy 3 until exhausted.

If the Fixed-Term Strategy and/or the Indexed Strategies have multiple segments, deductions will be made in the reverse order in which the segments were created.

The Accumulated Value removed from the Interest Crediting Strategies to establish a Loan Collateral Account will be held apart from other Accumulated Value in this policy and may be credited interest at a different rate than that of other Accumulated Value in the policy. For the first ten Policy Years it will be credited interest at a rate 1.25% lower than the Loan Interest Rate. In the eleventh and later Policy Years the interest rate charged for a Fixed Net Cost Loan and the interest rate credited to the Loan Collateral Account will be equal and the same as the Loan Interest Rate.

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*Home Office: 1300 West Mockingbird Lane * Dallas, Texas 75247*

Repayments of the loan, including payments of loan interest, will be applied to the outstanding loan balance, and the amount repaid will be deposited into the Basic Strategy. The amount of Accumulated Value held in the Loan Collateral Account will be reduced by the amount of the repayment.

VARIABLE NET COST LOAN

Accumulated Value is not removed from the Interest Crediting Strategies if a Variable Net Cost Loan is taken. All Accumulated Value in this policy will continue to earn interest or Index Earnings as stated in the Interest Crediting Strategies section of this policy.

A Variable Net Cost Loan will be charged interest at the Loan Interest Rate. There is no fixed relationship between the interest credited to Accumulated Value in this policy and the interest assessed on a Variable Net Cost Loan.

GENERAL LOAN TERMS

After the loan is made, loan interest shall be due on the next and all later Policy Anniversaries. If any interest is not paid when due, it shall be added to the loan and bear interest on the same terms.

The debt secured by this policy includes loans, unpaid loan interest and accrued loan interest not otherwise due.

All or any part of the debt may be paid to us at any time prior to:

1. the death of the Insured; and
2. surrender of the policy.

However, during a Grace Period the debt may not be repaid. Unless the Owner specifies, any payment to us shall be deemed a premium payment and not payment of the debt. At the death of the Insured or upon the surrender of the policy, all debt shall become due at once. It shall be paid from the policy values.

We may defer any policy loan, other than one to pay premiums on our policies, for not more than six months.

PAYMENT OPTIONS

In lieu of a lump sum settlement, all or part of the proceeds of this policy may be applied under a Payment Option. When proceeds are applied under a Payment Option, all other rights and benefits under this policy shall cease.

In addition to the following options, other payment options may be available.

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OPTION EFFECTIVE
DATE

The Option Effective Date is the date the proceeds become payable.

GENERAL PAYMENT
OPTION TERMS

If the proceeds to be placed under a Payment Option are less than \$5,000, we may pay them in one sum to the payee who otherwise would receive the first payment under the option. If any payments would be less than \$100, we will change the frequency to provide payments of at least \$100.

If the proceeds are assigned on the Option Effective Date, we will pay the assignee's share in one sum and place only the balance under the option. After the Option Effective Date neither the payments nor the remaining value may be assigned or encumbered. To the extent the law permits, they are not subject to any claims against the payee.

We may require proof to our satisfaction that any payee is alive on the date any payment is due.

CHOICE OF
OPTION

Choice of an option may be made:

1. by the Owner if the Insured is living; or
2. by the Beneficiary if the Insured is not living and if no option is in effect.

Equivalent payments for 12-, 6-, 3-, or 1-month intervals may be chosen. The options are described in terms of monthly payments. We will quote the amount of other payments on request.

We may issue a document stating the terms of the option.

CHANGE OF
PAYMENT OPTION

The right to change Payment Options exists under Options 1, 2, and 4. At the time of change the remaining value under the old option shall become the proceeds to be placed under the new option.

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LUMP SUM
REMOVAL OF
PROCEEDS APPLIED
UNDER A PAYMENT
OPTION

Lump sum payments may be taken from the remaining proceeds placed under Payment Options 1, 2, and 4.

Under Options 1 and 4 all or any part of the remaining value may be taken at any time, though no more than four transactions may be made during any calendar year.

Under Option 2 the entire remaining value may be taken at any time.

No lump sum removal of proceeds may be made under Options 3, 5, 6, or 7.

OPTION 1
-PAYMENT OF
INTEREST ONLY

Interest at a rate of 1.50% per year shall be paid either for:

1. the life of a chosen human being; or
2. a chosen period.

We may pay more interest in any given year. Upon the earlier of the death of the chosen human being or the end of the chosen period, any remaining value will be paid. The first payment shall be made one month after the Option Effective Date. If the payee is not a human being, payments may not continue for more than 30 years.

OPTION 2
-PAYMENTS FOR A
STATED TIME

Equal monthly payments shall be made for a stated number of years. The first payment shall be made on the Option Effective Date. The amount of each monthly payment is shown in the table. The monthly payments are based on an interest rate of 1.50% per year. We may pay more interest in any year.

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Option 2 Table
Monthly Payments for Each \$1,000 of Proceeds

Stated Number of Years	Monthly Payments
5	17.28
6	14.51
7	12.53
8	11.04
9	9.89
10	8.96
11	8.21
12	7.58
13	7.05
14	6.59
15	6.20
16	5.85
17	5.55
18	5.27
19	5.03
20	4.81
21	4.62
22	4.44
23	4.28
24	4.13
25	3.99
26	3.86
27	3.75
28	3.64
29	3.54
30	3.44

OPTION 3
-PAYMENTS FOR
LIFE

Equal monthly payments shall be made for any guaranteed period chosen and thereafter during the life of a chosen human being. The first payment shall be made on the Option Effective Date. The amount of each monthly payment depends on the age of the chosen human being on the Option Effective Date and on any guaranteed period chosen. We may require proof to our satisfaction of such age. We may require like proof that such human being is alive on the date any payment is due. The guaranteed period may be five or ten years or a Refund period. A Refund period extends until the sum of the payments is equal to the proceeds placed under the option. The monthly payments are based on an interest rate of 1.50% per year. We may pay more interest in any year during the guaranteed period. We will quote the amount of monthly payments for lower ages and guaranteed periods not shown in the Option 3 Table on request.

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Option 3 Table
 Monthly Payments for Each \$1,000 of Proceeds

(Amounts shown are for the age nearest birthday on the Option Effective Date)

Guaranteed Period

Age	None	10 Years	Refund
50	\$3.10	\$3.08	\$2.92
51	3.16	3.14	2.97
52	3.23	3.21	3.03
53	3.30	3.28	3.08
54	3.37	3.35	3.14
55	3.45	3.43	3.20
56	3.53	3.50	3.26
57	3.62	3.59	3.33
58	3.71	3.68	3.39
59	3.81	3.77	3.46
60	3.92	3.87	3.54
61	4.03	3.97	3.62
62	4.15	4.08	3.70
63	4.27	4.19	3.79
64	4.41	4.31	3.88
65	4.55	4.44	3.97
66	4.70	4.57	4.07
67	4.86	4.71	4.17
68	5.04	4.86	4.28
69	5.22	5.01	4.40
70	5.42	5.17	4.52
71	5.63	5.33	4.64
72	5.86	5.51	4.78
73	6.11	5.69	4.93
74	6.38	5.87	5.08
75	6.66	6.06	5.22
76	6.97	6.25	5.39
77	7.30	6.45	5.57
78	7.65	6.65	5.75
79	8.04	6.84	5.93
80	8.45	7.04	6.15
81	8.90	7.23	6.37
82	9.38	7.41	6.59
83	9.90	7.59	6.85
84	10.46	7.75	7.06
85+	11.07	7.91	7.36

+ Higher ages the same

Life Insurance Company of the Southwest

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OPTION 4
-PAYMENTS OF A
STATED AMOUNT

Equal monthly payments of a stated amount shall be made until the proceeds, with interest at 1.50% per year on the unpaid balance, are used up. The first payment shall be made on the Option Effective Date. The amount chosen must be at least \$10 per month for each \$1,000 of proceeds placed under this option. We may add more interest to the unpaid balance in any year, which will extend the number of payments. The last payment will be for the balance only.

OPTION 5 - LIFE
ANNUITY

Equal monthly payments shall be made in the same manner as Option 3 except:

1. the amount of each payment shall be based on our current settlement rates on the Option Effective Date; and
2. no additional interest shall be paid.

OPTION 6 - JOINT
AND TWO-THIRDS
ANNUITY

Equal monthly payments shall be made while two chosen human beings are both living. Upon the death of either, two-thirds of the amount of such payments shall continue during the life of the survivor. The first payment shall be made on the Option Effective Date. The amount of each monthly payment depends on the ages of the chosen human beings on the Option Effective Date. We may require proof to our satisfaction of their ages. We may require like proof that any chosen human being is alive on the date any payment conditioned on the life of such human being is due. The initial amount of each monthly payment is shown in the table. We will quote the amount of monthly payments for any other age combination on request. The monthly payments are based on an interest rate of 1.50% per year. No additional interest shall be paid.

Option 6 Table
Monthly Payments for Each \$1,000 of Proceeds

(Amounts shown are for the age nearest birthday on the Option Effective Date)

Ages of Both	Initial Monthly Payment	Ages of Both	Initial Monthly Payment
50	\$2.95	68	\$4.68
51	3.01	69	4.84
52	3.07	70	5.02
53	3.14	71	5.20
54	3.20	72	5.40
55	3.27	73	5.62
56	3.35	74	5.85
57	3.43	75	6.10
58	3.51	76	6.36
59	3.60	77	6.65
60	3.69	78	6.96
61	3.79	79	7.29
62	3.89	80	7.65
63	4.00	81	8.03
64	4.12	82	8.45
65	4.25	83	8.90
66	4.38	84	9.38
67	4.52	85+	9.90

+ Higher ages the same

OPTION 7 - 50%
SURVIVOR
ANNUITY

Equal monthly payments shall be made during the life of the chosen primary human being. Upon the death of the chosen primary human being, 50% of the amount of such payments shall continue during the life of the chosen secondary human being. The first payment shall be made on the Option Effective Date. The amount of each monthly payment depends on the ages of the chosen human beings on the Option Effective Date. We may require proof to our satisfaction of their ages. We may require like proof that any chosen human being is alive on the date any payment conditioned on the life of such human being is due. The initial amount of each monthly payment is shown in the table. We will quote the amount of monthly payments for any other age combination on request. The monthly payments are based on an interest rate of 1.50% per year. No additional interest shall be paid.

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Option 7 Table
 Monthly Payments for Each \$1,000 of Proceeds

(Amounts shown are for the age nearest birthday on the Option Effective Date)

Ages of Both	Initial Monthly Payment	Ages of Both	Initial Monthly Payment
50	\$2.89	68	\$4.52
51	2.94	69	4.67
52	3.00	70	4.83
53	3.06	71	5.01
54	3.12	72	5.20
55	3.19	73	5.40
56	3.26	74	5.62
57	3.34	75	5.85
58	3.41	76	6.10
59	3.50	77	6.37
60	3.59	78	6.66
61	3.68	79	6.97
62	3.78	80	7.30
63	3.88	81	7.66
64	3.99	82	8.05
65	4.11	83	8.47
66	4.24	84	8.92
67	4.37	85+	9.40

+ Higher ages the same

Life Insurance Company of the Southwest
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Indexed Flexible Premium Adjustable Benefit Life Insurance. Unisex Version. Flexible premiums are payable through the end of the Premium Payment Period or until the prior death of the Insured. The adjustable Death Benefit is payable upon the death of the Insured. This policy is nonparticipating.

LIFE INSURANCE COMPANY OF THE SOUTHWEST

ADMINISTRATIVE OFFICE: ONE NATIONAL LIFE DRIVE, MONTPELIER, VERMONT 05604
HOME OFFICE: 1300 WEST MOCKINGBIRD LANE, DALLAS, TEXAS, 75247

<i>SERFF Tracking Number:</i>	<i>NALF-126071381</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Life Insurance Company of the Southwest</i>	<i>State Tracking Number:</i>	<i>42319</i>
<i>Company Tracking Number:</i>	<i>8733(0709)</i>		
<i>TOI:</i>	<i>L09I Individual Life - Flexible Premium Adjustable Life</i>	<i>Sub-TOI:</i>	<i>L09I.101 External Indexed - Single Life</i>
<i>Product Name:</i>	<i>LSW SecurePlus Paragon</i>		
<i>Project Name/Number:</i>	<i>LSW SecurePlus Paragon/8733(0709)</i>		

Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification		
Comments:		
Attachment: AR Readability 8733.pdf		

	Item Status:	Status Date:
Satisfied - Item: Application		
Comments: Previously approved application to be used is Form No. 8121AR(0707) approved 9/24/07.		

	Item Status:	Status Date:
Bypassed - Item: Outline of Coverage		
Bypass Reason: Not health product.		
Comments:		

	Item Status:	Status Date:
Satisfied - Item: Sample Annual Stmt.		
Comments:		
Attachment: AnnualStatement.Paragon.pdf		

	Item Status:	Status Date:
Satisfied - Item: Sample Illustration		
Comments:		
Attachment:		

SERFF Tracking Number: NALF-126071381 State: Arkansas
 Filing Company: Life Insurance Company of the Southwest State Tracking Number: 42319
 Company Tracking Number: 8733(0709)
 TOI: L09I Individual Life - Flexible Premium Sub-TOI: L09I.101 External Indexed - Single Life
 Adjustable Life
 Product Name: LSW SecurePlus Paragon
 Project Name/Number: LSW SecurePlus Paragon/8733(0709)
 Paragon Unisex Illustration.pdf

Item Status: **Status Date:**

Satisfied - Item: Illustration Certification
Comments:
Attachment:
 LSW IllustrActuaryCert 8733uni.pdf

Item Status: **Status Date:**

Satisfied - Item: Responsible Officer
Comments:
Attachment:
 LSW RespOffCert 8733uni.pdf

Item Status: **Status Date:**

Satisfied - Item: Reserve Methodology
Comments:
Attachment:
 Reserve Methodology & Computation 8733.pdf

Item Status: **Status Date:**

Satisfied - Item: Indexed Procedures
Comments:
Attachment:
 Indexed Procedures 8733.pdf

Item Status: **Status Date:**

Satisfied - Item: Statement of Variability

SERFF Tracking Number: NALF-126071381 State: Arkansas
 Filing Company: Life Insurance Company of the Southwest State Tracking Number: 42319
 Company Tracking Number: 8733(0709)
 TOI: L09I Individual Life - Flexible Premium Sub-TOI: L09I.101 External Indexed - Single Life
 Adjustable Life
 Product Name: LSW SecurePlus Paragon
 Project Name/Number: LSW SecurePlus Paragon/8733(0709)

Comments:

Attachment:

StmtVarLSW-Paragon Uni.pdf

Item Status: **Status**
Date:

Satisfied - Item: Riders - Revised Rates

Comments:

Attachments:

Memorandum.AdditionalProtectionBenefitRider8536(0707).AttachedToBase8733(0709)w Appendices.pdf
 Memorandum.BalanceSheetBenefitRider8459(0606).AttachedToBase8733(0709)w Appendices.pdf
 Memorandum.OtherInsuredRider8535(0707).AttachedToBase8733(0709)and8734(0709)w Appendices.pdf
 Memorandum.OverloanProtectionRider8597(0708).AttachedToBase8733(0709).pdf

Item Status: **Status**
Date:

Satisfied - Item: Third Party Authorization

Comments:

Attachment:

3pal NBSP.pdf

Item Status: **Status**
Date:

Satisfied - Item: Cover Letter

Comments:

Attachment:

AR.pdf

Item Status: **Status**
Date:

Satisfied - Item: Certifications

Comments:

Attachments:

AR UL&IUL Cert 8733.pdf

SERFF Tracking Number: NALF-126071381 *State:* Arkansas
Filing Company: Life Insurance Company of the Southwest *State Tracking Number:* 42319
Company Tracking Number: 8733(0709)
TOI: L09I Individual Life - Flexible Premium *Sub-TOI:* L09I.101 External Indexed - Single Life
Adjustable Life
Product Name: LSW SecurePlus Paragon
Project Name/Number: LSW SecurePlus Paragon/8733(0709)
Arkansas Certification 8733.pdf

Arkansas Certification

This is to certify that the attached form number **8733AR(0709)** has achieved a Flesch Reading Score of **72.1** and complies in all respects with the requirements of Arkansas Statute Annotated Section 66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Language Simplification Act.

National Life Insurance Company



Bennett E. Law, FSA, MAAA
Vice President
Policy & Business Forms Management

05/05/2009

Date

LSW - IUL

ANNUAL STATEMENT

Indexed Flexible Premium Adjustable Benefit Life

Statement Date: June 15, 2009

Report Period: 6/15/2008 to 6/14/2009

#BWNCDPH

|||||

ETHAN ALLEN

ONE MAIN STREET

MONTPELIER, VT 05602

Account Summary

Beginning Accumulated Value:	\$0.00
Gross Premium:	\$1176.00
Withdrawals, including Withdrawal	\$0.00
Fees:	
Monthly Deductions:	\$466.71
Interest Credited:	\$60.06
Ending Accumulated Value:	\$769.35

Policy Information

Policy Number:	LS1234567
Primary Insured:	Ethan Allen
Policy Effective Date:	June 15, 2008
Issue Age:	35
Underwriting Class:	Unisex Preferred Nonsmoker

Summary of Insurance Benefits

	Beginning Values	Ending Values
Face Amount:	\$100,000.00	\$100,000.00
Death Benefit:	\$100,000.00	\$100,000.00
Accumulated Value:	\$0.00	\$769.35
Total Loan Balance:	\$0.00	\$0.00
Surrender Charge:	\$0.00	\$1200.00
Cash Surrender Value:	\$0.00	\$0.00

Please refer to your policy for more information.

Statement Date: June 15, 1009
Policy Number: LS1234567
Owner: Ethan Allen

Loan Information

Beginning Loan Balance:	\$0.00
New Loans Taken:	\$0.00
Loan Repayments:	\$0.00
Accrued Loan Interest:	\$0.00
Ending Loan Balance:	\$0.00

Strategy Allocation

Fixed Term Strategy	00.0 %
Indexed Strategy 1 (point to point)	100.0 %
Indexed Strategy 2 (point to point)	00.0 %
Indexed Strategy 3 (point to point)	00.0%
Indexed Strategy 4 (point to average)	00.0%

The Variable Loan Interest Rate during this report period was 6.60%. For the next report period it will be 6.60 %.

Statement Date: June 15, 1009
 Policy Number: LS1234567
 Owner: Ethan Allen

Transaction Summary

Beginning Accumulated Value \$0.00

Policy Month Ending	Premiums Received	Expense Charges	Rider Charges	Cost of Insurance	Withdrawals	Withdrawal Fees	Interest Credited	Accumulated Value
06/15/08	\$1,176.00	\$95.66	\$0.00	\$7.90	\$0.00	\$0.00	\$5.83	\$1,078.27
07/15/08	\$0.00	\$25.10	\$0.00	\$7.90	\$0.00	\$0.00	\$5.69	\$1,050.96
08/15/08	\$0.00	\$25.10	\$0.00	\$7.90	\$0.00	\$0.00	\$5.54	\$1,023.49
09/15/08	\$0.00	\$25.10	\$0.00	\$7.91	\$0.00	\$0.00	\$5.39	\$995.87
10/15/08	\$0.00	\$25.10	\$0.00	\$7.91	\$0.00	\$0.00	\$5.24	\$968.09
11/15/08	\$0.00	\$25.10	\$0.00	\$7.91	\$0.00	\$0.00	\$5.09	\$940.17
12/15/08	\$0.00	\$25.10	\$0.00	\$7.91	\$0.00	\$0.00	\$4.93	\$912.09
01/15/09	\$0.00	\$25.10	\$0.00	\$7.92	\$0.00	\$0.00	\$4.78	\$883.86
02/15/09	\$0.00	\$25.10	\$0.00	\$7.92	\$0.00	\$0.00	\$4.63	\$855.46
03/15/09	\$0.00	\$25.10	\$0.00	\$7.92	\$0.00	\$0.00	\$4.47	\$826.92
04/15/09	\$0.00	\$25.10	\$0.00	\$7.92	\$0.00	\$0.00	\$4.32	\$798.21
05/15/09	\$0.00	\$25.10	\$0.00	\$7.92	\$0.00	\$0.00	\$4.16	\$769.35
	\$1,176.00	\$371.76	\$0.00	\$94.95	\$0.00	\$0.00	\$60.06	

Statement Date: June 15, 1009
Policy Number: LS1234567
Owner: Ethan Allen

Strategy Allocation Summary

No data applicable to this section.

Forecast Information

The following one-year projection of values is mandated by state insurance regulations. The assumptions used in the projection comply with state requirements and are shown below. The projection demonstrates results under one possible set of assumptions and is not a prediction of future policy values.

Assumptions used in forecast

• Minimum Guaranteed Interest of 2.5%	Projections Date:	June 15, 2009
• Guaranteed Maximum Charges	Projected Death Benefit:	\$100,000
• Payment of Planned Periodic Premiums	Projected Accumulated Value:	\$1430.20
• No loan principal repayments	Projected Cash Surrender Value:	\$0.00
• Loan Interest paid in cash when due		
• No Acceleration of Proceeds		

Note: The policy's cash surrender value will not maintain insurance in force until the end of the next reporting period assuming guaranteed interest, mortality and expenses unless further premium payments are made.

IMPORTANT POLICY OWNER NOTICE: You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, such an illustration by contacting the Life Administrative Office or your agent. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

Statement Date: June 15, 1009
Policy Number: LS1234567
Owner: Ethan Allen

Glossary of Terms

Beginning Accumulated Value:	The value of all funds in your policy on the first day of the policy year prior to any financial transactions processed on that day except for any dividend credited.
Premiums Received:	The actual premium payments for your policy received during the month shown.
Expense Charges:	The dollar amount deducted from your premium payment or accumulated value to cover administrative costs. It includes the monthly administrative charge and the accumulated value percent of premium expense charge.
Rider Charges:	The charge for any riders included in your policy.
Cost of Insurance:	The current monthly cost of pure insurance protection for your policy.
Withdrawals:	The amount of surrender value that was withdrawn from the policy at your request. Withdrawals reduce the accumulated value of your policy and the current death benefit.
Interest Credited:	The amount of interest credited to the accumulated value for the month shown. Current interest rates are declared monthly for new premium payments and are never less than the 2.00% guaranteed in this policy.
Ending Accumulated Value:	The value of all funds in this policy at the end of the month shown. It is equal to the preceding month's ending accumulated value plus premiums received and interest credited minus cost of insurance, rider charges, expense charges, and withdrawals.



For Service Contact:

A. K. Green
19 Vista Drive
Barre, Vermont 05641
802 479-3333

Or Our Local Office:

Starr Barnum
2100 Church Street
Burlington, Vermont 05601
802 860-3333

A Life Insurance Illustration
SecurePlus Paragon - Universal Life - Policy Form Series 8733(0709)
Statement of Policy Cost and Benefit Information
Prepared for
The Client

Presented By National Life

Age 35
Standard NT
Unisex
State - TX

Benefit	Amount	
SecurePlus Paragon	\$100,000	Option A (Level)

See Summary of Additional Benefits for information on any riders.

Agent address:

1 National Life Drive
Montpelier, Vermont 05604
802 229-3333

SecurePlus Paragon is a flexible premium, adjustable death benefit individual life insurance policy, commonly referred to as Universal Life. It features indexed crediting options.

This illustration assumes that the currently illustrated non-guaranteed elements will continue unchanged for all years shown. This is not likely to occur and actual results may be more or less favorable than those shown.

Accelerated Benefits Rider 1 allows for the payment of a portion of an insured's death benefit if the insured is terminally ill. Terminally ill means that the insured has been certified by a physician as having an illness or chronic condition which can reasonably be expected to result in death in 24 months or less. There is no premium for this rider. However, the actual payment will be less than the portion of the death benefit accelerated because the benefits are paid prior to death.

Accelerated Benefits Rider 2 allows for the payment of a portion of an insured's death benefit if the insured is chronically ill. Chronically ill means that the insured has been certified by a licensed health care practitioner as being unable to perform 2 out of 6 activities of daily living or is cognitively impaired. The activities of daily living are bathing, continence, dressing, eating, toileting, and transferring. There is no premium for this rider. However, the actual payment will be less than the portion of the death benefit accelerated because the benefits are paid prior to death.

Accelerated Benefits Rider 3 allows for the payment of a portion of the insured's death benefit if the insured experiences a qualifying event covered under the rider. Subject to state approval, the qualifying events may include: heart attack, stroke, diagnosis of cancer, diagnosis of end stage renal failure, major organ transplant, diagnosis of ALS, and blindness. Please see the rider for a complete list of the qualifying events covered. There is no premium for this rider. However, the actual payment will be less than the portion of the death benefit accelerated because the benefits are paid prior to death.

Unemployment Rider provides for a one-time lump sum payment into the policy after the insured has been involuntarily unemployed for three consecutive months.

Overloan Protection Rider, when exercised under certain conditions, will prevent the policy from lapsing due to the outstanding policy loan exceeding the Accumulated Value less the Surrender Charge. Limitations apply to exercising the Overloan Protection Rider, which include that the policy be in force at least 15 years and the insured having attained the age of 75. Exercising the rider results in a paid-up policy. There is no cost for this option rider, however, there is a fee when the rider is exercised.

Definitions of key terms and column headings:

Age - The insured's age at nearest birthday.

Policy Year - The year of the policy for which information is being illustrated.

Planned Premium - The annual premium that is required under the illustrated policy.

LIFE INSURANCE COMPANY OF THE SOUTHWEST, DALLAS, TX 75247-4921

April 24, 2009
TC44910(1108)

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 Statement of Policy Cost and Benefit Information
 Prepared for
 The Client

Presented By National Life

Age 35
 Standard NT
 Unisex
 State - TX

Benefit	Amount	
SecurePlus Paragon	\$100,000	Option A (Level)

See Summary of Additional Benefits for information on any riders.

Weighted Average Interest Rate - The weighted average interest rate is used to compute current policy values. This rate varies by policy year, and is based upon the amount of money required in the Basic Strategy and the allocation between the other five strategies described in the illustration.

Accumulated Value End Year - The policy equity at the end of the policy year. Current interest rates and policy charges are not guaranteed.

Cash Surrender Value End Year - The policy equity at the end of the policy year, after deductions for any applicable surrender charges and any outstanding policy loans and loan interest. Current interest rates and policy charges are not guaranteed.

Death Benefit End Year - The entire policy death benefit at the end of the policy year, after deductions for any outstanding policy loans and loan interest. Current interest rates and policy charges are not guaranteed.

Total Level Guideline Premium - The sum of the guideline level premiums calculated for the current policy year and each prior year. It is a level premium calculated at issue based on policy guarantees and an interest rate not less than 4% as specified in IRC section 7702.

Total Single Guideline Premium - The sum of the guideline single premium calculated for the current policy year and each prior year. It is calculated at issue based on policy guarantees and an interest rate not less than 6% as specified in IRC section 7702.

Total Maximum Guideline Premium - The larger of the numbers in the total guideline level and the total guideline single premium columns. For a policy to qualify as life insurance, the sum of all premiums paid in the current and prior policy years cannot exceed the amount shown in this column for the current year. This must be true in every policy year.

Total Premium - The MEC total premium for any policy year is the sum of the premiums paid into the policy in the current policy year and prior policy years that are used to determine the MEC status of the policy.

MEC Total 7 Pay Premium - The MEC total 7 pay premium for any policy year is the sum of the annual payments calculated under IRC Section 7702A (the seven pay premium) for this and all prior policy years that determine whether or not the contract is a modified endowment contract (MEC). Upon the first occurrence of a number in the MEC total premium column exceeding the number for the same policy year in this column, the policy will become a MEC. Distributions other than death proceeds from a MEC, including policy loans and partial surrenders of funds will be treated as taxable gain received first and recovery of premium second. In addition to regular income tax, a 10% federal tax penalty is applicable to any taxable distribution from the MEC before the insured reaches age 59 ½. This includes policy terminations.

Guaranteed Annual Cash Flow - The annual (cost) of the policy or the annual amount of proceeds received from the policy before income taxes are included, based on guaranteed values.

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Benefit	Amount	
SecurePlus Paragon	\$100,000	Option A (Level)

See Summary of Additional Benefits for information on any riders.

Guaranteed End Year Net Cash Value - The guaranteed equity at the end of the policy year less any outstanding policy loans, loan interest, and applicable surrender charges.

Guaranteed End Year Net Death Benefit - The guaranteed death benefit at the end of the policy year less any policy loans, loan interest and applicable surrender charges.

Current Basis B Annual Cash Flow* - The annual (cost) of the policy or the annual amount of proceeds received from the policy before income taxes are included, based on the current interest rate and charges.

Averaged Annual Cash Flow* - The annual (cost) of the policy or the annual amount of proceeds received from the policy before income taxes are included, based on the assumption credited interest rate and other charges are an average of current and guaranteed rates.

Averaged Net Equity End Year* - The entire policy equity at the end of the year after deductions for any outstanding policy loans and loan interest. Values in this column are based on the assumption credited interest rate and other charges are an average of current and guaranteed rates.

Averaged Net Death Benefit End Year* - The entire policy death benefit at the end of the year after deductions for any outstanding policy loans and loan interest. Values in this column are based on the assumption credited interest rate and other charges are an average of current and guaranteed rates.

Annual Planned Payments of \$1,176 have been assumed to be received at the beginning of each billing period.

All values shown are end of policy year values.

A surrender charge is assessed on full surrender of a policy in the first ten policy years from the date of issue or the date of an increase in face amount. The cash surrender values in this proposal reflect applicable surrender charges. Partial withdrawals are available if the policy has positive cash surrender value. The accumulated value of the policy will be reduced by the sum of the partial withdrawal and the withdrawal fee of \$25.

The Guaranteed Basis uses an interest rate and maximum monthly deductions guaranteed by the Company. It is the most conservative basis used for the calculation of illustrated values.

The policy as illustrated using Current Basis A will provide coverage for the lifetime of the insured based on the Current Basis A interest rates and the current charges by the Company.

The policy as illustrated using Current Basis B will provide coverage for the lifetime of the insured based on the Current Basis B interest rates and the current charges by the Company.

The policy as illustrated on an average basis will provide coverage for the lifetime of the insured based on the average interest rates credited and the average charges by the Company. The average interest rates are the average of the guaranteed interest rate and the Current Basis B illustrated interest rates. The average charges are the average of guaranteed charges and current charges.

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Benefit	Amount	
SecurePlus Paragon	\$100,000	Option A (Level)

See Summary of Additional Benefits for information on any riders.

The policy as illustrated on a guaranteed basis will provide coverage for 44 policy years based on the guaranteed interest rate credited and the guaranteed charges by the Company. Coverage will then terminate unless a higher premium is paid.

The maximum level premium that can be paid into this policy based on Section 7702 of the Internal Revenue Code is \$1,176.

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Benefit	Amount	
SecurePlus Paragon	\$100,000	Option A (Level)

See Summary of Additional Benefits for information on any riders.

The following is a statement of costs and benefits for the SecurePlus Paragon policy illustrated on the following pages. The Net Payment Index shows your average annual outlay per \$1000 of Death Benefit. The Surrender Cost Index is the average annual amount of each planned premium that is not returned if the policy is surrendered for its cash value at the end of the year cited.

INTEREST ADJUSTED COST INDEXES AT 5%

CURRENT BASIS B

	YEAR 10	YEAR 20
Net Payment	\$11.76	\$11.76
Surrender Cost	\$3.61	\$0.44

GUARANTEED BASIS

	YEAR 10	YEAR 20
Net Payment	\$11.76	\$11.76
Surrender Cost	\$6.01	\$7.32

An explanation of the intended use of the above cost indexes is provided in the Life Insurance Buyer's Guide.

Please Note: The illustrated values that make up this ledger proposal should not be regarded as an offer nor as a contract to insure. If the presentation, of which this ledger is a part results in a policy being issued with different illustrated values than those in this ledger, the actual values illustrated with the policy shall control.

Tax Treatment: The Company will report any eligible distributions, under any accelerated benefits rider, subject to existing IRS guidance and facts at the time of distribution. However, proper tax treatment for any accelerated benefits you receive under this insurance contract depends on a number of factors. These factors include, among others, the provisions of the law, the terms of the contract, and your personal situation at the time payments are made. These factors may permit some or all of the payments to be excluded from income or may require some or all the payments to be included in income for tax purposes. You should consult with your own tax advisor in deciding how to report the payments.

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Benefit	Amount	
SecurePlus Paragon	\$100,000	Option A (Level)

See Summary of Additional Benefits for information on any riders.

Indexed Strategies

This product is a life insurance product and does not represent an investment in the stock market.

This product features a fixed crediting strategy and four indexed crediting strategies. The following is a summary of the characteristics of the indexed crediting strategies that are available in this policy. Please refer to the policy for complete details. In the event of any conflict, the policy language will control.

This policy features four distinct indexed crediting strategies, Indexed Strategy 1, which uses a point-to-point crediting method, Indexed Strategy 2, which uses a point-to-point crediting method with a focus on the Participation Rate, Indexed Strategy 3, which uses a point-to-point crediting method with no Earnings Cap, and Equity Indexed Strategy 4, which uses a point-to-average crediting method with no Earnings Cap.

For Indexed Strategies 1, 2, and 3, the Annual Index Growth is calculated as the percentage increase in the Index, if any, from one segment anniversary to the next segment anniversary.

For Indexed Strategy 4, the daily average value of the Index is calculated for the period covering one segment anniversary to the next segment anniversary. The Annual Index Growth is calculated as the percentage increase in the daily average value, if any, over the Index value on the preceding segment anniversary.

Each transfer to an indexed strategy creates a distinct Indexed Segment with a segment length of one year. Index Earnings are credited to each Indexed Segment on the annual segment anniversary. Index Earnings are not calculated or credited between segment anniversaries. Each Indexed Segment will have a Participation Rate and an Index Earnings Cap, which are determined in advance for each twelve-month period and are subject to change on each segment anniversary.

The Index Earnings for an Indexed Segment on the segment anniversary are calculated as the Annual Index Growth for the segment, multiplied by the segment's Participation Rate, with this product adjusted so that it is no less than 0% and no greater than the segment's Index Earnings Cap.

At the end of the one-year segment length, the value in that segment is transferred to the Basic Strategy for automatic reallocation using the strategy allocation in force at that time. This strategy allocation may be changed by the Owner upon request.

The Index for these strategies will be the S&P 500® Index, excluding dividends. The Annual Index Growth for an Indexed Segment is calculated on the segment anniversary based on the performance of the Index.

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Benefit	Amount	
SecurePlus Paragon	\$100,000	Option A (Level)

See Summary of Additional Benefits for information on any riders.

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The historical rates shown below were based on the Average Rate of Return for the S&P 500® computed backwards from 12/19/2008 for the number of years indicated and adjusted by the cap, floor, and participation rates for each of the Index Strategies as indicated on the following page.

The actual credited rate for each policy year will vary based on the actual change in the index. These figures do not represent actual interest that would have been credited because the Participation rate and Cap would have changed over time and actual results would have been different. There are administrative, cost of insurance and other charges associated with the SecurePlus Paragon IUL policy. The historical returns by strategy do not reflect these charges. It is not meant to predict future performance. It is not possible to know in advance what the actual credited rate will be.

Hypothetical Returns by Strategy

	Equity Indexed Strategy 1	Equity Indexed Strategy 2	Equity Indexed Strategy 3	Equity Indexed Strategy 4
5-Year Averaged Rate of Return	7.50%	8.30%	4.10%	4.00%
10-Year Averaged Rate of Return	6.50%	6.90%	3.70%	3.50%
20-Year Averaged Rate of Return	8.30%	8.50%	5.40%	4.90%
1984-2007 Average Rate of Return	8.60%	8.70%	5.80%	5.20%
Maximum Illustrated Rate*	8.60%	8.70%	5.80%	5.20%

* The maximum illustrated interest rate for each strategy is based upon the historical performance, from 12/21/1984 to 12/19/2008, of the S&P 500® adjusted for the current Participation Rate and Index Earnings Cap - if applicable - per Strategy as indicated on the following page.

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Benefit Amount Option A (Level)
SecurePlus Paragon \$100,000
See Summary of Additional Benefits for information on any riders.

The chart below reflects the current and guaranteed cap rates and participation rates and maximum illustration rate for each Indexed Strategy. The current rates are not guaranteed and are subject to change, but will never be lower than the guaranteed rates.

Indexed Crediting Method

	Indexed Strategy 1	Indexed Strategy 2	Indexed Strategy 3	Indexed Strategy 4
Current Cap Rate	14.00%	12.50%	No Cap	No Cap
Guaranteed Cap Rate	3.1%	3.0%	No Cap	No Cap
Current Participation Rate	100%	140%	45%	80%
Guaranteed Participation Rate	100%	110%	25%	30%
Maximum Illustration Rate	8.60%	8.70%	5.80%	5.20%

The illustrated assumed interest rates cannot exceed the maximum illustration rates allowed by the company, as shown above. The maximum illustration rates are based on applying the current cap rates and participation rates to the S&P 500® Index historical performance from 1984 through 2008. The historical performance of the S&P 500® Index should not be considered a representation of past or future performance for any of the Indexed Strategies available in this policy, nor is it an estimate of the returns that a policyholder can expect based on the current caps and participation rates. The future rate credited for any of these strategies may be less than or greater than the non-guaranteed assumed interest rates used in this illustration.

Non-Guaranteed Assumed Interest Rate Disclosure

Strategy	Initial Allocation	Current Basis A Interest Rate	Current Basis B Interest Rate
Basic Strategy		5.00%	5.00%
Fixed-Term Strategy	0%	6.00%	6.00%
Indexed Strategy 1, point-to-point	100%	6.50%	8.60%
Indexed Strategy 2, point-to-point with Participation Rate focus	0%	6.50%	8.70%
Indexed Strategy 3, point-to-point with no Cap	0%	6.50%	5.80%
Indexed Strategy 4, point-to-average with no Cap	0%	6.50%	5.20%

For illustrative purposes, a weighted average interest rate is used to compute policy values. This weighted average interest rate varies by policy year, and is based upon the amount of money required in the Basic Strategy and the allocation between the other five strategies indicated above.

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Benefit Amount Option A (Level)
 SecurePlus Paragon \$100,000
 See Summary of Additional Benefits for information on any riders.

Summary of Additional Benefits

Rider	Insured's Issue Age/ Classification	Initial Benefit Amount	Coverage to Age	Guaranteed Monthly Cost in Year 1	Current Monthly Cost in Year 1
Accelerated Benefits Rider	NA	NA	NA	None	None
Accelerated Benefits Rider	NA	NA	NA	None	None
Accelerated Benefits Rider	NA	NA	NA	None	None
Overloan Protection Rider	NA	NA	NA	None	None
Unemployment Rider	NA	250	65	None	None

NA = not applicable

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Benefit Amount
 SecurePlus Paragon \$100,000 Option A (Level)
 See Summary of Additional Benefits for information on any riders.

This illustration of SecurePlus Paragon values assumes payments are made in the amounts shown and that the illustrated rates and monthly deductions will continue in the future. The interest rate used in the calculation of current values is the weighted average rate shown in the columns below. The interest rate used in the calculation of guaranteed values is 2.50%

Policy Year	Planned Premium	Guaranteed Values at 2.50%			Weighted Average Interest Rate	*Current Basis B Values		
		Accumulated Value End Year	Cash Surrender Value End Year	Death Benefit End Year		Accumulated Value End Year	Cash Surrender Value End Year	Death Benefit End Year
1	\$ 1,176.00	\$ 727	\$ 0	\$ 100,000	7.23%	\$ 769	\$ 0	\$ 100,000
2	1,176.00	1,470	270	100,000	7.79%	1,600	400	100,000
3	1,176.00	2,228	1,028	100,000	8.03%	2,499	1,299	100,000
4	1,176.00	3,002	1,802	100,000	8.17%	3,471	2,271	100,000
5	1,176.00	3,781	2,581	100,000	8.25%	4,509	3,309	100,000
6	1,176.00	4,565	3,552	100,000	8.30%	5,620	4,607	100,000
7	1,176.00	5,365	4,544	100,000	8.35%	6,822	6,001	100,000
8	1,176.00	6,172	5,549	100,000	8.38%	8,111	7,488	100,000
9	1,176.00	6,984	6,563	100,000	8.40%	9,493	9,072	100,000
10	1,176.00	7,802	7,589	100,000	8.42%	10,978	10,765	100,000
	\$ 11,760.00							
11	1,176.00	8,584	8,584	100,000	8.53%	12,899	12,899	100,000
12	1,176.00	9,360	9,360	100,000	8.54%	14,977	14,977	100,000
13	1,176.00	10,133	10,133	100,000	8.54%	17,228	17,228	100,000
14	1,176.00	10,912	10,912	100,000	8.55%	19,666	19,666	100,000
15	1,176.00	11,687	11,687	100,000	8.55%	22,309	22,309	100,000
16	1,176.00	12,460	12,460	100,000	8.56%	25,177	25,177	100,000
17	1,176.00	13,229	13,229	100,000	8.56%	28,288	28,288	100,000
18	1,176.00	13,986	13,986	100,000	8.56%	31,667	31,667	100,000
19	1,176.00	14,719	14,719	100,000	8.57%	35,338	35,338	100,000
20	1,176.00	15,430	15,430	100,000	8.57%	39,318	39,318	100,000
	\$ 23,520.00							
21	1,176.00	16,107	16,107	100,000	8.57%	43,632	43,632	100,000
22	1,176.00	16,752	16,752	100,000	8.57%	48,304	48,304	100,000
23	1,176.00	17,363	17,363	100,000	8.57%	53,378	53,378	100,000
24	1,176.00	17,942	17,942	100,000	8.58%	58,895	58,895	100,000
25	1,176.00	18,476	18,476	100,000	8.58%	64,895	64,895	100,000

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Benefit Amount
 SecurePlus Paragon \$100,000 Option A (Level)
 See Summary of Additional Benefits for information on any riders.

This illustration of SecurePlus Paragon values assumes payments are made in the amounts shown and that the illustrated rates and monthly deductions will continue in the future. The interest rate used in the calculation of current values is the weighted average rate shown in the columns below. The interest rate used in the calculation of guaranteed values is 2.50%

Policy Year	Planned Premium	Guaranteed Values at 2.50%			Weighted Average Interest Rate	*Current Basis B Values		
		Accumulated Value End Year	Cash Surrender Value End Year	Death Benefit End Year		Accumulated Value End Year	Cash Surrender Value End Year	Death Benefit End Year
26	1,176.00	18,968	18,968	100,000	8.58%	71,431	71,431	100,000
27	1,176.00	19,395	19,395	100,000	8.58%	78,552	78,552	100,547
28	1,176.00	19,748	19,748	100,000	8.59%	86,292	86,292	108,727
29	1,176.00	20,005	20,005	100,000	8.59%	94,675	94,675	117,397
30	1,176.00	20,165	20,165	100,000	8.59%	103,759	103,759	126,586
\$	35,280.00							
31	1,176.00	20,224	20,224	100,000	8.59%	113,606	113,606	136,327
32	1,176.00	20,169	20,169	100,000	8.59%	124,265	124,265	147,875
33	1,176.00	19,986	19,986	100,000	8.59%	135,809	135,809	160,254
34	1,176.00	19,670	19,670	100,000	8.59%	148,311	148,311	173,524
35	1,176.00	19,205	19,205	100,000	8.59%	161,850	161,850	187,746
36	1,176.00	18,554	18,554	100,000	8.59%	176,512	176,512	202,989
37	1,176.00	17,695	17,695	100,000	8.59%	192,422	192,422	217,437
38	1,176.00	16,555	16,555	100,000	8.59%	209,696	209,696	232,762
39	1,176.00	15,093	15,093	100,000	8.59%	228,461	228,461	249,023
40	1,176.00	13,273	13,273	100,000	8.59%	248,869	248,869	266,290
\$	47,040.00							
41	1,176.00	11,029	11,029	100,000	8.59%	271,090	271,090	284,644
42	1,176.00	8,300	8,300	100,000	8.59%	295,157	295,157	309,915
43	1,176.00	4,962	4,962	100,000	8.59%	321,214	321,214	337,274
44	1,176.00	873	873	100,000	8.59%	349,411	349,411	366,881
45	1,176.00	0	0	0	8.59%	379,911	379,911	398,907
46	1,176.00	0	0	0	8.59%	412,889	412,889	433,533
47	1,176.00	0	0	0	8.59%	448,527	448,527	470,954
48	1,176.00	0	0	0	8.59%	487,028	487,028	511,380
49	1,176.00	0	0	0	8.58%	528,605	528,605	555,035

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This illustration of SecurePlus Paragon values assumes payments are made in the amounts shown and that the illustrated rates and monthly deductions will continue in the future. The interest rate used in the calculation of current values is the weighted average rate shown in the columns below. The interest rate used in the calculation of guaranteed values is 2.50%

Policy Year	Planned Premium	Guaranteed Values at 2.50%			Weighted Average Interest Rate	*Current Basis B Values		
		Accumulated Value End Year	Cash Surrender Value End Year	Death Benefit End Year		Accumulated Value End Year	Cash Surrender Value End Year	Death Benefit End Year
50	1,176.00	0	0	0	8.58%	573,461	573,461	602,134
	\$ 58,800.00							
51	1,176.00	0	0	0	8.58%	621,805	621,805	652,895
52	1,176.00	0	0	0	8.58%	673,841	673,841	707,533
53	1,176.00	0	0	0	8.58%	729,794	729,794	766,284
54	1,176.00	0	0	0	8.58%	789,910	789,910	829,406
55	1,176.00	0	0	0	8.58%	854,453	854,453	897,176
56	1,176.00	0	0	0	8.57%	923,723	923,723	969,909
57	1,176.00	0	0	0	8.58%	999,263	999,263	1,039,234
58	1,176.00	0	0	0	8.58%	1,081,918	1,081,918	1,114,375
59	1,176.00	0	0	0	8.58%	1,172,598	1,172,598	1,196,050
60	1,176.00	0	0	0	8.59%	1,272,666	1,272,666	1,285,392
	\$ 70,560.00							
61	1,176.00	0	0	0	8.59%	1,380,924	1,380,924	1,394,733
62	1,176.00	0	0	0	8.59%	1,498,031	1,498,031	1,513,012
63	1,176.00	0	0	0	8.59%	1,624,777	1,624,777	1,641,024
64	1,176.00	0	0	0	8.59%	1,762,023	1,762,023	1,779,644
65	1,176.00	0	0	0	8.59%	1,910,593	1,910,593	1,929,699
66	1,176.00	0	0	0	8.59%	2,071,594	2,071,594	2,092,310
67	1,176.00	0	0	0	8.59%	2,246,066	2,246,066	2,268,527
68	1,176.00	0	0	0	8.59%	2,435,138	2,435,138	2,459,489
69	1,176.00	0	0	0	8.59%	2,640,029	2,640,029	2,666,430
70	1,176.00	0	0	0	8.59%	2,862,066	2,862,066	2,890,686
	\$ 82,320.00							
71	1,176.00	0	0	0	8.59%	3,102,681	3,102,681	3,133,707
72	1,176.00	0	0	0	8.59%	3,363,429	3,363,429	3,397,063

LIFE INSURANCE COMPANY OF THE SOUTHWEST, DALLAS, TX 75247-4921

A Life Insurance Illustration
 SecurePlus Paragon - Universal Life - Policy Form Series 8733(0709)
 Statement of Policy Cost and Benefit Information
 Prepared for
 The Client

Presented By National Life

Age 35
 Standard NT
 Unisex
 State - TX

Benefit Amount
 SecurePlus Paragon \$100,000 Option A (Level)
 See Summary of Additional Benefits for information on any riders.

This illustration of SecurePlus Paragon values assumes payments are made in the amounts shown and that the illustrated rates and monthly deductions will continue in the future. The interest rate used in the calculation of current values is the weighted average rate shown in the columns below. The interest rate used in the calculation of guaranteed values is 2.50%

Policy Year	Planned Premium	Guaranteed Values at 2.50%			Weighted Average Interest Rate	*Current Basis B Values		
		Accumulated Value End Year	Cash Surrender Value End Year	Death Benefit End Year		Accumulated Value End Year	Cash Surrender Value End Year	Death Benefit End Year
73	1,176.00	0	0	0	8.59%	3,645,995	3,645,995	3,682,455
74	1,176.00	0	0	0	8.59%	3,952,205	3,952,205	3,991,727
75	1,176.00	0	0	0	8.59%	4,284,036	4,284,036	4,326,877
76	1,176.00	0	0	0	8.59%	4,643,634	4,643,634	4,690,070
77	1,176.00	0	0	0	8.59%	5,033,321	5,033,321	5,083,654
78	1,176.00	0	0	0	8.59%	5,455,614	5,455,614	5,510,170
79	1,176.00	0	0	0	8.59%	5,913,243	5,913,243	5,972,375
80	1,176.00	0	0	0	8.59%	6,409,163	6,409,163	6,473,255
	\$ 94,080.00							
81	1,176.00	0	0	0	8.59%	6,946,580	6,946,580	7,016,046
82	1,176.00	0	0	0	8.59%	7,528,964	7,528,964	7,604,254
83	1,176.00	0	0	0	8.59%	8,160,079	8,160,079	8,241,680
84	1,176.00	0	0	0	8.59%	8,844,002	8,844,002	8,932,442
85	1,176.00	0	0	0	8.59%	9,585,153	9,585,153	9,681,005
	\$ 99,960.00							

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Benefit Amount
 SecurePlus Paragon \$100,000 Option A (Level)
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*Current Basis A Values

*Current Basis B Values

Policy Year	Contract Premium	*Current Basis A Values				*Current Basis B Values			
		Weighted Average Interest Rate	Accumulated Value End Year	Cash Surrender Value End Year	Death Benefit End Year	Weighted Average Interest Rate	Accumulated Value End Year	Cash Surrender Value End Year	Death Benefit End Year
1	\$ 1,176.00	5.93%	\$ 758	\$ 0	\$ 100,000	7.23%	\$ 769	\$ 0	\$ 100,000
2	1,176.00	6.16%	1,561	361	100,000	7.79%	1,600	400	100,000
3	1,176.00	6.26%	2,413	1,213	100,000	8.03%	2,499	1,299	100,000
4	1,176.00	6.31%	3,317	2,117	100,000	8.17%	3,471	2,271	100,000
5	1,176.00	6.34%	4,264	3,064	100,000	8.25%	4,509	3,309	100,000
6	1,176.00	6.37%	5,256	4,243	100,000	8.30%	5,620	4,607	100,000
7	1,176.00	6.39%	6,309	5,488	100,000	8.35%	6,822	6,001	100,000
8	1,176.00	6.40%	7,415	6,792	100,000	8.38%	8,111	7,488	100,000
9	1,176.00	6.41%	8,578	8,157	100,000	8.40%	9,493	9,072	100,000
10	1,176.00	6.42%	9,800	9,587	100,000	8.42%	10,978	10,765	100,000
	\$ 11,760.00								
11	1,176.00	6.47%	11,394	11,394	100,000	8.53%	12,899	12,899	100,000
12	1,176.00	6.47%	13,085	13,085	100,000	8.54%	14,977	14,977	100,000
13	1,176.00	6.47%	14,877	14,877	100,000	8.54%	17,228	17,228	100,000
14	1,176.00	6.47%	16,780	16,780	100,000	8.55%	19,666	19,666	100,000
15	1,176.00	6.47%	18,800	18,800	100,000	8.55%	22,309	22,309	100,000
16	1,176.00	6.48%	20,946	20,946	100,000	8.56%	25,177	25,177	100,000
17	1,176.00	6.48%	23,227	23,227	100,000	8.56%	28,288	28,288	100,000
18	1,176.00	6.48%	25,653	25,653	100,000	8.56%	31,667	31,667	100,000
19	1,176.00	6.48%	28,234	28,234	100,000	8.57%	35,338	35,338	100,000
20	1,176.00	6.48%	30,972	30,972	100,000	8.57%	39,318	39,318	100,000
	\$ 23,520.00								
21	1,176.00	6.48%	33,872	33,872	100,000	8.57%	43,632	43,632	100,000
22	1,176.00	6.48%	36,938	36,938	100,000	8.57%	48,304	48,304	100,000
23	1,176.00	6.48%	40,193	40,193	100,000	8.57%	53,378	53,378	100,000
24	1,176.00	6.48%	43,651	43,651	100,000	8.58%	58,895	58,895	100,000
25	1,176.00	6.48%	47,324	47,324	100,000	8.58%	64,895	64,895	100,000
26	1,176.00	6.48%	51,237	51,237	100,000	8.58%	71,431	71,431	100,000
27	1,176.00	6.48%	55,397	55,397	100,000	8.58%	78,552	78,552	100,547
28	1,176.00	6.49%	59,822	59,822	100,000	8.59%	86,292	86,292	108,727
29	1,176.00	6.49%	64,533	64,533	100,000	8.59%	94,675	94,675	117,397
30	1,176.00	6.49%	69,560	69,560	100,000	8.59%	103,759	103,759	126,586
	\$ 35,280.00								
31	1,176.00	6.49%	74,934	74,934	100,000	8.59%	113,606	113,606	136,327
32	1,176.00	6.49%	80,687	80,687	100,000	8.59%	124,265	124,265	147,875

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 The Client

Presented By National Life

Age 35
 Standard NT
 Unisex
 State - TX

Benefit Amount
 SecurePlus Paragon \$100,000 Option A (Level)
 See Summary of Additional Benefits for information on any riders.

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*Current Basis A Values

*Current Basis B Values

Policy Year	Contract Premium	*Current Basis A Values				*Current Basis B Values			
		Weighted Average Interest Rate	Accumulated Value End Year	Cash Surrender Value End Year	Death Benefit End Year	Weighted Average Interest Rate	Accumulated Value End Year	Cash Surrender Value End Year	Death Benefit End Year
33	1,176.00	6.49%	86,856	86,856	102,490	8.59%	135,809	135,809	160,254
34	1,176.00	6.49%	93,423	93,423	109,305	8.59%	148,311	148,311	173,524
35	1,176.00	6.49%	100,396	100,396	116,459	8.59%	161,850	161,850	187,746
36	1,176.00	6.49%	107,801	107,801	123,971	8.59%	176,512	176,512	202,989
37	1,176.00	6.49%	115,683	115,683	130,721	8.59%	192,422	192,422	217,437
38	1,176.00	6.49%	124,078	124,078	137,727	8.59%	209,696	209,696	232,762
39	1,176.00	6.49%	133,027	133,027	145,000	8.59%	228,461	228,461	249,023
40	1,176.00	6.49%	142,577	142,577	152,558	8.59%	248,869	248,869	266,290
\$	47,040.00								
41	1,176.00	6.49%	152,784	152,784	160,423	8.59%	271,090	271,090	284,644
42	1,176.00	6.49%	163,621	163,621	171,802	8.59%	295,157	295,157	309,915
43	1,176.00	6.49%	175,123	175,123	183,879	8.59%	321,214	321,214	337,274
44	1,176.00	6.49%	187,325	187,325	196,691	8.59%	349,411	349,411	366,881
45	1,176.00	6.49%	200,261	200,261	210,274	8.59%	379,911	379,911	398,907
46	1,176.00	6.49%	213,970	213,970	224,669	8.59%	412,889	412,889	433,533
47	1,176.00	6.49%	228,490	228,490	239,915	8.59%	448,527	448,527	470,954
48	1,176.00	6.49%	243,863	243,863	256,056	8.59%	487,028	487,028	511,380
49	1,176.00	6.49%	260,132	260,132	273,139	8.58%	528,605	528,605	555,035
50	1,176.00	6.49%	277,330	277,330	291,196	8.58%	573,461	573,461	602,134
\$	58,800.00								
51	1,176.00	6.49%	295,487	295,487	310,262	8.58%	621,805	621,805	652,895
52	1,176.00	6.49%	314,629	314,629	330,361	8.58%	673,841	673,841	707,533
53	1,176.00	6.49%	334,785	334,785	351,524	8.58%	729,794	729,794	766,284
54	1,176.00	6.49%	355,988	355,988	373,788	8.58%	789,910	789,910	829,406
55	1,176.00	6.49%	378,277	378,277	397,191	8.58%	854,453	854,453	897,176
56	1,176.00	6.49%	401,698	401,698	421,783	8.57%	923,723	923,723	969,909
57	1,176.00	6.49%	426,814	426,814	443,886	8.58%	999,263	999,263	1,039,234
58	1,176.00	6.49%	453,853	453,853	467,469	8.58%	1,081,918	1,081,918	1,114,375
59	1,176.00	6.49%	483,053	483,053	492,714	8.58%	1,172,598	1,172,598	1,196,050
60	1,176.00	6.49%	514,808	514,808	519,956	8.59%	1,272,666	1,272,666	1,285,392
\$	70,560.00								
61	1,176.00	6.49%	548,478	548,478	553,963	8.59%	1,380,924	1,380,924	1,394,733
62	1,176.00	6.49%	584,177	584,177	590,019	8.59%	1,498,031	1,498,031	1,513,012
63	1,176.00	6.49%	622,054	622,054	628,274	8.59%	1,624,777	1,624,777	1,641,024
64	1,176.00	6.49%	662,267	662,267	668,890	8.59%	1,762,023	1,762,023	1,779,644

LIFE INSURANCE COMPANY OF THE SOUTHWEST, DALLAS, TX 75247-4921

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 The Client

Presented By National Life

Age 35
 Standard NT
 Unisex
 State - TX

Benefit Amount
 SecurePlus Paragon \$100,000 Option A (Level)
 See Summary of Additional Benefits for information on any riders.

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*Current Basis A Values

*Current Basis B Values

Policy Year	Contract Premium	*Current Basis A Values				*Current Basis B Values			
		Weighted Average Interest Rate	Accumulated Value End Year	Cash Surrender Value End Year	Death Benefit End Year	Weighted Average Interest Rate	Accumulated Value End Year	Cash Surrender Value End Year	Death Benefit End Year
65	1,176.00	6.49%	704,945	704,945	711,995	8.59%	1,910,593	1,910,593	1,929,699
66	1,176.00	6.49%	750,302	750,302	757,805	8.59%	2,071,594	2,071,594	2,092,310
67	1,176.00	6.49%	798,505	798,505	806,490	8.59%	2,246,066	2,246,066	2,268,527
68	1,176.00	6.49%	849,733	849,733	858,231	8.59%	2,435,138	2,435,138	2,459,489
69	1,176.00	6.49%	904,177	904,177	913,219	8.59%	2,640,029	2,640,029	2,666,430
70	1,176.00	6.49%	962,038	962,038	971,659	8.59%	2,862,066	2,862,066	2,890,686
	\$ 82,320.00								
71	1,176.00	6.49%	1,023,531	1,023,531	1,033,766	8.59%	3,102,681	3,102,681	3,133,707
72	1,176.00	6.49%	1,088,883	1,088,883	1,099,771	8.59%	3,363,429	3,363,429	3,397,063
73	1,176.00	6.49%	1,158,336	1,158,336	1,169,920	8.59%	3,645,995	3,645,995	3,682,455
74	1,176.00	6.49%	1,232,149	1,232,149	1,244,470	8.59%	3,952,205	3,952,205	3,991,727
75	1,176.00	6.49%	1,310,594	1,310,594	1,323,700	8.59%	4,284,036	4,284,036	4,326,877
76	1,176.00	6.49%	1,393,963	1,393,963	1,407,903	8.59%	4,643,634	4,643,634	4,690,070
77	1,176.00	6.49%	1,482,565	1,482,565	1,497,390	8.59%	5,033,321	5,033,321	5,083,654
78	1,176.00	6.49%	1,576,727	1,576,727	1,592,494	8.59%	5,455,614	5,455,614	5,510,170
79	1,176.00	6.49%	1,676,799	1,676,799	1,693,567	8.59%	5,913,243	5,913,243	5,972,375
80	1,176.00	6.49%	1,783,152	1,783,152	1,800,984	8.59%	6,409,163	6,409,163	6,473,255
	\$ 94,080.00								
81	1,176.00	6.49%	1,896,181	1,896,181	1,915,142	8.59%	6,946,580	6,946,580	7,016,046
82	1,176.00	6.49%	2,016,303	2,016,303	2,036,466	8.59%	7,528,964	7,528,964	7,604,254
83	1,176.00	6.49%	2,143,964	2,143,964	2,165,404	8.59%	8,160,079	8,160,079	8,241,680
84	1,176.00	6.49%	2,279,638	2,279,638	2,302,434	8.59%	8,844,002	8,844,002	8,932,442
85	1,176.00	6.49%	2,423,827	2,423,827	2,448,066	8.59%	9,585,153	9,585,153	9,681,005
	\$ 99,960.00								

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Benefit Amount Option A (Level)
 SecurePlus Paragon \$100,000
 See Summary of Additional Benefits for information on any riders.

Policy Year	Death Benefit End Year	Total Level Guideline Premium	Total Single Guideline Premium	Total Maximum Guideline Premium	Total Premium	MEC Total 7 Pay Premium
1	100,000	1,176	13,696	13,696	1,176	3,203
2	100,000	2,353	13,696	13,696	2,352	6,406
3	100,000	3,529	13,696	13,696	3,528	9,609
4	100,000	4,706	13,696	13,696	4,704	12,812
5	100,000	5,882	13,696	13,696	5,880	16,015
6	100,000	7,059	13,696	13,696	7,056	19,218
7	100,000	8,235	13,696	13,696	8,232	22,421
8	100,000	9,411	13,696	13,696	9,408	25,624
9	100,000	10,588	13,696	13,696	10,584	28,827
10	100,000	11,764	13,696	13,696	11,760	32,030
11	100,000	12,941	13,696	13,696	12,936	35,233
12	100,000	14,117	13,696	14,117	14,112	38,436
13	100,000	15,293	13,696	15,293	15,288	41,639
14	100,000	16,470	13,696	16,470	16,464	44,842
15	100,000	17,646	13,696	17,646	17,640	48,045
16	100,000	18,823	13,696	18,823	18,816	51,248
17	100,000	19,999	13,696	19,999	19,992	54,451
18	100,000	21,176	13,696	21,176	21,168	57,654
19	100,000	22,352	13,696	22,352	22,344	60,857
20	100,000	23,528	13,696	23,528	23,520	64,060
21	100,000	24,705	13,696	24,705	24,696	67,263
22	100,000	25,881	13,696	25,881	25,872	70,466
23	100,000	27,058	13,696	27,058	27,048	73,669
24	100,000	28,234	13,696	28,234	28,224	76,872
25	100,000	29,411	13,696	29,411	29,400	80,075
26	100,000	30,587	13,696	30,587	30,576	83,278
27	100,547	31,763	13,696	31,763	31,752	86,481
28	108,727	32,940	13,696	32,940	32,928	89,684
29	117,397	34,116	13,696	34,116	34,104	92,887
30	126,586	35,293	13,696	35,293	35,280	96,090
31	136,327	36,469	13,696	36,469	36,456	99,293

LIFE INSURANCE COMPANY OF THE SOUTHWEST, DALLAS, TX 75247-4921

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 Unisex
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Benefit Amount Option A (Level)
 SecurePlus Paragon \$100,000
 See Summary of Additional Benefits for information on any riders.

Policy Year	Death Benefit End Year	Total Level Guideline Premium	Total Single Guideline Premium	Total Maximum Guideline Premium	Total Premium	MEC Total 7 Pay Premium
32	147,875	37,645	13,696	37,645	37,632	102,496
33	160,254	38,822	13,696	38,822	38,808	105,699
34	173,524	39,998	13,696	39,998	39,984	108,902
35	187,746	41,175	13,696	41,175	41,160	112,105
36	202,989	42,351	13,696	42,351	42,336	115,308
37	217,437	43,528	13,696	43,528	43,512	118,511
38	232,762	44,704	13,696	44,704	44,688	121,714
39	249,023	45,880	13,696	45,880	45,864	124,917
40	266,290	47,057	13,696	47,057	47,040	128,120
41	284,644	48,233	13,696	48,233	48,216	131,323
42	309,915	49,410	13,696	49,410	49,392	134,526
43	337,274	50,586	13,696	50,586	50,568	137,729
44	366,881	51,762	13,696	51,762	51,744	140,932
45	398,907	52,939	13,696	52,939	52,920	144,135
46	433,533	54,115	13,696	54,115	54,096	147,338
47	470,954	55,292	13,696	55,292	55,272	150,541
48	511,380	56,468	13,696	56,468	56,448	153,744
49	555,035	57,645	13,696	57,645	57,624	156,947
50	602,134	58,821	13,696	58,821	58,800	160,150
51	652,895	59,997	13,696	59,997	59,976	163,353
52	707,533	61,174	13,696	61,174	61,152	166,556
53	766,284	62,350	13,696	62,350	62,328	169,759
54	829,406	63,527	13,696	63,527	63,504	172,962
55	897,176	64,703	13,696	64,703	64,680	176,165
56	969,909	65,880	13,696	65,880	65,856	179,368
57	1,039,234	67,056	13,696	67,056	67,032	182,571
58	1,114,375	68,232	13,696	68,232	68,208	185,774
59	1,196,050	69,409	13,696	69,409	69,384	188,977
60	1,285,392	70,585	13,696	70,585	70,560	192,180
61	1,394,733	71,762	13,696	71,762	71,736	195,383
62	1,513,012	72,938	13,696	72,938	72,912	198,586

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 State - TX

Benefit Amount Option A (Level)
 SecurePlus Paragon \$100,000
 See Summary of Additional Benefits for information on any riders.

Policy Year	Death Benefit End Year	Total Level Guideline Premium	Total Single Guideline Premium	Total Maximum Guideline Premium		MEC Total 7 Pay Premium
				Total Premium	7 Pay Premium	
63	1,641,024	74,114	13,696	74,114	74,088	201,789
64	1,779,644	75,291	13,696	75,291	75,264	204,992
65	1,929,699	76,467	13,696	76,467	76,440	208,195
66	2,092,310	77,644	13,696	77,644	77,616	211,398
67	2,268,527	78,820	13,696	78,820	78,792	214,601
68	2,459,489	79,997	13,696	79,997	79,968	217,804
69	2,666,430	81,173	13,696	81,173	81,144	221,007
70	2,890,686	82,349	13,696	82,349	82,320	224,210
71	3,133,707	83,526	13,696	83,526	83,496	227,413
72	3,397,063	84,702	13,696	84,702	84,672	230,616
73	3,682,455	85,879	13,696	85,879	85,848	233,819
74	3,991,727	87,055	13,696	87,055	87,024	237,022
75	4,326,877	88,232	13,696	88,232	88,200	240,225
76	4,690,070	89,408	13,696	89,408	89,376	243,428
77	5,083,654	90,584	13,696	90,584	90,552	246,631
78	5,510,170	91,761	13,696	91,761	91,728	249,834
79	5,972,375	92,937	13,696	92,937	92,904	253,037
80	6,473,255	94,114	13,696	94,114	94,080	256,240
81	7,016,046	95,290	13,696	95,290	95,256	259,443
82	7,604,254	96,466	13,696	96,466	96,432	262,646
83	8,241,680	97,643	13,696	97,643	97,608	265,849
84	8,932,442	98,819	13,696	98,819	98,784	269,052
85	9,681,005	99,996	13,696	99,996	99,960	272,255

THE GUIDELINE PREMIUMS SERVE AS A LIMIT ON THE FUNDING OF THIS CONTRACT AND DO NOT GUARANTEE ITS QUALIFICATION AS LIFE INSURANCE UNDER SECTION 7702 OF THE INTERNAL REVENUE CODE.

Policy Cost and Benefit Summary
Prepared for
The Client

Presented By National Life

Age 35
Standard NT
Unisex
State - TX

\$100,000 SecurePlus Paragon with benefits previously described.

Policy Year	Guaranteed Annual Cash Flow	Guaranteed End Year Net Cash Flow	Guaranteed End Year Net Death Benefit	Current Basis B Annual Cash Flow*	Current Basis B End Year Net Cash Value*	Current Basis B End Year Net Death Benefit*
5	\$ (1,176)	\$ 2,581	\$ 100,000	\$ (1,176)	\$ 3,309	\$ 100,000
10	(1,176)	7,589	100,000	(1,176)	10,765	100,000
20	(1,176)	15,430	100,000	(1,176)	39,318	100,000
36	(1,176)	18,554	100,000	(1,176)	176,512	202,989

Policy Year	Averaged Annual Cash Flow*	Averaged Net Equity End Year*	Averaged Net Death Benefit End Year*
5	\$ (1,176)	\$ 2,931	\$ 100,000
10	(1,176)	9,039	100,000
20	(1,176)	23,451	100,000
36	(1,176)	61,409	100,000

* Benefits and values are not guaranteed. The assumptions on which they are based are subject to change by the insurer and are not likely to continue unchanged for the years illustrated. Mortality experience, investment earnings and company expenses may affect these assumptions. Actual results may be more or less favorable.

A copy of this illustration has been provided to the applicant/policy owner. I UNDERSTAND THAT HISTORICAL PERFORMANCE OF THE S&P 500® INDEX SHOULD NOT BE CONSIDERED A REPRESENTATION OF THE PAST OR FUTURE PERFORMANCE FOR ANY OF THE INDEXED STRATEGIES IN THE POLICY.

Date _____

Applicant _____

Date _____

Agent _____



Life Insurance Company of the Southwest

**Illustration Actuary Certification
To Accompany Policy Form Submissions**

Regarding: 8733(0709), Indexed Flexible Premium Adjustable Benefit Life Insurance - Unisex

I, Craig A. Smith, am a Vice President and Chief Actuary of the National Life Insurance Company (of which the Life Insurance Company of the Southwest is a subsidiary) and am a member of the American Academy of Actuaries in good standing. I was appointed on August 2, 2004 by the Board of Directors of the Life Insurance Company of the Southwest to be the illustration actuary for this plan of insurance for all states. I meet the Academy requirements for making this certification and the requirements of applicable state regulations.

The scale used in illustrating non-guaranteed elements for the plan of insurance written on the policy form described above meets the illustration regulation requirements of this state. The disciplined current scale for this plan is in conformity with that regulation and with the Actuarial Standard of Practice for Compliance with the NAIC Life Insurance Model Regulation (ASOP 24) promulgated by the Actuarial Standards Board.

Non-guaranteed elements illustrated for new policies are consistent with those illustrated for similar in force policies. Illustrated non-guaranteed elements for new and in force policies subject to this regulation are consistent with the non-guaranteed elements amounts actually credited or charged to the same or similar forms.

The expenses used in the calculation of the disciplined current scale for all policy forms subject to the illustration regulation were fully allocated.

In making this certification, I have reviewed expense allocations, actuarial assumptions and actuarial methods, and such tests of actuarial calculations as I considered necessary.



Date 4/28/2009

Craig A. Smith, FSA, MAAA
Appointed Illustration Actuary for Life Insurance Company of the Southwest

Rev. 11/04



Life Insurance Company of the Southwest

**Responsible Officer Certification
To Accompany Policy Form Submissions**

**Regarding: 8733(0709), Indexed Flexible Premium Adjustable Benefit Life
Insurance – Unisex Version**

I, Elizabeth MacGowan, am the Vice President of Product Development at National Life Insurance Company (of which the Life Insurance Company of the Southwest is a subsidiary). I am an officer of the Company.

1. Life Insurance Company of the Southwest will provide its agents with disclosure information about the expense allocation method used in the product illustrations for the policy forms referenced above.
2. The scales used in insurer authorized illustrations are those scales certified by the illustration actuary.
3. Policies applied for in this state have illustrations that meet the format requirements of the illustration regulation.

Elizabeth MacGowan

Date 3/12/09

Elizabeth MacGowan
Responsible Officer for Life Insurance Company of the Southwest

Responsible Officer Certification for Submission

RESERVE METHODOLOGY & COMPUTATION
EQUITY-INDEXED UNIVERSAL LIFE
LIFE INSURANCE COMPANY OF THE SOUTHWEST
Policy Form 8733

The company intends to make available an equity-indexed universal life product with the following characteristics.

1. On the 21st day of each month, funds in excess of amounts needed to pay for the next 12 months of policy charges are swept into one or more of four equity-indexed strategies or a fixed-term strategy. The funds earn interest and/or indexed credits and then are swept again using the current allocation defined by the policyholder. The amount that remains to pay policy charges is referred to as the basic strategy. Both the basic strategy and the fixed strategy have a guaranteed credited rate of 2.5%.

2. There are four equity-indexed strategies. Three use European options with a term of one year, the S&P 500 index, a floor of 0% with different guaranteed participation percentages and different guaranteed minimum cap rates. The fourth uses an Asian option with a term of one year, the S&P 500 index, a floor of 0% with a guaranteed minimum 30% participation and no cap.

The company intends to follow computational method type 2 of Actuarial Guideline 36, the CRVM with Updated Market Value Method (UMV). The company also intends to provide certification (Attachment #5 of Actuarial Guideline 36) signed by the appointed actuary where required with each annual and quarterly statutory financial statement filed in each state in which the company writes equity indexed universal life. The certification relates to the assumptions implicit in option values included in the calculation of reserves.

The mortality basis is the 2001 CSO (M/F) Nonsmoker/Smoker Ultimate ANB



Craig A. Smith, FSA, MAAA

May 2, 2009
Date

Indexed Interest Crediting and Investment Procedures for Indexed Universal Life

Life Insurance Company of the Southwest
Policy Form 8733

Indexed Interest Crediting

Index Description

The Standard & Poor's Composite Stock Price Index ("S&P 500 Index") measures the performance of the U.S. stock market as represented by 500 companies selected by Standard & Poor's. The index is market-value weighted so that the influence of each company on the index is proportional to its market value.

The Index Value

The "index value" as of any date is the published value of the index at the close of business on that date. If no value was published on that date, then the last published value of the index is used.

Indexed Segments

Each sweep into an indexed strategy creates a distinct "indexed segment" with a one-year crediting period. At the end of each crediting period, index earnings are credited to each indexed segment according to the segment's declared crediting strategy (either European or Asian). Each indexed segment will have a participation rate and an index earnings cap, which are determined in advance for each crediting period. Participation rates and index earnings caps are set based on interest rates and other relevant factors, such as general economic conditions, marketing considerations, and tax or other regulatory changes.

Index Segment Value

On each segment anniversary, the "indexed segment value" is calculated as follows:

1. the indexed segment value on the previous indexed segment anniversary; minus
2. withdrawals from the indexed segment during the policy year just ended; minus
3. monthly deductions from the indexed segment during the policy year just ended.

For the purpose of calculating indexed segment value, withdrawals requested on a segment anniversary and monthly deductions taken on a segment anniversary will not be included in calculating the indexed segment value for the policy year just ended.

Index Growth

At the end of the crediting period, the “index growth” for each indexed segment is calculated as a function of the index performance over the crediting period just ended.

Indexed Strategies 1, 2, and 3 are point-to-point/European strategies which are distinguished from one another only by their participation rates and index earnings caps. The index growth for Indexed Strategies 1, 2, and 3 is calculated as follows:

- a) the index value as of the one-year anniversary of the indexed segment; minus
- b) the index value as of the inception of the indexed segment; this difference divided by
- c) the index value as of the inception of the indexed segment.

Indexed Strategy 4 is a point-to-average/Asian strategy which differs from the first 3 strategies in its index growth calculation method. On each segment crediting date, the index growth for Strategy 4 is calculated as follows:

- a) the sum of the index values for each day the index value was published between the inception of the indexed segment and the one-year anniversary of the indexed segment, excluding the index value at inception, but including the index value on its anniversary; divided by
- b) the number of days the index value was published between the inception of the indexed segment and the one-year anniversary of the indexed segment, excluding the day it was created, but including the anniversary; minus
- c) the index value as of the inception of the indexed segment; this difference divided by
- d) the index value as of the inception of the indexed segment.

Indexed Earnings

At the end of each indexed segment’s crediting period, “index earnings” for the segment are calculated as follows:

1. index growth for the segment, multiplied by the segment’s participation rate, with this product adjusted so that it is no greater than the segment’s index earnings cap, and no less than 0%; multiplied by
2. the indexed segment value at the end of the crediting period.

An indexed segment’s index earnings calculated at the end of a crediting period are added to the indexed segment value at the end of the crediting period. Index earnings are not calculated or credited until the end of the crediting period.

Investment Policy

Investment Strategy

The Company plans to invest the bulk of the assets backing the product in the types of fixed income securities and mortgage loans which it traditionally invests in to provide for its obligations on fixed annuity and life insurance policies. These investments will be designed to ensure that the Company will be able to meet its guaranteed obligations under the indexed policies.

The Company will meet its obligation to credit excess interest by investing the remaining portion of the portfolio backing the product in options, forwards, and futures on the S&P 500 Index, with the intent that a portfolio of options, forwards, and futures will always be maintained which will produce returns, on a total portfolio basis, which will be sufficient to fund obligations to credit excess interest on indexed contracts. The assets backing the product are held in the General Account and are not formally segregated from the assets supporting non-indexed contracts.

Availability of Investments

Investments for the product are fixed income instruments (primarily bonds and mortgages) and hedging instruments. Because there are large and liquid markets for these instruments, it is unlikely that they would not be available in sufficient quantities to support the product. If the hedging instruments became unavailable in the future, the terms of the policy would permit the Company to declare an index earnings cap and participation rate equal to the guarantees as set forth in the policy for indexed segments reaching the ends of their segments and for new segments. In that event, the management of the product would effectively be similar to that of an ordinary Universal Life insurance product.

Hedging Policy

The derivatives used for hedging will be options and/or futures contracts based on the index. The amount and strike of the options are based upon the indexed segment values, the index, the index earnings cap, and the participation rate. The methodology for measuring the adequacy of the current hedge position will include a measurement of the change in the value of assets and liabilities due to a change in the index ("delta"). It may also include additional measurements related to the potential future changes in liabilities and assets (such as "gamma", "theta", "rho", and/or "vega"). The methodology for determining when and how to rebalance the hedge position will include a tolerance level for mismatches, and a strategy determining which assets to buy or sell when a mismatch exceeds this tolerance level.

The maturities of derivatives investments used in the hedging program are chosen such that the sensitivities of the assets are closely aligned with those of the liabilities being hedged.

The liabilities are updated weekly to reflect the changes in the indexed segment values due to the occurrence of deaths, surrenders, withdrawals, and other potentialities. The hedging system

used to manage the asset portfolio will be run and analyzed at least once per day and frequently more often. For option valuation work, the Company uses both internally developed Black-Scholes models and off-the-shelf versions widely distributed by numerous vendors.

The Company handles the risks associated with purchasing hedging instruments as follows:

1. *Liquidity Risk*: The Company faces minimal liquidity risk in its derivatives activities because it will not enter into derivatives investments in strategies that depend on liquidating derivatives contracts prior to expiration or maturity. Liquidity necessary for its business will be available entirely from other sources.
2. *Credit Risk*: The Company is exposed to the risk that counterparties on over-the-counter derivatives contracts will default on such contracts. It mitigates this risk by dealing only with counterparties meeting the Company's stated criteria.
3. *Market Risk*: The Company will minimize this risk by selecting derivative instruments which match the item being hedged.
4. *Pricing Risk*: The Company assumes that market prices may change between the time the participation rate and index earnings cap is set and the time the Company hedges the liability. Sometimes the market will move in the Company's favor, while at other times the market will move against the Company. Over time this risk will be minimal. As a further measure against pricing risk, the Company limits the amount of time between liability pricing and hedging activity.
5. *Legal Risk*: All derivatives contracts must be in writing and are thoroughly reviewed by the Law Department.
6. *Operations Risk*: The procedures for effecting derivatives transactions are designed to minimize the possibility of human error and are subject to review by the Company's internal audit department.

The Chief Investment Officer and the Chief Actuary shall perform a review and submit a report to the Investment Risk Management Committee, at least once per year, of the professional personnel engaged in the execution of the Company's derivatives investments program and the systems employed in this program.

The individuals currently authorized to trade derivatives transactions include: Senior Vice President and Chief Investment Officer of National Life Insurance Company and Life Insurance Company of the Southwest as well as Senior Vice President of Sentinel Asset Management, Inc., Thomas H. Brownell, CFA; Senior Vice President, Sentinel Asset Management, Inc. David M. Brownlee, CFA; Vice President, Sentinel Asset Management, Inc. Jason J. Doiron, FRM, PRM; Vice President, Sentinel Asset Management, Inc. Kenneth J. Hart; Assistant Vice President, Sentinel Asset Management, Inc. Richard E. Robert, CPA, FRM.

Counterparties

The Company will enter into over-the-counter derivatives transactions only with dealers with which it has a written master agreement which provides for netting of payments owed by the parties and only pursuant to such agreements. The Company will enter into over-the-counter derivatives transactions only with dealers which are either domiciled within the United States,

or within a foreign jurisdiction listed in the Purposes and Procedures Manual of the Securities Valuation Office of the NAIC as eligible for netting.

The Company shall prepare a report at least monthly which calculates the current counterparty exposure amount for each counterparty with which the Company has outstanding over-the-counter derivatives contracts. Sentinel Asset Management, Inc., bears primary responsibility for review and monitoring of these counterparty exposure reports.

Current and Prospective Counterparties:

- Merrill Lynch International, SVO Rating = 1
- JP Morgan Chase Bank, SVO Rating = 1
- Goldman, Sachs, & Co., SVO Rating = 1
- Citibank, NA, SVO Rating = 1
- Credit Suisse International, SVO Rating = 1
- Barclay's Bank, SVO Rating = 1

Dynamic Analysis of Hedging Effectiveness

A report providing an analysis of the hedging effectiveness of the derivatives shall be provided. The report will include the following information:

- New or renewed liability options guaranteed
- + option maturities or proceeds from closed long positions
- + gain (or less loss) on closed short positions
- + gain (or less loss) on closed futures positions
- + change in market value of hedges
- + change in cash from open short sales

Less:

- cost of call options purchased
- + index-based interest credited on products
- + change in market value of the option component of index-based liabilities
- + gain due to policy decrements

Equals:

Hedging Effectiveness

Asset Adequacy Testing

The cash flow testing is performed annually using specified deterministic future scenarios as well as randomly generated stochastic future scenarios. Economic scenarios encompassing randomized and correlated movements in both market interest rates and the S&P 500 Index will be tested. To the extent that derivatives are employed for hedging, the cash flow testing will consider the effect of both the derivative and the exposure being hedged. The analysis aims to assess the adequacy of both the fixed income securities backing the guarantees as well as the options backing the equity exposure.

Statutory Statement

Statutory accounting treatment of the assets and liabilities does not create any significant distortions to the income statement or balance sheet. The derivatives are marked-to-market and a substantially similar adjustment is made to the liabilities under Actuarial Guideline 36. The Indexed Universal Life product will be reported, for risk based capital purposes, with the same risk characteristics as life insurance.

Any changes in investment strategies relative to this filing will be filed on an ongoing basis. The Company will provide any additional information that the department may request at a later date.



Craig A. Smith, FSA, MAAA

May 2, 2009
Date

Statement of Variability
8733(0709)

The policy Covers and Data Pages within the submitted policies contained brackets, used to designate variable items that may be unique for each policyholder or issue of the submitted policy.

Descriptions of the bracketed items follow:

EFFECTIVE DATE: This provides the Effective Date of the policy, both on the Cover and within the Data Pages.

POLICY NUMBER: This 7-digit number is the unique policy number by which we distinguish each policy issued on this form. This number appears on the Cover and on the Data Pages.

MATURITY DATE: This is the date on which the policy matures, and will be specific to the circumstances of each policy.

INSURED: This is the Insured's name, and will be unique to each Insured. This appears on the Cover and within the Data Pages.

ISSUE AGE: This is the issue age of the named Insured and appears on the Cover and within the Data Pages.

FACE AMOUNT: This amount will be unique to the policy based on each individual situation and appears on the Cover and within the Data Pages.

MONTHLY POLICY DATE: This can take the variables of the "1st" through the "31st".

DEATH BENEFIT OPTION: This can take the variables of "A" or "B".

OWNER: This is the Owner's name, and will be unique to each Owner. This appears on the Cover and within the Data Pages. The statement "As stated in the application unless later changed" may appear to identify the owner, unless or until a revised Data Page is prepared to specify a new owner. In these circumstances, the name of the new owner will be stated, such name being unique to each owner.

BENEFICIARY: The statement "As stated in the application unless later changed" will appear to identify the beneficiary, unless or until a revised Data Page is prepared to specify a new beneficiary. In these circumstances, the name of the new beneficiary will be stated, such name being unique to each beneficiary.

CHAIRMAN OF THE BOARD AND CHIEF EXECUTIVE OFFICER, SECRETARY, and REGISTRAR: These are subject to variability only upon a change of officer status.

MINIMUM MONTHLY PREMIUM: This is the lowest premium that will be accepted on this policy.

PLANNED PERIODIC PREMIUM: This is the premium that the applicant has asked be billed. It's value is unique to the interests of each applicant.

PREMIUM INTERVAL: This denotes the number of premiums payable each year, as requested by the applicant in establishing his or her planned periodic premium and premium interval and can take the variables of "AT ISSUE", "ANNUALLY", "SEMI-ANNUALLY", "QUARTERLY", "MONTHLY" or "CHECK-O-MATIC".

FOR PREMIUM PAYMENT PERIOD: This date varies with values of the Effective Date and the Maturity Date.

LOAN INTEREST RATE: This percentage varies from 3.00% to the Published Monthly Average of the Moody's Corporate Bond Yield Average – Monthly Average Corporates for the calendar month ending two months before the calendar month in which the Policy Anniversary occurs.

THE INSURED HAS BEEN CLASSIFIED: This may take the variables of “ELITE NON-TOBACCO”, “PREFERRED NON-TOBACCO”, “STANDARD NON-TOBACCO”, “PREFERRED TOBACCO”, or “STANDARD TOBACCO”.

TABLE OF GUARANTEED MAXIMUM COST OF INSURANCE RATES: This table may take the values as shown in the submitted rate schedules.

DEFINITION OF LIFE INSURANCE TEST: This may take the variables of “GUIDELINE PREMIUM TEST” or “CASH VALUE ACCUMULATION TEST.” If the GUIDELINE PREMIUM TEST is used, the GUIDELINE SINGLE PREMIUM and the GUIDELINE LEVEL PREMIUM lines will appear along with the TABLE OF DEATH BENEFIT STANDARD FACTORS. If the CASH VALUE ACCUMULATION TEST is used, only the TABLE OF DEATH BENEFIT STANDARD FACTORS appears.

GUIDELINE SINGLE PREMIUM AND GUIDELINE LEVEL PREMIUM: These lines and the applicable Table of Death Benefit Standard Factors will appear only if the “GUIDELINE PREMIUM TEST” is used for the policy.

TABLE OF DEATH BENEFIT STANDARD FACTORS: This will be based on either the Guideline Premium Test or the Cash Value Accumulation Test.

INITIAL FIXED-TERM SEGMENT INTEREST RATE: This rate is variable with a minimum of 2.50% and no maximum.

INDEXED STRATEGY 1 - INITIAL PARTICIPATION RATE: This rate is variable with a minimum of 100% and no maximum. Changes in this rate are based on expectations of future experience with respect to investment earnings and the cost of the hedging instrument used to support this strategy.

INDEXED STRATEGY 1 - INITIAL INDEX EARNINGS CAP: This rate is variable with a guaranteed minimum index earnings cap of 3.10% and no maximum. Changes in this rate are based on expectations of future experience with respect to investment earnings and the cost of the hedging instrument used to support this strategy.

INDEXED STRATEGY 2 - INITIAL PARTICIPATION RATE: This rate is variable with a guaranteed minimum of 110% and no maximum. Changes in this rate are based on expectations of future experience with respect to investment earnings and the cost of the hedging instrument used to support this strategy.

INDEXED STRATEGY 2 - INITIAL INDEX EARNINGS CAP: This rate is variable with a guaranteed minimum index earnings cap of 3.0% and no maximum. Changes in this rate are based on expectations of future experience with respect to investment earnings and the cost of the hedging instrument used to support this strategy.

INDEXED STRATEGY 3 - INITIAL PARTICIPATION RATE: This rate is variable with a guaranteed minimum participation rate of 25% and no maximum. Changes in this rate are based on expectations of future experience with respect to investment earnings and the cost of the hedging instrument used to support this strategy.

INDEXED STRATEGY 4 - INITIAL PARTICIPATION RATE: This rate is variable with a minimum participation rate of 30% and no maximum. Changes in this rate are based on expectations of future experience with respect to investment earnings and the cost of the hedging instrument used to support this strategy.

MONTHLY EXPENSE CHARGE PER THOUSAND: This charge is variable and is based upon the issue age, risk class, and duration. The maximum charge per thousand of face amount would be 5.13. The minimum charge per thousand of face amount would be zero.

SURRENDER CHARGE: This table may take the values as shown in the submitted surrender charge schedules.

**Actuarial Memorandum
Additional Protection Benefit Rider
Policy Form 8536(0707)**

Purpose and Scope

This actuarial memorandum has been prepared to support the filing of new rates for an existing additional protection benefit rider. This document has been prepared for the purpose of demonstrating compliance with regulatory authority and may not be appropriate for other purposes.

Rider Description

The rates filed with this actuarial memorandum are designed to be attached to policy form 8733(0709) which is an indexed flexible premium adjustable benefit life insurance policy. This rider utilizes unisex cost factors.

Death Benefit

This rider provides an additional death benefit on the insured under the policy to which it is attached. The additional death benefit provided by this rider is fully integrated with the death benefit of the base policy for the purpose of determining compliance with the IRC §7702 definition of life insurance. The result is that the combined death benefit is equal to the sum of the base policy death benefit and the additional protection benefit rider face amount until such time as the death benefit standard (accumulated value times the appropriate corridor factor) exceeds this amount.

Premium

The monthly cost for this rider is deducted from the accumulated value of the policy and is calculated as follows:

1. The additional protection benefit on such date divided by the sum of 1 plus the monthly accumulated value interest rate and multiplied by the applicable cost of insurance rate; plus
2. the applicable monthly expense charge multiplied by the rider face amount.

The cost of insurance rates are a flexible factor for this policy form. The current cost of insurance rates for this rider are the same as the current cost of insurance rates for the policy to which it is attached. The guaranteed cost of insurance rates for this rider are based on the 2001 CSO Unisex (M/F 80/20) Composite Ultimate ANB mortality table. Tables of guaranteed monthly cost of insurance rates per thousand of face amount are shown in the appendix.

The monthly expense charge is a flexible factor for this policy form. The monthly expense charge is zero for the initial rate class for this policy form, and the guaranteed monthly expense charge is the same as the guaranteed monthly expense charge for the policy to which it is attached.

The company intends to review anticipated experience and conduct profit studies to determine whether changes in anticipated experience are significant enough to warrant adjusting flexible factors for both in force riders and new riders.

Any modification to the flexible factors for in force riders will meet the following requirements:

- 1) Any such modification will be based upon future anticipated or emerging experience.
- 2) Any such modification will be made on a class basis based on the classes initially identified when policies are issued.
- 3) Any such modification will not result in the distribution of prior profits or the recovery of prior losses, nor will any such modification be used to increase the expected profitability of these policies.

**Actuarial Memorandum
Additional Protection Benefit Rider
Policy Form 8536(0707)**

The company will provide the Department with appropriate information concerning a change in the flexible factors for this policy form prior to the implementation of such a change. Advance notice will be provided as required by the Department.

Certifications

I hereby certify, to the best of my knowledge and judgment, that:

- (1.) The nonforfeiture provisions of this policy form are at least as great as those required by the NAIC Standard Nonforfeiture Law and the NAIC Universal Life Insurance Model Regulation.
- (2.) The valuation standards used in establishing reserves for this policy form comply with the NAIC Standard Valuation Law, the NAIC Universal Life Insurance Model Regulation, and all applicable NAIC Actuarial Guidelines.
- (3.) No assumptions or provisions unfairly discriminate in availability, rates, benefits, or in any other way for prospective insureds of the same class, equal expectation of life, and degree of risk hazard.
- (4.) The rider charges are reasonable and self-supporting.

Statement of Professional Qualifications

I, Nancy W. Winings, am a Designated Representative of Life Insurance Company of the Southwest and I am a member in good standing of the American Academy of Actuaries.

Nancy W. Winings

Nancy W. Winings FSA MAAA
April 27, 2009

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

Appendix 1: Minimum Monthly Premium Rates per Thousand
Additional Protection Benefit Rider

Band 1
ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Issue Age	Unisex				
	EPNT	PNT	SNT	PT	ST
0			0.09		
1			0.09		
2			0.09		
3			0.09		
4			0.09		
5			0.09		
6			0.09		
7			0.09		
8			0.10		
9			0.10		
10			0.10		
11			0.10		
12			0.10		
13			0.11		
14			0.11		
15			0.11		
16			0.11		
17			0.11		
18			0.11		
19			0.12		
20	0.11	0.11	0.12	0.14	0.14
21	0.11	0.12	0.12	0.14	0.15
22	0.11	0.12	0.12	0.14	0.15
23	0.12	0.12	0.12	0.15	0.15
24	0.12	0.12	0.13	0.15	0.16
25	0.12	0.13	0.13	0.15	0.16
26	0.13	0.13	0.13	0.16	0.17
27	0.13	0.13	0.14	0.17	0.18
28	0.14	0.14	0.14	0.18	0.19
29	0.14	0.14	0.15	0.18	0.21
30	0.15	0.15	0.15	0.19	0.22
31	0.15	0.15	0.16	0.20	0.24
32	0.15	0.16	0.17	0.21	0.26
33	0.16	0.17	0.18	0.23	0.28
34	0.17	0.17	0.19	0.24	0.31
35	0.18	0.18	0.20	0.26	0.34
36	0.19	0.19	0.20	0.28	0.36
37	0.19	0.20	0.21	0.29	0.38
38	0.20	0.21	0.22	0.32	0.41
39	0.21	0.22	0.23	0.34	0.44
40	0.22	0.23	0.25	0.37	0.47
41	0.23	0.24	0.26	0.39	0.50
42	0.24	0.25	0.27	0.41	0.52
43	0.25	0.26	0.28	0.43	0.55

Appendix 1: Minimum Monthly Premium Rates per Thousand
Additional Protection Benefit Rider

Band 2
ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Issue Age	Unisex				
	EPNT	PNT	SNT	PT	ST
0			0.09		
1			0.09		
2			0.09		
3			0.09		
4			0.09		
5			0.09		
6			0.09		
7			0.09		
8			0.09		
9			0.10		
10			0.10		
11			0.10		
12			0.10		
13			0.11		
14			0.11		
15			0.11		
16			0.11		
17			0.11		
18			0.11		
19			0.11		
20	0.11	0.11	0.11	0.14	0.14
21	0.11	0.11	0.12	0.14	0.14
22	0.11	0.12	0.12	0.14	0.15
23	0.11	0.12	0.12	0.15	0.15
24	0.12	0.12	0.12	0.15	0.15
25	0.12	0.12	0.13	0.15	0.16
26	0.13	0.13	0.13	0.16	0.17
27	0.13	0.13	0.14	0.17	0.18
28	0.13	0.14	0.14	0.17	0.19
29	0.14	0.14	0.15	0.18	0.20
30	0.14	0.15	0.15	0.19	0.22
31	0.15	0.15	0.16	0.20	0.23
32	0.15	0.16	0.17	0.21	0.26
33	0.16	0.16	0.17	0.22	0.28
34	0.17	0.17	0.18	0.24	0.30
35	0.18	0.18	0.19	0.25	0.33
36	0.18	0.19	0.20	0.27	0.35
37	0.19	0.19	0.21	0.29	0.38
38	0.20	0.20	0.22	0.31	0.41
39	0.21	0.21	0.23	0.34	0.44
40	0.22	0.22	0.24	0.36	0.47
41	0.23	0.23	0.25	0.38	0.49
42	0.24	0.24	0.27	0.40	0.51
43	0.25	0.26	0.28	0.43	0.54

Appendix 1: Minimum Monthly Premium Rates per Thousand
Additional Protection Benefit Rider

Band 3
ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Issue Age	Unisex				
	EPNT	PNT	SNT	PT	ST
0			0.08		
1			0.08		
2			0.08		
3			0.09		
4			0.09		
5			0.09		
6			0.09		
7			0.09		
8			0.09		
9			0.10		
10			0.10		
11			0.10		
12			0.10		
13			0.10		
14			0.11		
15			0.11		
16			0.11		
17			0.11		
18			0.11		
19			0.11		
20	0.11	0.11	0.11	0.14	0.14
21	0.11	0.11	0.11	0.14	0.14
22	0.11	0.11	0.12	0.14	0.15
23	0.11	0.12	0.12	0.14	0.15
24	0.12	0.12	0.12	0.15	0.15
25	0.12	0.12	0.12	0.15	0.15
26	0.12	0.13	0.13	0.16	0.16
27	0.13	0.13	0.13	0.16	0.18
28	0.13	0.14	0.14	0.17	0.19
29	0.14	0.14	0.14	0.18	0.20
30	0.14	0.14	0.15	0.19	0.21
31	0.15	0.15	0.16	0.20	0.23
32	0.15	0.15	0.16	0.21	0.25
33	0.16	0.16	0.17	0.22	0.27
34	0.16	0.17	0.18	0.23	0.30
35	0.17	0.18	0.19	0.25	0.33
36	0.18	0.18	0.20	0.27	0.35
37	0.19	0.19	0.21	0.29	0.37
38	0.19	0.20	0.22	0.31	0.40
39	0.20	0.21	0.23	0.33	0.43
40	0.21	0.22	0.24	0.36	0.46
41	0.22	0.23	0.25	0.38	0.48
42	0.23	0.24	0.26	0.40	0.51
43	0.25	0.25	0.28	0.42	0.53

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

Appendix 1: Minimum Monthly Premium Rates per Thousand
Additional Protection Benefit Rider

Band 1
ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST= Standard Tobacco

Issue Age	Unisex				
	EPNT	PNT	SNT	PT	ST
44	0.27	0.27	0.30	0.46	0.58
45	0.28	0.29	0.32	0.49	0.61
46	0.30	0.31	0.34	0.52	0.64
47	0.32	0.33	0.36	0.54	0.67
48	0.33	0.34	0.38	0.57	0.71
49	0.35	0.37	0.41	0.60	0.74
50	0.38	0.39	0.43	0.64	0.78
51	0.40	0.42	0.46	0.68	0.83
52	0.43	0.44	0.50	0.72	0.88
53	0.45	0.47	0.53	0.77	0.93
54	0.48	0.50	0.56	0.81	0.98
55	0.50	0.52	0.59	0.86	1.03
56	0.55	0.57	0.64	0.94	1.14
57	0.60	0.62	0.69	1.03	1.25
58	0.64	0.66	0.74	1.12	1.36
59	0.69	0.71	0.79	1.21	1.48
60	0.74	0.75	0.84	1.29	1.59
61	0.80	0.82	0.91	1.39	1.67
62	0.86	0.88	0.98	1.48	1.75
63	0.92	0.95	1.04	1.57	1.83
64	0.99	1.01	1.11	1.67	1.92
65	1.05	1.07	1.18	1.76	2.00
66	1.11	1.14	1.26	1.87	2.15
67	1.17	1.21	1.34	1.99	2.31
68	1.22	1.27	1.42	2.10	2.47
69	1.28	1.34	1.51	2.21	2.62
70	1.34	1.40	1.59	2.33	2.78
71	1.38	1.46	1.66	2.37	2.83
72	1.42	1.51	1.73	2.42	2.88
73	1.47	1.56	1.80	2.47	2.94
74	1.51	1.62	1.88	2.51	2.99
75	1.55	1.67	1.95	2.56	3.04
76		6.76	7.09	9.61	10.32
77		7.33	7.68	10.35	11.09
78		7.98	8.35	11.17	11.94
79		8.69	9.08	12.03	12.83
80		9.47	9.88	12.95	13.81
81		10.35	10.78	14.00	14.92
82		11.30	11.78	15.11	16.08
83		12.42	12.94	16.43	17.55
84		13.69	14.29	17.94	19.25
85		15.16	15.89	19.79	21.45

Appendix 1: Minimum Monthly Premium Rates per Thousand
Additional Protection Benefit Rider

Band 2
ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST= Standard Tobacco

Issue Age	Unisex				
	EPNT	PNT	SNT	PT	ST
44	0.26	0.27	0.30	0.45	0.57
45	0.28	0.29	0.32	0.49	0.60
46	0.29	0.30	0.33	0.51	0.63
47	0.31	0.32	0.35	0.53	0.66
48	0.33	0.34	0.38	0.56	0.69
49	0.35	0.36	0.40	0.59	0.73
50	0.37	0.38	0.43	0.63	0.77
51	0.40	0.41	0.46	0.67	0.82
52	0.42	0.44	0.49	0.71	0.87
53	0.45	0.46	0.52	0.76	0.91
54	0.47	0.49	0.55	0.80	0.96
55	0.50	0.52	0.58	0.84	1.01
56	0.54	0.56	0.63	0.93	1.12
57	0.59	0.61	0.68	1.02	1.23
58	0.63	0.65	0.73	1.10	1.34
59	0.68	0.70	0.78	1.19	1.45
60	0.73	0.74	0.83	1.27	1.57
61	0.79	0.81	0.89	1.37	1.65
62	0.85	0.87	0.96	1.46	1.73
63	0.91	0.93	1.03	1.55	1.81
64	0.97	0.99	1.10	1.64	1.89
65	1.03	1.06	1.16	1.73	1.97
66	1.09	1.12	1.24	1.85	2.12
67	1.15	1.19	1.32	1.96	2.28
68	1.21	1.25	1.40	2.07	2.43
69	1.26	1.32	1.48	2.18	2.58
70	1.32	1.38	1.56	2.29	2.74
71	1.36	1.44	1.63	2.34	2.79
72	1.40	1.49	1.71	2.38	2.84
73	1.45	1.54	1.78	2.43	2.89
74	1.49	1.59	1.85	2.48	2.95
75	1.53	1.65	1.92	2.52	3.00
76		6.75	7.08	9.60	10.30
77		7.33	7.67	10.33	11.07
78		7.97	8.33	11.15	11.92
79		8.68	9.07	12.02	12.82
80		9.46	9.86	12.94	13.79
81		10.34	10.77	13.99	14.90
82		11.29	11.76	15.10	16.06
83		12.41	12.93	16.42	17.53
84		13.68	14.28	17.93	19.23
85		15.15	15.88	19.77	21.43

Appendix 1: Minimum Monthly Premium Rates per Thousand
Additional Protection Benefit Rider

Band 3
ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST= Standard Tobacco

Issue Age	Unisex				
	EPNT	PNT	SNT	PT	ST
44	0.26	0.27	0.29	0.45	0.56
45	0.28	0.28	0.31	0.48	0.60
46	0.29	0.30	0.33	0.50	0.62
47	0.31	0.32	0.35	0.53	0.65
48	0.32	0.33	0.37	0.55	0.68
49	0.34	0.36	0.39	0.59	0.72
50	0.37	0.38	0.42	0.62	0.76
51	0.39	0.40	0.45	0.66	0.80
52	0.41	0.43	0.48	0.70	0.85
53	0.44	0.46	0.51	0.75	0.90
54	0.46	0.48	0.54	0.79	0.95
55	0.49	0.51	0.57	0.83	1.00
56	0.53	0.55	0.62	0.92	1.11
57	0.58	0.60	0.67	1.00	1.21
58	0.62	0.64	0.72	1.09	1.32
59	0.67	0.69	0.77	1.17	1.43
60	0.71	0.73	0.81	1.26	1.54
61	0.78	0.79	0.88	1.35	1.62
62	0.84	0.86	0.95	1.44	1.70
63	0.90	0.92	1.01	1.53	1.78
64	0.96	0.98	1.08	1.62	1.86
65	1.02	1.04	1.15	1.71	1.94
66	1.07	1.11	1.23	1.82	2.09
67	1.13	1.17	1.30	1.93	2.24
68	1.19	1.23	1.38	2.04	2.39
69	1.24	1.30	1.46	2.15	2.55
70	1.30	1.36	1.54	2.26	2.70
71	1.34	1.41	1.61	2.30	2.75
72	1.38	1.47	1.68	2.35	2.80
73	1.42	1.52	1.75	2.39	2.85
74	1.46	1.57	1.82	2.44	2.90
75	1.51	1.62	1.89	2.48	2.95
76		6.67	6.98	9.48	10.15
77		7.24	7.57	10.21	10.92
78		7.89	8.24	11.03	11.76
79		8.60	8.97	11.89	12.66
80		9.37	9.76	12.81	13.63
81		10.25	10.67	13.85	14.72
82		11.21	11.65	14.96	15.88
83		12.32	12.82	16.27	17.33
84		13.58	14.15	17.76	19.01
85		15.04	15.73	19.58	21.17

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

**Appendix 2: Current Monthly Expense Charge per
Thousand of Initial Additional Protection Benefit Rider**

Face Amount
Band 1
ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Current Basis: The monthly expense charge is deducted during the first ten policy years.

Issue Age	Unisex				
	ENT	PNT	SNT	PT	ST
0			0.06		
1			0.05		
2			0.05		
3			0.05		
4			0.05		
5			0.05		
6			0.05		
7			0.05		
8			0.05		
9			0.05		
10			0.05		
11			0.05		
12			0.05		
13			0.05		
14			0.06		
15			0.06		
16			0.06		
17			0.06		
18			0.06		
19			0.06		
20	0.05	0.05	0.06	0.04	0.06
21	0.04	0.05	0.05	0.04	0.05
22	0.04	0.04	0.05	0.03	0.05
23	0.04	0.04	0.05	0.03	0.04
24	0.04	0.04	0.04	0.03	0.04
25	0.03	0.04	0.04	0.02	0.04
26	0.03	0.03	0.04	0.02	0.04
27	0.03	0.03	0.04	0.02	0.04
28	0.03	0.03	0.04	0.02	0.04
29	0.03	0.03	0.04	0.03	0.05
30	0.03	0.03	0.04	0.03	0.05
31	0.03	0.03	0.04	0.03	0.05
32	0.03	0.03	0.04	0.02	0.05
33	0.03	0.03	0.04	0.02	0.05
34	0.03	0.03	0.04	0.02	0.06
35	0.03	0.03	0.04	0.02	0.06
36	0.03	0.03	0.04	0.02	0.06
37	0.02	0.03	0.04	0.02	0.06
38	0.02	0.03	0.04	0.02	0.06
39	0.02	0.03	0.05	0.02	0.07
40	0.02	0.03	0.05	0.02	0.07
41	0.02	0.03	0.05	0.03	0.08
42	0.02	0.03	0.05	0.03	0.09
43	0.02	0.03	0.05	0.03	0.09

**Appendix 2: Current Monthly Expense Charge per
Thousand of Initial Additional Protection Benefit Rider**

Face Amount
Band 2
ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Current Basis: The monthly expense charge is deducted during the first ten policy years.

Issue Age	Unisex				
	ENT	PNT	SNT	PT	ST
0			0.05		
1			0.04		
2			0.04		
3			0.04		
4			0.04		
5			0.04		
6			0.04		
7			0.04		
8			0.04		
9			0.04		
10			0.04		
11			0.04		
12			0.05		
13			0.05		
14			0.05		
15			0.05		
16			0.05		
17			0.05		
18			0.05		
19			0.05		
20	0.04	0.04	0.05	0.04	0.05
21	0.04	0.04	0.04	0.03	0.04
22	0.03	0.04	0.04	0.03	0.04
23	0.03	0.03	0.04	0.02	0.04
24	0.03	0.03	0.04	0.02	0.03
25	0.03	0.03	0.04	0.02	0.03
26	0.03	0.03	0.03	0.01	0.03
27	0.02	0.03	0.03	0.01	0.03
28	0.02	0.03	0.03	0.01	0.03
29	0.02	0.03	0.03	0.02	0.04
30	0.02	0.02	0.03	0.02	0.04
31	0.02	0.02	0.03	0.02	0.04
32	0.02	0.02	0.03	0.02	0.04
33	0.02	0.02	0.03	0.02	0.04
34	0.02	0.02	0.03	0.02	0.05
35	0.02	0.02	0.04	0.02	0.05
36	0.02	0.02	0.04	0.01	0.05
37	0.02	0.02	0.04	0.01	0.05
38	0.02	0.02	0.04	0.01	0.05
39	0.02	0.02	0.04	0.02	0.06
40	0.02	0.02	0.04	0.02	0.07
41	0.02	0.02	0.04	0.02	0.07
42	0.02	0.02	0.04	0.02	0.08
43	0.01	0.02	0.04	0.02	0.08

**Appendix 2: Current Monthly Expense Charge per
Thousand of Initial Additional Protection Benefit Rider**

Face Amount
Band 3
ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Current Basis: The monthly expense charge is deducted during the first ten policy years.

Issue Age	Unisex				
	ENT	PNT	SNT	PT	ST
0			0.04		
1			0.04		
2			0.03		
3			0.03		
4			0.03		
5			0.04		
6			0.03		
7			0.03		
8			0.03		
9			0.03		
10			0.03		
11			0.03		
12			0.04		
13			0.04		
14			0.04		
15			0.04		
16			0.05		
17			0.05		
18			0.04		
19			0.04		
20	0.03	0.03	0.04	0.03	0.04
21	0.03	0.03	0.04	0.02	0.03
22	0.03	0.03	0.03	0.02	0.03
23	0.02	0.02	0.03	0.01	0.03
24	0.02	0.02	0.03	0.01	0.03
25	0.02	0.02	0.03	0.01	0.02
26	0.02	0.02	0.03	0.01	0.02
27	0.02	0.02	0.03	0.01	0.02
28	0.01	0.02	0.03	0.01	0.02
29	0.01	0.02	0.03	0.01	0.03
30	0.01	0.02	0.03	0.01	0.03
31	0.01	0.01	0.02	0.01	0.03
32	0.01	0.01	0.02	0.01	0.03
33	0.01	0.01	0.03	0.01	0.03
34	0.01	0.01	0.03	0.01	0.04
35	0.01	0.01	0.03	0.01	0.04
36	0.01	0.01	0.03	0.01	0.04
37	0.01	0.01	0.03	0.01	0.04
38	0.01	0.01	0.03	0.01	0.04
39	0.01	0.01	0.03	0.01	0.05
40	0.01	0.01	0.03	0.01	0.06
41	0.01	0.01	0.03	0.01	0.06
42	0.01	0.01	0.04	0.01	0.07
43	0.01	0.01	0.04	0.01	0.07

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

**Appendix 2: Current Monthly Expense Charge per
Thousand of Initial Additional Protection Benefit Rider**

Face Amount
Band 1
ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Current Basis: The monthly expense charge is deducted during the first ten policy years.

Issue Age	Unisex				
	ENT	PNT	SNT	PT	ST
44	0.02	0.03	0.05	0.03	0.09
45	0.02	0.03	0.06	0.03	0.10
46	0.02	0.03	0.06	0.03	0.10
47	0.02	0.03	0.06	0.03	0.11
48	0.02	0.03	0.06	0.03	0.12
49	0.02	0.03	0.07	0.04	0.13
50	0.02	0.03	0.07	0.05	0.15
51	0.02	0.03	0.08	0.05	0.16
52	0.02	0.03	0.08	0.06	0.17
53	0.02	0.03	0.08	0.06	0.18
54	0.02	0.03	0.08	0.07	0.19
55	0.02	0.04	0.09	0.07	0.20
56	0.02	0.04	0.09	0.08	0.21
57	0.02	0.04	0.10	0.09	0.23
58	0.03	0.05	0.11	0.11	0.25
59	0.04	0.06	0.12	0.14	0.28
60	0.06	0.08	0.15	0.19	0.36
61	0.07	0.10	0.17	0.24	0.44
62	0.08	0.11	0.19	0.27	0.47
63	0.09	0.12	0.21	0.30	0.52
64	0.11	0.15	0.23	0.34	0.57
65	0.14	0.17	0.26	0.38	0.61
66	0.17	0.20	0.29	0.42	0.65
67	0.19	0.22	0.31	0.46	0.70
68	0.22	0.25	0.35	0.53	0.78
69	0.26	0.29	0.40	0.61	0.87
70	0.27	0.31	0.44	0.72	1.02
71	0.29	0.33	0.47	0.79	1.12
72	0.31	0.36	0.51	0.86	1.23
73	0.31	0.36	0.53	0.88	1.25
74	0.33	0.38	0.56	0.93	1.33
75	0.34	0.40	0.59	0.98	1.40
76		0.42	0.63	1.05	1.48
77		0.45	0.67	1.11	1.58
78		0.48	0.71	1.18	1.67
79		0.51	0.75	1.24	1.76
80		0.54	0.80	1.31	1.85
81		0.58	0.86	1.38	1.97
82		0.63	0.93	1.47	2.08
83		0.73	1.06	1.63	2.33
84		0.86	1.24	1.85	2.67
85		1.08	1.53	2.25	3.29

**Appendix 2: Current Monthly Expense Charge per
Thousand of Initial Additional Protection Benefit Rider**

Face Amount
Band 2
ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Current Basis: The monthly expense charge is deducted during the first ten policy years.

Issue Age	Unisex				
	ENT	PNT	SNT	PT	ST
44	0.01	0.02	0.05	0.02	0.08
45	0.01	0.02	0.05	0.02	0.09
46	0.01	0.02	0.05	0.02	0.10
47	0.01	0.02	0.05	0.02	0.11
48	0.01	0.02	0.05	0.03	0.11
49	0.01	0.02	0.06	0.03	0.13
50	0.01	0.03	0.07	0.04	0.14
51	0.02	0.03	0.07	0.05	0.15
52	0.01	0.03	0.07	0.05	0.16
53	0.01	0.03	0.07	0.05	0.17
54	0.01	0.03	0.08	0.06	0.18
55	0.01	0.03	0.08	0.07	0.19
56	0.01	0.03	0.08	0.07	0.20
57	0.02	0.03	0.09	0.08	0.22
58	0.02	0.04	0.10	0.10	0.24
59	0.03	0.05	0.12	0.13	0.27
60	0.05	0.07	0.14	0.18	0.35
61	0.06	0.09	0.17	0.23	0.43
62	0.07	0.10	0.18	0.26	0.46
63	0.08	0.12	0.20	0.29	0.51
64	0.10	0.14	0.22	0.33	0.55
65	0.13	0.16	0.25	0.37	0.60
66	0.16	0.19	0.28	0.41	0.64
67	0.18	0.21	0.30	0.45	0.69
68	0.21	0.25	0.34	0.52	0.77
69	0.25	0.29	0.39	0.60	0.86
70	0.26	0.30	0.43	0.70	1.01
71	0.28	0.32	0.47	0.77	1.11
72	0.30	0.35	0.51	0.85	1.22
73	0.30	0.35	0.52	0.87	1.24
74	0.31	0.37	0.55	0.92	1.32
75	0.33	0.39	0.58	0.97	1.38
76		0.41	0.62	1.04	1.47
77		0.44	0.66	1.10	1.56
78		0.47	0.70	1.17	1.65
79		0.50	0.74	1.23	1.74
80		0.53	0.78	1.29	1.84
81		0.57	0.85	1.37	1.95
82		0.62	0.92	1.45	2.06
83		0.72	1.05	1.62	2.31
84		0.85	1.23	1.84	2.65
85		1.06	1.51	2.23	3.26

**Appendix 2: Current Monthly Expense Charge per
Thousand of Initial Additional Protection Benefit Rider**

Face Amount
Band 3
ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Current Basis: The monthly expense charge is deducted during the first ten policy years.

Issue Age	Unisex				
	ENT	PNT	SNT	PT	ST
44	0.01	0.01	0.04	0.01	0.08
45	0.01	0.01	0.04	0.01	0.08
46	0.01	0.01	0.04	0.01	0.09
47	0.01	0.01	0.04	0.02	0.10
48	0.01	0.01	0.04	0.02	0.10
49	0.01	0.02	0.05	0.03	0.12
50	0.01	0.02	0.06	0.03	0.13
51	0.01	0.02	0.06	0.04	0.14
52	0.01	0.02	0.06	0.04	0.15
53	0.01	0.02	0.07	0.04	0.16
54	0.01	0.02	0.07	0.05	0.17
55	0.01	0.02	0.07	0.06	0.18
56	0.01	0.02	0.08	0.07	0.19
57	0.01	0.03	0.08	0.07	0.21
58	0.01	0.03	0.09	0.09	0.23
59	0.03	0.04	0.11	0.12	0.26
60	0.04	0.06	0.13	0.17	0.34
61	0.05	0.08	0.16	0.22	0.42
62	0.06	0.09	0.17	0.25	0.46
63	0.08	0.11	0.19	0.28	0.50
64	0.10	0.13	0.21	0.32	0.54
65	0.12	0.15	0.24	0.36	0.59
66	0.15	0.18	0.27	0.40	0.63
67	0.17	0.21	0.30	0.44	0.68
68	0.20	0.24	0.33	0.51	0.76
69	0.24	0.28	0.38	0.59	0.85
70	0.25	0.29	0.42	0.69	1.00
71	0.27	0.31	0.46	0.76	1.10
72	0.29	0.34	0.50	0.84	1.20
73	0.29	0.34	0.51	0.86	1.23
74	0.30	0.36	0.54	0.91	1.30
75	0.32	0.38	0.57	0.96	1.37
76		0.41	0.61	1.02	1.46
77		0.43	0.65	1.09	1.55
78		0.46	0.69	1.15	1.64
79		0.49	0.73	1.22	1.73
80		0.52	0.77	1.28	1.82
81		0.56	0.84	1.35	1.94
82		0.61	0.90	1.44	2.05
83		0.71	1.03	1.61	2.29
84		0.84	1.21	1.82	2.63
85		1.05	1.50	2.22	3.24

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

**Appendix 2a: Guaranteed Monthly Expense Charge per
Thousand of Initial Additional Protection Benefit Rider**

Face Amount
Band 1
ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Guaranteed Basis: The monthly expense charge is deducted in all policy years.

Issue Age	Unisex				
	ENT	PNT	SNT	PT	ST
0			0.12		
1			0.12		
2			0.11		
3			0.11		
4			0.11		
5			0.11		
6			0.11		
7			0.11		
8			0.11		
9			0.11		
10			0.12		
11			0.12		
12			0.12		
13			0.12		
14			0.13		
15			0.14		
16			0.14		
17			0.14		
18			0.14		
19			0.15		
20	0.14	0.14	0.15	0.12	0.14
21	0.13	0.14	0.14	0.12	0.13
22	0.13	0.13	0.14	0.11	0.13
23	0.13	0.13	0.14	0.11	0.13
24	0.13	0.14	0.14	0.11	0.14
25	0.13	0.14	0.15	0.11	0.14
26	0.14	0.14	0.15	0.11	0.14
27	0.14	0.14	0.15	0.11	0.14
28	0.15	0.15	0.16	0.12	0.15
29	0.16	0.16	0.17	0.14	0.16
30	0.16	0.16	0.17	0.14	0.17
31	0.16	0.17	0.18	0.14	0.18
32	0.17	0.17	0.18	0.15	0.18
33	0.17	0.18	0.19	0.15	0.19
34	0.18	0.18	0.20	0.17	0.21
35	0.18	0.19	0.20	0.17	0.21
36	0.19	0.19	0.21	0.17	0.22
37	0.19	0.20	0.22	0.17	0.22
38	0.20	0.20	0.22	0.18	0.23
39	0.21	0.22	0.24	0.20	0.26
40	0.21	0.22	0.24	0.20	0.27
41	0.22	0.23	0.26	0.22	0.29
42	0.23	0.24	0.27	0.22	0.30
43	0.24	0.25	0.28	0.23	0.31

**Appendix 2a: Guaranteed Monthly Expense Charge per
Thousand of Initial Additional Protection Benefit Rider**

Face Amount
Band 2
ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Guaranteed Basis: The monthly expense charge is deducted in all policy years.

Issue Age	Unisex				
	ENT	PNT	SNT	PT	ST
0			0.11		
1			0.10		
2			0.10		
3			0.10		
4			0.10		
5			0.10		
6			0.10		
7			0.10		
8			0.10		
9			0.10		
10			0.11		
11			0.11		
12			0.11		
13			0.11		
14			0.12		
15			0.13		
16			0.13		
17			0.13		
18			0.13		
19			0.14		
20	0.13	0.13	0.14	0.11	0.13
21	0.12	0.12	0.13	0.11	0.12
22	0.12	0.12	0.13	0.10	0.12
23	0.12	0.12	0.13	0.10	0.12
24	0.12	0.12	0.13	0.10	0.12
25	0.12	0.12	0.13	0.10	0.13
26	0.13	0.13	0.14	0.10	0.13
27	0.13	0.13	0.14	0.10	0.13
28	0.14	0.14	0.15	0.11	0.14
29	0.15	0.15	0.16	0.13	0.15
30	0.15	0.15	0.16	0.13	0.16
31	0.15	0.16	0.17	0.14	0.17
32	0.16	0.16	0.17	0.14	0.17
33	0.16	0.17	0.18	0.14	0.18
34	0.17	0.17	0.19	0.16	0.20
35	0.17	0.18	0.19	0.16	0.20
36	0.18	0.19	0.20	0.16	0.21
37	0.18	0.19	0.21	0.16	0.21
38	0.19	0.19	0.21	0.17	0.22
39	0.20	0.21	0.23	0.19	0.25
40	0.20	0.21	0.23	0.19	0.26
41	0.22	0.22	0.25	0.21	0.28
42	0.22	0.23	0.26	0.21	0.29
43	0.23	0.24	0.27	0.22	0.30

**Appendix 2a: Guaranteed Monthly Expense Charge per
Thousand of Initial Additional Protection Benefit Rider**

Face Amount
Band 3
ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Guaranteed Basis: The monthly expense charge is deducted in all policy years.

Issue Age	Unisex				
	ENT	PNT	SNT	PT	ST
0			0.09		
1			0.09		
2			0.09		
3			0.09		
4			0.09		
5			0.09		
6			0.09		
7			0.09		
8			0.09		
9			0.09		
10			0.10		
11			0.10		
12			0.10		
13			0.10		
14			0.11		
15			0.12		
16			0.12		
17			0.12		
18			0.12		
19			0.13		
20	0.12	0.12	0.13	0.10	0.12
21	0.11	0.11	0.12	0.10	0.11
22	0.11	0.11	0.12	0.09	0.11
23	0.11	0.11	0.12	0.09	0.11
24	0.11	0.11	0.12	0.09	0.12
25	0.11	0.12	0.12	0.09	0.12
26	0.12	0.12	0.13	0.09	0.12
27	0.12	0.12	0.13	0.09	0.12
28	0.13	0.13	0.14	0.10	0.13
29	0.14	0.14	0.15	0.12	0.14
30	0.14	0.14	0.15	0.12	0.15
31	0.14	0.15	0.16	0.13	0.16
32	0.15	0.15	0.16	0.13	0.16
33	0.15	0.16	0.17	0.13	0.17
34	0.16	0.16	0.18	0.15	0.19
35	0.16	0.17	0.18	0.15	0.19
36	0.17	0.18	0.19	0.15	0.20
37	0.17	0.18	0.20	0.15	0.20
38	0.18	0.18	0.20	0.16	0.21
39	0.19	0.20	0.22	0.18	0.24
40	0.19	0.20	0.22	0.18	0.25
41	0.21	0.21	0.24	0.20	0.27
42	0.21	0.22	0.25	0.21	0.28
43	0.22	0.23	0.26	0.21	0.29

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

**Appendix 2a: Guaranteed Monthly Expense Charge per
Thousand of Initial Additional Protection Benefit Rider**

Face Amount
Band 1
ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Guaranteed Basis: The monthly expense charge is deducted in all policy years.

Issue Age	Unisex				
	ENT	PNT	SNT	PT	ST
44	0.25	0.26	0.30	0.24	0.34
45	0.26	0.27	0.30	0.25	0.34
46	0.28	0.29	0.33	0.27	0.37
47	0.28	0.29	0.34	0.28	0.39
48	0.29	0.31	0.35	0.30	0.42
49	0.33	0.34	0.39	0.33	0.46
50	0.34	0.35	0.41	0.35	0.48
51	0.37	0.38	0.44	0.39	0.53
52	0.37	0.39	0.45	0.40	0.55
53	0.39	0.41	0.48	0.42	0.59
54	0.43	0.45	0.52	0.48	0.65
55	0.45	0.47	0.54	0.50	0.68
56	0.49	0.51	0.59	0.56	0.75
57	0.51	0.53	0.61	0.60	0.80
58	0.56	0.58	0.67	0.68	0.89
59	0.64	0.66	0.75	0.80	1.02
60	0.70	0.74	0.84	0.95	1.21
61	0.77	0.81	0.93	1.09	1.41
62	0.82	0.86	0.98	1.15	1.49
63	0.90	0.95	1.08	1.26	1.63
64	1.04	1.09	1.22	1.41	1.80
65	1.20	1.25	1.39	1.54	1.93
66	1.36	1.41	1.56	1.66	2.06
67	1.39	1.45	1.60	1.71	2.11
68	1.44	1.49	1.66	1.78	2.19
69	1.47	1.53	1.70	1.87	2.29
70	1.47	1.52	1.73	1.99	2.46
71	1.47	1.53	1.74	2.05	2.54
72	1.47	1.53	1.76	2.11	2.65
73	1.45	1.52	1.75	2.11	2.64
74	1.45	1.52	1.77	2.16	2.71
75	1.45	1.53	1.79	2.20	2.78
76		1.54	1.82	2.27	2.87
77		1.55	1.84	2.33	2.96
78		1.56	1.88	2.40	3.06
79		1.58	1.91	2.46	3.15
80		1.59	1.94	2.53	3.25
81		1.63	2.00	2.63	3.41
82		1.67	2.08	2.73	3.56
83		1.77	2.22	2.93	3.88
84		1.91	2.43	3.21	4.33
85		2.15	2.77	3.70	5.13

**Appendix 2a: Guaranteed Monthly Expense Charge per
Thousand of Initial Additional Protection Benefit Rider**

Face Amount
Band 2
ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Guaranteed Basis: The monthly expense charge is deducted in all policy years.

Issue Age	Unisex				
	ENT	PNT	SNT	PT	ST
44	0.24	0.25	0.29	0.24	0.33
45	0.25	0.26	0.29	0.24	0.33
46	0.27	0.28	0.32	0.26	0.36
47	0.27	0.28	0.33	0.27	0.38
48	0.28	0.30	0.35	0.29	0.41
49	0.32	0.33	0.38	0.33	0.45
50	0.33	0.34	0.40	0.34	0.47
51	0.36	0.38	0.43	0.38	0.52
52	0.37	0.38	0.45	0.39	0.54
53	0.39	0.41	0.47	0.42	0.58
54	0.42	0.44	0.51	0.47	0.64
55	0.44	0.46	0.53	0.49	0.67
56	0.48	0.50	0.58	0.55	0.74
57	0.50	0.52	0.60	0.59	0.79
58	0.55	0.57	0.66	0.67	0.88
59	0.63	0.66	0.74	0.79	1.00
60	0.70	0.73	0.83	0.94	1.20
61	0.76	0.80	0.92	1.08	1.39
62	0.81	0.85	0.97	1.14	1.48
63	0.90	0.94	1.07	1.25	1.61
64	1.03	1.08	1.21	1.40	1.79
65	1.19	1.24	1.38	1.53	1.92
66	1.35	1.40	1.54	1.65	2.05
67	1.38	1.44	1.59	1.70	2.10
68	1.43	1.49	1.64	1.77	2.17
69	1.46	1.52	1.69	1.86	2.27
70	1.46	1.52	1.72	1.98	2.44
71	1.46	1.52	1.73	2.03	2.53
72	1.46	1.53	1.75	2.10	2.64
73	1.44	1.51	1.74	2.10	2.63
74	1.44	1.51	1.76	2.15	2.70
75	1.44	1.52	1.78	2.19	2.76
76		1.53	1.81	2.26	2.86
77		1.54	1.83	2.32	2.94
78		1.55	1.86	2.39	3.04
79		1.57	1.90	2.45	3.13
80		1.58	1.93	2.51	3.24
81		1.62	1.99	2.61	3.39
82		1.66	2.06	2.72	3.54
83		1.76	2.21	2.92	3.86
84		1.90	2.42	3.19	4.31
85		2.13	2.76	3.69	5.10

**Appendix 2a: Guaranteed Monthly Expense Charge per
Thousand of Initial Additional Protection Benefit Rider**

Face Amount
Band 3
ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Guaranteed Basis: The monthly expense charge is deducted in all policy years.

Issue Age	Unisex				
	ENT	PNT	SNT	PT	ST
44	0.23	0.24	0.28	0.23	0.32
45	0.24	0.25	0.28	0.23	0.32
46	0.25	0.27	0.31	0.25	0.35
47	0.26	0.27	0.32	0.26	0.37
48	0.27	0.29	0.33	0.28	0.39
49	0.31	0.32	0.37	0.31	0.44
50	0.32	0.33	0.38	0.33	0.46
51	0.34	0.36	0.42	0.37	0.51
52	0.35	0.37	0.43	0.38	0.53
53	0.37	0.39	0.46	0.40	0.56
54	0.41	0.43	0.50	0.46	0.62
55	0.43	0.45	0.52	0.48	0.65
56	0.46	0.48	0.56	0.53	0.71
57	0.48	0.50	0.58	0.57	0.76
58	0.53	0.55	0.64	0.65	0.85
59	0.61	0.63	0.72	0.77	0.97
60	0.67	0.71	0.80	0.91	1.16
61	0.74	0.78	0.89	1.05	1.35
62	0.78	0.83	0.94	1.11	1.44
63	0.87	0.91	1.04	1.22	1.57
64	1.00	1.05	1.18	1.37	1.74
65	1.15	1.20	1.34	1.49	1.87
66	1.30	1.35	1.49	1.59	1.97
67	1.33	1.39	1.53	1.64	2.02
68	1.38	1.43	1.58	1.71	2.10
69	1.40	1.46	1.62	1.79	2.19
70	1.41	1.46	1.65	1.91	2.36
71	1.41	1.46	1.67	1.96	2.44
72	1.41	1.47	1.69	2.03	2.54
73	1.39	1.45	1.68	2.03	2.53
74	1.39	1.46	1.69	2.07	2.60
75	1.39	1.46	1.71	2.11	2.67
76		1.46	1.73	2.15	2.73
77		1.47	1.75	2.21	2.81
78		1.48	1.78	2.28	2.91
79		1.49	1.81	2.34	3.00
80		1.51	1.84	2.40	3.09
81		1.54	1.90	2.50	3.24
82		1.59	1.97	2.60	3.38
83		1.68	2.11	2.79	3.69
84		1.81	2.31	3.05	4.12
85		2.04	2.63	3.52	4.88

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

Appendix 3: Guaranteed Ultimate
Monthly Cost Of Insurance Rates Per Thousand
Additional Protection Benefit Rider Coverage

ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

There is no select period for APB.

Attained Age	Unisex				
	ENT	PNT	SNT	PT	ST
0			0.07		
1			0.04		
2			0.03		
3			0.02		
4			0.02		
5			0.02		
6			0.02		
7			0.02		
8			0.02		
9			0.02		
10			0.02		
11			0.02		
12			0.03		
13			0.03		
14			0.04		
15			0.05		
16			0.06		
17			0.06		
18			0.07		
19			0.07		
20	0.07	0.07	0.07	0.09	0.09
21	0.07	0.07	0.07	0.10	0.10
22	0.07	0.07	0.07	0.10	0.10
23	0.07	0.07	0.07	0.11	0.11
24	0.07	0.07	0.07	0.12	0.12
25	0.07	0.07	0.07	0.12	0.12
26	0.08	0.08	0.08	0.13	0.13
27	0.08	0.08	0.08	0.14	0.14
28	0.08	0.08	0.08	0.14	0.14
29	0.08	0.08	0.08	0.14	0.14
30	0.08	0.08	0.08	0.14	0.14
31	0.08	0.08	0.08	0.14	0.14
32	0.08	0.08	0.08	0.14	0.14
33	0.08	0.08	0.08	0.15	0.15
34	0.08	0.08	0.08	0.15	0.15
35	0.09	0.09	0.09	0.16	0.16
36	0.09	0.09	0.09	0.17	0.17
37	0.10	0.10	0.10	0.18	0.18
38	0.10	0.10	0.10	0.19	0.19
39	0.11	0.11	0.11	0.21	0.21
40	0.12	0.12	0.12	0.22	0.22
41	0.13	0.13	0.13	0.24	0.24
42	0.14	0.14	0.14	0.26	0.26
43	0.15	0.15	0.15	0.29	0.29

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
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Appendix 3: Guaranteed Ultimate
Monthly Cost Of Insurance Rates Per Thousand
Additional Protection Benefit Rider Coverage

ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

There is no select period for APB.

Attained Age	Unisex				
	ENT	PNT	SNT	PT	ST
44	0.17	0.17	0.17	0.32	0.32
45	0.18	0.18	0.18	0.36	0.36
46	0.20	0.20	0.20	0.39	0.39
47	0.22	0.22	0.22	0.43	0.43
48	0.23	0.23	0.23	0.45	0.45
49	0.25	0.25	0.25	0.48	0.48
50	0.27	0.27	0.27	0.52	0.52
51	0.29	0.29	0.29	0.57	0.57
52	0.32	0.32	0.32	0.63	0.63
53	0.36	0.36	0.36	0.69	0.69
54	0.40	0.40	0.40	0.77	0.77
55	0.45	0.45	0.45	0.86	0.86
56	0.50	0.50	0.50	0.95	0.95
57	0.55	0.55	0.55	1.05	1.05
58	0.60	0.60	0.60	1.13	1.13
59	0.66	0.66	0.66	1.22	1.22
60	0.72	0.72	0.72	1.33	1.33

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
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Appendix 3: Guaranteed Ultimate
Monthly Cost Of Insurance Rates Per Thousand
Additional Protection Benefit Rider Coverage

ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

There is no select period for APB.

Attained Age	Unisex				
	ENT	PNT	SNT	PT	ST
61	0.80	0.80	0.80	1.46	1.46
62	0.89	0.89	0.89	1.62	1.62
63	1.00	1.00	1.00	1.79	1.79
64	1.11	1.11	1.11	1.96	1.96
65	1.22	1.22	1.22	2.14	2.14
66	1.34	1.34	1.34	2.31	2.31
67	1.47	1.47	1.47	2.49	2.49
68	1.60	1.60	1.60	2.67	2.67
69	1.74	1.74	1.74	2.85	2.85
70	1.91	1.91	1.91	3.07	3.07
71	2.09	2.09	2.09	3.32	3.32
72	2.33	2.33	2.33	3.64	3.64
73	2.59	2.59	2.59	3.97	3.97
74	2.86	2.86	2.86	4.31	4.31
75	3.16	3.16	3.16	4.69	4.69
76	3.48	3.48	3.48	5.10	5.10
77	3.86	3.86	3.86	5.58	5.58
78	4.30	4.30	4.30	6.12	6.12
79	4.80	4.80	4.80	6.73	6.73
80	5.34	5.34	5.34	7.40	7.40
81	5.99	5.99	5.99	8.17	8.17
82	6.67	6.67	6.67	8.97	8.97
83	7.40	7.40	7.40	9.81	9.81
84	8.21	8.21	8.21	10.72	10.72
85	9.12	9.12	9.12	11.77	11.77
86	10.09	10.09	10.09	12.87	12.87
87	11.23	11.23	11.23	14.15	14.15
88	12.45	12.45	12.45	15.49	15.49
89	13.75	13.75	13.75	16.87	16.87
90	15.07	15.07	15.07	18.21	18.21
91	16.14	16.14	16.14	19.18	19.18
92	17.38	17.38	17.38	20.33	20.33
93	18.86	18.86	18.86	21.66	21.66
94	20.57	20.57	20.57	23.18	23.18
95	22.60	22.60	22.60	25.23	25.23
96	24.55	24.55	24.55	27.14	27.14
97	26.70	26.70	26.70	29.20	29.20
98	27.89	27.89	27.89	30.13	30.13
99	29.60	29.60	29.60	31.60	31.60
100	31.85	31.85	31.85	33.63	33.63
101	34.04	34.04	34.04	35.54	35.54
102	36.60	36.60	36.60	37.78	37.78
103	39.60	39.60	39.60	40.34	40.34
104	43.12	43.12	43.12	43.30	43.30

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

Appendix 3: Guaranteed Ultimate
Monthly Cost Of Insurance Rates Per Thousand
Additional Protection Benefit Rider Coverage

ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

There is no select period for APB.

Attained Age	Unisex				
	ENT	PNT	SNT	PT	ST
105	47.21	47.21	47.21	47.37	47.37
106	51.76	51.76	51.76	51.91	51.91
107	56.83	56.83	56.83	56.97	56.97
108	62.39	62.39	62.39	62.52	62.52
109	68.68	68.68	68.68	68.81	68.81
110	75.75	75.75	75.75	75.87	75.87
111	83.35	83.35	83.35	83.47	83.47
112	91.63	91.63	91.63	91.75	91.75
113	100.29	100.29	100.29	100.40	100.40
114	113.26	113.26	113.26	113.37	113.37
115	127.84	127.84	127.84	127.95	127.95
116	146.20	146.20	146.20	146.31	146.31
117	171.80	171.80	171.80	171.91	171.91
118	205.60	205.60	205.60	205.72	205.72
119	260.87	260.87	260.87	261.09	261.09
120	260.87	260.87	260.87	261.09	261.09

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

Appendix 4: Current Select Monthly Cost of Insurance Rates per Thousand Additional Protection Benefit Rider Coverage

Issue Age	Unisex, Elite Non-tobacco																			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
20	0.04	0.04	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.07	0.08
21	0.04	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.07	0.09
22	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.07	0.08
23	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.07	0.07	0.08
24	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.07	0.07	0.08
25	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.07	0.07	0.09
26	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.06	0.06	0.06	0.06	0.07	0.08	0.10
27	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.06	0.08	0.09	0.11
28	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.06	0.07	0.07	0.07	0.09	0.10	0.11
29	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.06	0.07	0.07	0.08	0.08	0.09	0.10	0.12
30	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.07	0.07	0.08	0.08	0.08	0.08	0.10	0.11	0.13
31	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.07	0.07	0.08	0.08	0.08	0.09	0.09	0.11	0.12	0.14
32	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.06	0.07	0.07	0.08	0.08	0.08	0.09	0.09	0.11	0.13	0.16
33	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.07	0.08	0.08	0.08	0.09	0.09	0.09	0.10	0.10	0.12	0.15	0.18
34	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.07	0.08	0.08	0.08	0.09	0.09	0.10	0.11	0.11	0.12	0.14	0.17	0.20
35	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.07	0.08	0.08	0.09	0.09	0.10	0.11	0.11	0.12	0.13	0.16	0.18	0.22
36	0.05	0.05	0.05	0.06	0.06	0.07	0.08	0.08	0.09	0.10	0.10	0.11	0.11	0.12	0.13	0.13	0.14	0.17	0.20	0.25
37	0.05	0.05	0.06	0.06	0.07	0.07	0.08	0.09	0.09	0.10	0.10	0.11	0.12	0.13	0.14	0.15	0.16	0.20	0.23	0.28
38	0.05	0.06	0.06	0.07	0.07	0.08	0.09	0.09	0.10	0.11	0.11	0.13	0.13	0.14	0.15	0.16	0.17	0.21	0.26	0.31
39	0.06	0.06	0.06	0.07	0.08	0.08	0.09	0.10	0.10	0.11	0.12	0.13	0.14	0.15	0.16	0.17	0.19	0.23	0.28	0.34
40	0.06	0.06	0.07	0.08	0.08	0.09	0.10	0.10	0.11	0.12	0.13	0.14	0.15	0.16	0.17	0.19	0.20	0.25	0.31	0.37
41	0.06	0.07	0.08	0.08	0.09	0.10	0.10	0.11	0.12	0.12	0.14	0.15	0.17	0.18	0.19	0.20	0.22	0.27	0.34	0.41
42	0.07	0.07	0.08	0.09	0.09	0.10	0.11	0.12	0.12	0.14	0.15	0.16	0.17	0.19	0.21	0.23	0.25	0.31	0.37	0.44
43	0.07	0.08	0.09	0.09	0.10	0.11	0.11	0.12	0.13	0.15	0.16	0.17	0.20	0.22	0.24	0.26	0.28	0.34	0.42	0.51
44	0.08	0.08	0.09	0.10	0.11	0.11	0.12	0.13	0.14	0.16	0.17	0.19	0.22	0.24	0.26	0.29	0.31	0.38	0.47	0.56
45	0.08	0.09	0.10	0.11	0.11	0.12	0.13	0.14	0.16	0.17	0.19	0.22	0.24	0.27	0.29	0.31	0.34	0.43	0.52	0.62
46	0.09	0.10	0.11	0.11	0.12	0.13	0.14	0.15	0.17	0.19	0.21	0.24	0.27	0.30	0.32	0.35	0.38	0.47	0.58	0.69
47	0.10	0.10	0.11	0.12	0.12	0.14	0.15	0.17	0.19	0.20	0.23	0.27	0.30	0.33	0.36	0.39	0.42	0.53	0.64	0.77
48	0.10	0.11	0.12	0.12	0.14	0.15	0.17	0.19	0.20	0.22	0.26	0.29	0.33	0.36	0.39	0.43	0.46	0.58	0.70	0.84
49	0.11	0.11	0.12	0.14	0.15	0.17	0.18	0.20	0.22	0.24	0.28	0.32	0.35	0.39	0.43	0.46	0.50	0.63	0.76	0.92
50	0.11	0.12	0.14	0.15	0.16	0.18	0.20	0.22	0.23	0.26	0.30	0.34	0.37	0.42	0.46	0.50	0.54	0.68	0.83	1.00
51	0.12	0.13	0.14	0.16	0.17	0.19	0.21	0.23	0.25	0.28	0.32	0.36	0.41	0.46	0.50	0.54	0.59	0.74	0.91	1.10
52	0.13	0.14	0.15	0.17	0.19	0.20	0.22	0.25	0.27	0.30	0.35	0.39	0.45	0.49	0.54	0.60	0.65	0.81	0.99	1.19
53	0.14	0.15	0.17	0.19	0.20	0.22	0.24	0.26	0.29	0.33	0.37	0.43	0.49	0.54	0.60	0.66	0.71	0.89	1.10	1.32
54	0.15	0.17	0.18	0.20	0.21	0.23	0.26	0.29	0.32	0.36	0.42	0.48	0.54	0.60	0.67	0.72	0.79	0.99	1.22	1.46
55	0.16	0.17	0.19	0.21	0.23	0.25	0.28	0.31	0.34	0.39	0.45	0.52	0.59	0.66	0.73	0.80	0.87	1.09	1.33	1.62
56	0.17	0.19	0.20	0.22	0.25	0.27	0.31	0.34	0.37	0.42	0.48	0.57	0.64	0.72	0.80	0.87	0.95	1.20	1.47	1.78
57	0.18	0.20	0.22	0.23	0.26	0.29	0.33	0.36	0.40	0.44	0.53	0.61	0.70	0.78	0.87	0.96	1.05	1.33	1.63	1.96
58	0.19	0.20	0.23	0.25	0.28	0.31	0.35	0.39	0.42	0.46	0.56	0.66	0.75	0.86	0.95	1.06	1.15	1.46	1.80	2.18
59	0.20	0.22	0.24	0.27	0.30	0.33	0.37	0.40	0.44	0.48	0.59	0.71	0.82	0.93	1.05	1.16	1.28	1.63	2.01	2.44
60	0.21	0.23	0.26	0.29	0.32	0.36	0.39	0.42	0.46	0.50	0.63	0.76	0.90	1.03	1.16	1.29	1.42	1.81	2.25	2.73

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

Appendix 4: Current Select Monthly Cost of Insurance Rates per Thousand Additional Protection Benefit Rider Coverage

Issue Age	Unisex, Elite Non-tobacco																			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
61	0.22	0.25	0.28	0.31	0.34	0.37	0.40	0.44	0.48	0.53	0.67	0.82	0.97	1.12	1.27	1.42	1.58	2.01	2.50	3.05
62	0.24	0.27	0.30	0.33	0.36	0.39	0.42	0.46	0.50	0.55	0.72	0.90	1.07	1.24	1.41	1.58	1.75	2.24	2.78	3.40
63	0.26	0.28	0.31	0.34	0.37	0.40	0.44	0.48	0.53	0.59	0.78	0.96	1.16	1.35	1.55	1.74	1.93	2.47	3.08	3.76
64	0.27	0.30	0.33	0.36	0.39	0.42	0.45	0.50	0.56	0.62	0.84	1.05	1.26	1.47	1.68	1.90	2.12	2.72	3.39	4.13
65	0.28	0.31	0.34	0.37	0.40	0.43	0.48	0.53	0.59	0.65	0.89	1.13	1.37	1.62	1.86	2.09	2.34	3.01	3.76	4.59
66	0.29	0.32	0.35	0.38	0.41	0.45	0.51	0.56	0.62	0.67	0.95	1.22	1.50	1.77	2.05	2.32	2.60	3.35	4.19	5.13
67	0.30	0.33	0.36	0.39	0.42	0.48	0.52	0.58	0.64	0.70	1.02	1.34	1.65	1.96	2.28	2.60	2.91	3.76	4.72	5.78
68	0.31	0.34	0.37	0.40	0.45	0.50	0.55	0.61	0.66	0.74	1.09	1.45	1.81	2.17	2.53	2.89	3.25	4.21	5.29	6.49
69	0.31	0.34	0.38	0.42	0.47	0.51	0.56	0.62	0.69	0.76	1.16	1.57	1.98	2.38	2.79	3.20	3.61	4.68	5.90	7.24
70	0.32	0.36	0.39	0.44	0.48	0.53	0.58	0.64	0.72	0.80	1.25	1.70	2.15	2.61	3.06	3.52	3.97	5.16	6.50	8.00
71	0.36	0.39	0.44	0.48	0.53	0.58	0.64	0.72	0.80	0.89	1.38	1.88	2.37	2.86	3.36	3.85	4.35	5.65	7.12	8.75
72	0.39	0.44	0.48	0.53	0.58	0.64	0.72	0.80	0.89	0.99	1.53	2.07	2.61	3.16	3.70	4.24	4.78	6.22	7.83	9.62
73	0.44	0.48	0.53	0.58	0.64	0.72	0.80	0.89	0.99	1.10	1.70	2.29	2.88	3.48	4.08	4.67	5.28	6.84	8.62	10.60
74	0.48	0.53	0.58	0.64	0.72	0.80	0.89	0.99	1.10	1.22	1.89	2.58	3.26	3.95	4.63	5.32	6.00	7.79	9.82	12.08
75	0.53	0.58	0.64	0.72	0.80	0.89	0.99	1.10	1.22	1.34	2.12	2.91	3.68	4.47	5.25	6.02	6.81	8.86	11.16	13.73

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

Appendix 4: Current Select Monthly Cost of Insurance Rates per Thousand Additional Protection Benefit Rider Coverage

Issue Age	Unisex, Preferred Non-tobacco																			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
20	0.04	0.04	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.07	0.08
21	0.04	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.07	0.09
22	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.07	0.08
23	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.07	0.08
24	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.07	0.07	0.08
25	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.07	0.07	0.09
26	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.06	0.06	0.06	0.06	0.07	0.08	0.10
27	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.06	0.08	0.09	0.11
28	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.06	0.06	0.07	0.07	0.09	0.10	0.11
29	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.06	0.07	0.07	0.07	0.08	0.08	0.10	0.12
30	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.07	0.07	0.08	0.08	0.08	0.08	0.09	0.11	0.13
31	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.07	0.07	0.08	0.08	0.08	0.08	0.09	0.09	0.11	0.12	0.14
32	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.07	0.07	0.08	0.08	0.08	0.09	0.09	0.09	0.11	0.13	0.16
33	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.07	0.08	0.08	0.08	0.09	0.09	0.10	0.10	0.10	0.12	0.15	0.18
34	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.07	0.08	0.08	0.08	0.09	0.09	0.10	0.11	0.11	0.12	0.14	0.17	0.20
35	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.07	0.08	0.08	0.09	0.09	0.10	0.11	0.11	0.12	0.12	0.13	0.16	0.22
36	0.05	0.05	0.05	0.06	0.06	0.06	0.07	0.08	0.08	0.09	0.10	0.10	0.11	0.11	0.12	0.12	0.13	0.14	0.17	0.25
37	0.05	0.05	0.06	0.06	0.07	0.07	0.08	0.09	0.09	0.10	0.10	0.11	0.12	0.13	0.14	0.15	0.16	0.20	0.23	0.28
38	0.05	0.06	0.06	0.07	0.07	0.08	0.09	0.09	0.10	0.11	0.11	0.13	0.13	0.14	0.15	0.16	0.17	0.21	0.26	0.31
39	0.06	0.06	0.06	0.07	0.08	0.08	0.09	0.10	0.10	0.11	0.12	0.13	0.14	0.15	0.16	0.17	0.19	0.23	0.28	0.34
40	0.06	0.06	0.07	0.08	0.08	0.09	0.10	0.10	0.11	0.12	0.13	0.14	0.15	0.16	0.17	0.19	0.20	0.25	0.31	0.37
41	0.06	0.07	0.08	0.08	0.09	0.10	0.10	0.11	0.12	0.12	0.14	0.15	0.17	0.18	0.19	0.20	0.22	0.27	0.34	0.41
42	0.07	0.07	0.08	0.09	0.09	0.10	0.11	0.12	0.12	0.14	0.15	0.16	0.17	0.19	0.21	0.23	0.25	0.31	0.37	0.44
43	0.07	0.08	0.09	0.09	0.10	0.11	0.11	0.12	0.13	0.15	0.16	0.17	0.20	0.22	0.24	0.26	0.28	0.34	0.42	0.51
44	0.08	0.08	0.09	0.10	0.11	0.11	0.12	0.13	0.14	0.16	0.17	0.19	0.22	0.24	0.26	0.29	0.31	0.38	0.47	0.56
45	0.08	0.09	0.10	0.11	0.11	0.12	0.13	0.14	0.16	0.17	0.19	0.22	0.24	0.27	0.29	0.31	0.34	0.43	0.52	0.62
46	0.09	0.10	0.11	0.11	0.12	0.13	0.14	0.15	0.17	0.19	0.21	0.24	0.27	0.30	0.32	0.35	0.38	0.47	0.58	0.69
47	0.10	0.10	0.11	0.12	0.12	0.14	0.15	0.17	0.19	0.20	0.23	0.27	0.30	0.33	0.36	0.39	0.42	0.53	0.64	0.77
48	0.10	0.11	0.12	0.12	0.14	0.15	0.17	0.19	0.20	0.22	0.26	0.29	0.33	0.36	0.39	0.43	0.46	0.58	0.70	0.84
49	0.11	0.11	0.12	0.14	0.15	0.17	0.18	0.20	0.22	0.24	0.28	0.32	0.35	0.39	0.43	0.46	0.50	0.63	0.76	0.92
50	0.11	0.12	0.14	0.15	0.16	0.18	0.20	0.22	0.23	0.26	0.30	0.34	0.37	0.42	0.46	0.50	0.54	0.68	0.83	1.00
51	0.12	0.13	0.14	0.16	0.17	0.19	0.21	0.23	0.25	0.28	0.32	0.36	0.41	0.46	0.50	0.54	0.59	0.74	0.91	1.10
52	0.13	0.14	0.15	0.17	0.19	0.20	0.22	0.25	0.27	0.30	0.35	0.39	0.45	0.49	0.54	0.60	0.65	0.81	0.99	1.19
53	0.14	0.15	0.17	0.19	0.20	0.22	0.24	0.26	0.29	0.33	0.37	0.43	0.49	0.54	0.60	0.66	0.71	0.89	1.10	1.32
54	0.15	0.17	0.18	0.20	0.21	0.23	0.26	0.29	0.32	0.36	0.42	0.48	0.54	0.60	0.67	0.72	0.79	0.99	1.22	1.46
55	0.16	0.17	0.19	0.21	0.23	0.25	0.28	0.31	0.34	0.39	0.45	0.52	0.59	0.66	0.73	0.80	0.87	1.09	1.33	1.62
56	0.17	0.19	0.20	0.22	0.25	0.27	0.31	0.34	0.37	0.42	0.48	0.57	0.64	0.72	0.80	0.87	0.95	1.20	1.47	1.78
57	0.18	0.20	0.22	0.23	0.26	0.29	0.33	0.36	0.40	0.44	0.53	0.61	0.70	0.78	0.87	0.96	1.05	1.33	1.63	1.96
58	0.19	0.20	0.23	0.25	0.28	0.31	0.35	0.39	0.42	0.46	0.56	0.66	0.75	0.86	0.95	1.06	1.15	1.46	1.80	2.18
59	0.20	0.22	0.24	0.27	0.30	0.33	0.37	0.40	0.44	0.48	0.59	0.71	0.82	0.93	1.05	1.16	1.28	1.63	2.01	2.44
60	0.21	0.23	0.26	0.29	0.32	0.36	0.39	0.42	0.46	0.50	0.63	0.76	0.90	1.03	1.16	1.29	1.42	1.81	2.25	2.73

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

Appendix 4: Current Select Monthly Cost of Insurance Rates per Thousand Additional Protection Benefit Rider Coverage

Issue Age	Unisex, Preferred Non-tobacco																			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
61	0.22	0.25	0.28	0.31	0.34	0.37	0.40	0.44	0.48	0.53	0.67	0.82	0.97	1.12	1.27	1.42	1.58	2.01	2.50	3.05
62	0.24	0.27	0.30	0.33	0.36	0.39	0.42	0.46	0.50	0.55	0.72	0.90	1.07	1.24	1.41	1.58	1.75	2.24	2.78	3.40
63	0.26	0.28	0.31	0.34	0.37	0.40	0.44	0.48	0.53	0.59	0.78	0.96	1.16	1.35	1.55	1.74	1.93	2.47	3.08	3.76
64	0.27	0.30	0.33	0.36	0.39	0.42	0.45	0.50	0.56	0.62	0.84	1.05	1.26	1.47	1.68	1.90	2.12	2.72	3.39	4.13
65	0.28	0.31	0.34	0.37	0.40	0.43	0.48	0.53	0.59	0.65	0.89	1.13	1.37	1.62	1.86	2.09	2.34	3.01	3.76	4.59
66	0.29	0.32	0.35	0.38	0.41	0.45	0.51	0.56	0.62	0.67	0.95	1.22	1.50	1.77	2.05	2.32	2.60	3.35	4.19	5.13
67	0.30	0.33	0.36	0.39	0.42	0.48	0.52	0.58	0.64	0.70	1.02	1.34	1.65	1.96	2.28	2.60	2.91	3.76	4.72	5.78
68	0.31	0.34	0.37	0.40	0.45	0.50	0.55	0.61	0.66	0.74	1.09	1.45	1.81	2.17	2.53	2.89	3.25	4.21	5.29	6.49
69	0.31	0.34	0.38	0.42	0.47	0.51	0.56	0.62	0.69	0.76	1.16	1.57	1.98	2.38	2.79	3.20	3.61	4.68	5.90	7.24
70	0.32	0.36	0.39	0.44	0.48	0.53	0.58	0.64	0.72	0.80	1.25	1.70	2.15	2.61	3.06	3.52	3.97	5.16	6.50	8.00
71	0.36	0.39	0.44	0.48	0.53	0.58	0.64	0.72	0.80	0.89	1.38	1.88	2.37	2.86	3.36	3.85	4.35	5.65	7.12	8.75
72	0.39	0.44	0.48	0.53	0.58	0.64	0.72	0.80	0.89	0.99	1.53	2.07	2.61	3.16	3.70	4.24	4.78	6.22	7.83	9.62
73	0.44	0.48	0.53	0.58	0.64	0.72	0.80	0.89	0.99	1.10	1.70	2.29	2.88	3.48	4.08	4.67	5.28	6.84	8.62	10.60
74	0.48	0.53	0.58	0.64	0.72	0.80	0.89	0.99	1.10	1.22	1.89	2.58	3.26	3.95	4.63	5.32	6.00	7.79	9.82	12.08
75	0.53	0.58	0.64	0.72	0.80	0.89	0.99	1.10	1.22	1.34	2.12	2.91	3.68	4.47	5.25	6.02	6.81	8.86	11.16	13.73
76	0.58	0.64	0.72	0.80	0.89	0.99	1.10	1.22	1.34	1.48	2.36	3.24	4.12	5.00	5.88	6.76	7.63	9.93	12.52	15.40
77	0.64	0.72	0.80	0.89	0.99	1.10	1.22	1.34	1.48	1.64	2.61	3.58	4.55	5.52	6.49	7.46	8.40	10.94	13.82	17.01
78	0.72	0.80	0.89	0.99	1.10	1.22	1.34	1.48	1.64	1.82	2.85	3.87	4.90	5.92	6.95	7.97	8.98	11.70	14.74	18.12
79	0.80	0.89	0.99	1.10	1.22	1.34	1.48	1.64	1.82	2.01	3.06	4.11	5.16	6.21	7.27	8.31	9.36	12.15	15.29	18.78
80	0.89	0.99	1.10	1.22	1.34	1.48	1.64	1.82	2.01	2.21	3.29	4.38	5.47	6.55	7.64	8.73	9.82	12.72	15.99	19.62
81	0.99	1.10	1.22	1.34	1.48	1.64	1.82	2.01	2.21	2.42	3.48	4.55	5.61	6.68	7.74	8.81	9.88	12.77	16.01	19.62
82	1.10	1.22	1.34	1.48	1.64	1.82	2.01	2.21	2.42	2.60	3.64	4.69	5.74	6.79	7.84	8.88	9.93	12.81	16.04	19.62
83	1.22	1.34	1.48	1.64	1.82	2.01	2.21	2.42	2.60	2.80	3.83	4.85	5.88	6.91	7.94	8.97	10.00	12.86	16.06	19.62
84	1.34	1.48	1.64	1.82	2.01	2.21	2.42	2.60	2.80	3.02	4.03	5.03	6.04	7.05	8.05	9.05	10.06	12.91	16.10	19.62
85	1.48	1.64	1.82	2.01	2.21	2.42	2.60	2.80	3.02	3.27	4.25	5.22	6.21	7.19	8.17	9.15	10.13	12.97	16.13	19.62

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

Appendix 4: Current Select Monthly Cost of Insurance Rates per Thousand Additional Protection Benefit Rider Coverage

Issue Age	Unisex, Standard Non-tobacco																			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
0	0.05	0.03	0.02	0.02	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.02	0.02	0.02	0.02	0.03	0.03	0.04	0.04	0.06
1	0.03	0.02	0.02	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.02	0.02	0.02	0.03	0.03	0.03	0.04	0.04	0.06
2	0.02	0.02	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.02	0.02	0.02	0.03	0.03	0.03	0.03	0.04	0.04	0.06
3	0.02	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.02	0.02	0.02	0.02	0.02	0.03	0.03	0.03	0.03	0.04	0.04	0.06
4	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.02	0.02	0.02	0.02	0.02	0.03	0.03	0.03	0.03	0.03	0.04	0.04	0.06
5	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.02	0.02	0.02	0.02	0.02	0.03	0.03	0.03	0.03	0.03	0.04	0.04	0.06
6	0.01	0.01	0.01	0.01	0.01	0.02	0.02	0.02	0.02	0.03	0.03	0.03	0.03	0.03	0.04	0.04	0.04	0.04	0.04	0.06
7	0.01	0.01	0.01	0.01	0.02	0.02	0.02	0.02	0.03	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.05	0.05	0.06
8	0.01	0.01	0.01	0.02	0.02	0.02	0.02	0.03	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.05	0.05	0.06
9	0.01	0.01	0.02	0.02	0.02	0.02	0.03	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.05	0.05	0.07
10	0.01	0.02	0.02	0.02	0.02	0.03	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.05	0.05	0.07
11	0.02	0.02	0.02	0.02	0.03	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.05	0.05	0.07
12	0.02	0.02	0.02	0.03	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.04	0.05	0.05	0.07
13	0.02	0.02	0.03	0.04	0.04	0.04	0.04	0.04	0.04	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.07
14	0.02	0.03	0.04	0.04	0.04	0.04	0.04	0.04	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.07
15	0.03	0.04	0.04	0.04	0.04	0.04	0.04	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.07
16	0.04	0.04	0.04	0.04	0.04	0.04	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.08
17	0.04	0.04	0.04	0.04	0.04	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.08
18	0.04	0.04	0.04	0.04	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.07	0.08
19	0.04	0.04	0.04	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.07	0.08
20	0.04	0.04	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.07	0.08
21	0.04	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.07	0.09
22	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.07	0.08
23	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.07	0.07	0.08
24	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.07	0.07	0.08
25	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.07	0.07	0.09
26	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.06	0.06	0.06	0.06	0.07	0.08	0.10
27	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.06	0.06	0.08	0.09	0.11
28	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.06	0.07	0.07	0.07	0.09	0.10	0.11
29	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.06	0.07	0.07	0.08	0.08	0.09	0.10	0.12
30	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.07	0.07	0.08	0.08	0.08	0.08	0.10	0.11	0.13
31	0.05	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.07	0.07	0.08	0.08	0.08	0.09	0.09	0.09	0.11	0.12	0.14
32	0.05	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.07	0.07	0.08	0.08	0.08	0.09	0.09	0.09	0.11	0.13	0.16
33	0.05	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.07	0.08	0.08	0.08	0.09	0.09	0.10	0.10	0.10	0.12	0.15	0.18
34	0.05	0.05	0.05	0.06	0.06	0.06	0.06	0.07	0.08	0.08	0.08	0.09	0.09	0.10	0.11	0.11	0.12	0.14	0.17	0.20
35	0.05	0.05	0.05	0.06	0.06	0.06	0.07	0.08	0.08	0.09	0.09	0.10	0.11	0.11	0.12	0.12	0.13	0.16	0.18	0.22
36	0.05	0.05	0.05	0.06	0.06	0.07	0.08	0.08	0.09	0.10	0.10	0.11	0.11	0.12	0.13	0.13	0.14	0.17	0.20	0.25
37	0.05	0.05	0.06	0.06	0.07	0.07	0.08	0.09	0.09	0.10	0.10	0.11	0.12	0.13	0.14	0.15	0.16	0.20	0.23	0.28
38	0.05	0.06	0.06	0.07	0.07	0.08	0.09	0.09	0.10	0.11	0.11	0.13	0.13	0.14	0.15	0.16	0.17	0.21	0.26	0.31
39	0.06	0.06	0.06	0.07	0.08	0.08	0.09	0.10	0.10	0.11	0.12	0.13	0.14	0.15	0.16	0.17	0.19	0.23	0.28	0.34
40	0.06	0.06	0.07	0.08	0.08	0.09	0.10	0.10	0.11	0.12	0.13	0.14	0.15	0.16	0.17	0.19	0.20	0.25	0.31	0.37

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

Appendix 4: Current Select Monthly Cost of Insurance Rates per Thousand Additional Protection Benefit Rider Coverage

Issue Age	Unisex, Standard Non-tobacco																			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
41	0.06	0.07	0.08	0.08	0.09	0.10	0.10	0.11	0.12	0.12	0.14	0.15	0.17	0.18	0.19	0.20	0.22	0.27	0.34	0.41
42	0.07	0.07	0.08	0.09	0.09	0.10	0.11	0.12	0.12	0.14	0.15	0.16	0.17	0.19	0.21	0.23	0.25	0.31	0.37	0.44
43	0.07	0.08	0.09	0.09	0.10	0.11	0.11	0.12	0.13	0.15	0.16	0.17	0.20	0.22	0.24	0.26	0.28	0.34	0.42	0.51
44	0.08	0.08	0.09	0.10	0.11	0.11	0.12	0.13	0.14	0.16	0.17	0.19	0.22	0.24	0.26	0.29	0.31	0.38	0.47	0.56
45	0.08	0.09	0.10	0.11	0.11	0.12	0.13	0.14	0.16	0.17	0.19	0.22	0.24	0.27	0.29	0.31	0.34	0.43	0.52	0.62
46	0.09	0.10	0.11	0.11	0.12	0.13	0.14	0.15	0.17	0.19	0.21	0.24	0.27	0.30	0.32	0.35	0.38	0.47	0.58	0.69
47	0.10	0.10	0.11	0.12	0.12	0.14	0.15	0.17	0.19	0.20	0.23	0.27	0.30	0.33	0.36	0.39	0.42	0.53	0.64	0.77
48	0.10	0.11	0.12	0.12	0.14	0.15	0.17	0.19	0.20	0.22	0.26	0.29	0.33	0.36	0.39	0.43	0.46	0.58	0.70	0.84
49	0.11	0.11	0.12	0.14	0.15	0.17	0.18	0.20	0.22	0.24	0.28	0.32	0.35	0.39	0.43	0.46	0.50	0.63	0.76	0.92
50	0.11	0.12	0.14	0.15	0.16	0.18	0.20	0.22	0.23	0.26	0.30	0.34	0.37	0.42	0.46	0.50	0.54	0.68	0.83	1.00
51	0.12	0.13	0.14	0.16	0.17	0.19	0.21	0.23	0.25	0.28	0.32	0.36	0.41	0.46	0.50	0.54	0.59	0.74	0.91	1.10
52	0.13	0.14	0.15	0.17	0.19	0.20	0.22	0.25	0.27	0.30	0.35	0.39	0.45	0.49	0.54	0.60	0.65	0.81	0.99	1.19
53	0.14	0.15	0.17	0.19	0.20	0.22	0.24	0.26	0.29	0.33	0.37	0.43	0.49	0.54	0.60	0.66	0.71	0.89	1.10	1.32
54	0.15	0.17	0.18	0.20	0.21	0.23	0.26	0.29	0.32	0.36	0.42	0.48	0.54	0.60	0.67	0.72	0.79	0.99	1.22	1.46
55	0.16	0.17	0.19	0.21	0.23	0.25	0.28	0.31	0.34	0.39	0.45	0.52	0.59	0.66	0.73	0.80	0.87	1.09	1.33	1.62
56	0.17	0.19	0.20	0.22	0.25	0.27	0.31	0.34	0.37	0.42	0.48	0.57	0.64	0.72	0.80	0.87	0.95	1.20	1.47	1.78
57	0.18	0.20	0.22	0.23	0.26	0.29	0.33	0.36	0.40	0.44	0.53	0.61	0.70	0.78	0.87	0.96	1.05	1.33	1.63	1.96
58	0.19	0.20	0.23	0.25	0.28	0.31	0.35	0.39	0.42	0.46	0.56	0.66	0.75	0.86	0.95	1.06	1.15	1.46	1.80	2.18
59	0.20	0.22	0.24	0.27	0.30	0.33	0.37	0.40	0.44	0.48	0.59	0.71	0.82	0.93	1.05	1.16	1.28	1.63	2.01	2.44
60	0.21	0.23	0.26	0.29	0.32	0.36	0.39	0.42	0.46	0.50	0.63	0.76	0.90	1.03	1.16	1.29	1.42	1.81	2.25	2.73
61	0.22	0.25	0.28	0.31	0.34	0.37	0.40	0.44	0.48	0.53	0.67	0.82	0.97	1.12	1.27	1.42	1.58	2.01	2.50	3.05
62	0.24	0.27	0.30	0.33	0.36	0.39	0.42	0.46	0.50	0.55	0.72	0.90	1.07	1.24	1.41	1.58	1.75	2.24	2.78	3.40
63	0.26	0.28	0.31	0.34	0.37	0.40	0.44	0.48	0.53	0.59	0.78	0.96	1.16	1.35	1.55	1.74	1.93	2.47	3.08	3.76
64	0.27	0.30	0.33	0.36	0.39	0.42	0.45	0.50	0.56	0.62	0.84	1.05	1.26	1.47	1.68	1.90	2.12	2.72	3.39	4.13
65	0.28	0.31	0.34	0.37	0.40	0.43	0.48	0.53	0.59	0.65	0.89	1.13	1.37	1.62	1.86	2.09	2.34	3.01	3.76	4.59
66	0.29	0.32	0.35	0.38	0.41	0.45	0.51	0.56	0.62	0.67	0.95	1.22	1.50	1.77	2.05	2.32	2.60	3.35	4.19	5.13
67	0.30	0.33	0.36	0.39	0.42	0.48	0.52	0.58	0.64	0.70	1.02	1.34	1.65	1.96	2.28	2.60	2.91	3.76	4.72	5.78
68	0.31	0.34	0.37	0.40	0.45	0.50	0.55	0.61	0.66	0.74	1.09	1.45	1.81	2.17	2.53	2.89	3.25	4.21	5.29	6.49
69	0.31	0.34	0.38	0.42	0.47	0.51	0.56	0.62	0.69	0.76	1.16	1.57	1.98	2.38	2.79	3.20	3.61	4.68	5.90	7.24
70	0.32	0.36	0.39	0.44	0.48	0.53	0.58	0.64	0.72	0.80	1.25	1.70	2.15	2.61	3.06	3.52	3.97	5.16	6.50	8.00
71	0.36	0.39	0.44	0.48	0.53	0.58	0.64	0.72	0.80	0.89	1.38	1.88	2.37	2.86	3.36	3.85	4.35	5.65	7.12	8.75
72	0.39	0.44	0.48	0.53	0.58	0.64	0.72	0.80	0.89	0.99	1.53	2.07	2.61	3.16	3.70	4.24	4.78	6.22	7.83	9.62
73	0.44	0.48	0.53	0.58	0.64	0.72	0.80	0.89	0.99	1.10	1.70	2.29	2.88	3.48	4.08	4.67	5.28	6.84	8.62	10.60
74	0.48	0.53	0.58	0.64	0.72	0.80	0.89	0.99	1.10	1.22	1.89	2.58	3.26	3.95	4.63	5.32	6.00	7.79	9.82	12.08
75	0.53	0.58	0.64	0.72	0.80	0.89	0.99	1.10	1.22	1.34	2.12	2.91	3.68	4.47	5.25	6.02	6.81	8.86	11.16	13.73
76	0.58	0.64	0.72	0.80	0.89	0.99	1.10	1.22	1.34	1.48	2.36	3.24	4.12	5.00	5.88	6.76	7.63	9.93	12.52	15.40
77	0.64	0.72	0.80	0.89	0.99	1.10	1.22	1.34	1.48	1.64	2.61	3.58	4.55	5.52	6.49	7.46	8.40	10.94	13.82	17.01
78	0.72	0.80	0.89	0.99	1.10	1.22	1.34	1.48	1.64	1.82	2.85	3.87	4.90	5.92	6.95	7.97	8.98	11.70	14.74	18.12
79	0.80	0.89	0.99	1.10	1.22	1.34	1.48	1.64	1.82	2.01	3.06	4.11	5.16	6.21	7.27	8.31	9.36	12.15	15.29	18.78
80	0.89	0.99	1.10	1.22	1.34	1.48	1.64	1.82	2.01	2.21	3.29	4.38	5.47	6.55	7.64	8.73	9.82	12.72	15.99	19.62
81	0.99	1.10	1.22	1.34	1.48	1.64	1.82	2.01	2.21	2.42	3.48	4.55	5.61	6.68	7.74	8.81	9.88	12.77	16.01	19.62
82	1.10	1.22	1.34	1.48	1.64	1.82	2.01	2.21	2.42	2.60	3.64	4.69	5.74	6.79	7.84	8.88	9.93	12.81	16.04	19.62
83	1.22	1.34	1.48	1.64	1.82	2.01	2.21	2.42	2.60	2.80	3.83	4.85	5.88	6.91	7.94	8.97	10.00	12.86	16.06	19.62
84	1.34	1.48	1.64	1.82	2.01	2.21	2.42	2.60	2.80	3.02	4.03	5.03	6.04	7.05	8.05	9.05	10.06	12.91	16.10	19.62
85	1.48	1.64	1.82	2.01	2.21	2.42	2.60	2.80	3.02	3.27	4.25	5.22	6.21	7.19	8.17	9.15	10.13	12.97	16.13	19.62

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

Appendix 4: Current Select Monthly Cost of Insurance Rates per Thousand Additional Protection Benefit Rider Coverage

Issue Age	Unisex, Preferred Tobacco																			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
20	0.05	0.06	0.06	0.07	0.07	0.07	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.09	0.09	0.10	0.12	0.15	0.18
21	0.06	0.06	0.07	0.07	0.07	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.09	0.09	0.10	0.10	0.11	0.14	0.17
22	0.06	0.07	0.07	0.07	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.09	0.09	0.10	0.10	0.11	0.12	0.16	0.21
23	0.07	0.07	0.07	0.07	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.09	0.09	0.10	0.10	0.11	0.12	0.16	0.18	0.23
24	0.06	0.07	0.07	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.09	0.10	0.10	0.11	0.12	0.13	0.17	0.19	0.24
25	0.07	0.07	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.09	0.10	0.10	0.11	0.12	0.13	0.14	0.18	0.21	0.25
26	0.07	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.09	0.10	0.10	0.11	0.12	0.13	0.14	0.15	0.18	0.22	0.26
27	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.09	0.09	0.10	0.11	0.11	0.13	0.14	0.14	0.16	0.20	0.23	0.28
28	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.09	0.09	0.10	0.11	0.11	0.13	0.14	0.15	0.16	0.17	0.22	0.26	0.31
29	0.07	0.07	0.07	0.07	0.08	0.08	0.08	0.09	0.09	0.10	0.10	0.11	0.12	0.13	0.14	0.16	0.17	0.18	0.23	0.27
30	0.07	0.07	0.07	0.08	0.08	0.09	0.09	0.10	0.10	0.11	0.11	0.13	0.14	0.15	0.17	0.18	0.19	0.24	0.29	0.35
31	0.07	0.07	0.08	0.08	0.09	0.09	0.10	0.10	0.11	0.11	0.13	0.14	0.15	0.17	0.18	0.19	0.21	0.26	0.31	0.38
32	0.07	0.08	0.08	0.08	0.09	0.09	0.10	0.11	0.11	0.12	0.13	0.15	0.16	0.18	0.20	0.21	0.23	0.28	0.35	0.42
33	0.08	0.08	0.08	0.09	0.09	0.10	0.11	0.11	0.12	0.13	0.15	0.17	0.19	0.20	0.22	0.24	0.26	0.32	0.39	0.47
34	0.08	0.08	0.09	0.09	0.10	0.10	0.11	0.12	0.13	0.14	0.16	0.18	0.20	0.22	0.25	0.26	0.28	0.36	0.43	0.52
35	0.08	0.09	0.09	0.10	0.10	0.11	0.11	0.13	0.14	0.16	0.18	0.20	0.23	0.25	0.28	0.30	0.32	0.41	0.49	0.59
36	0.09	0.09	0.10	0.10	0.11	0.11	0.13	0.14	0.16	0.18	0.20	0.23	0.26	0.28	0.31	0.34	0.36	0.45	0.54	0.66
37	0.09	0.10	0.10	0.11	0.11	0.13	0.14	0.16	0.17	0.19	0.22	0.25	0.28	0.31	0.34	0.36	0.39	0.50	0.61	0.73
38	0.10	0.10	0.11	0.11	0.12	0.14	0.16	0.17	0.19	0.20	0.23	0.27	0.30	0.33	0.36	0.40	0.44	0.56	0.68	0.82
39	0.10	0.10	0.11	0.12	0.13	0.15	0.17	0.19	0.20	0.21	0.25	0.29	0.32	0.36	0.40	0.43	0.47	0.60	0.74	0.88
40	0.10	0.11	0.12	0.13	0.15	0.17	0.18	0.20	0.21	0.22	0.26	0.31	0.35	0.39	0.43	0.47	0.51	0.65	0.79	0.96
41	0.11	0.11	0.13	0.15	0.17	0.18	0.20	0.20	0.22	0.23	0.28	0.33	0.38	0.42	0.47	0.51	0.56	0.71	0.87	1.05
42	0.11	0.13	0.14	0.16	0.17	0.19	0.20	0.22	0.23	0.25	0.31	0.36	0.41	0.46	0.51	0.57	0.62	0.78	0.96	1.16
43	0.13	0.14	0.16	0.17	0.19	0.20	0.21	0.23	0.25	0.27	0.33	0.39	0.45	0.51	0.57	0.62	0.68	0.87	1.07	1.29
44	0.14	0.16	0.17	0.19	0.20	0.21	0.22	0.25	0.26	0.29	0.36	0.43	0.49	0.57	0.63	0.69	0.76	0.96	1.19	1.45
45	0.16	0.17	0.19	0.19	0.20	0.22	0.24	0.26	0.29	0.32	0.40	0.47	0.55	0.62	0.69	0.76	0.84	1.06	1.31	1.59
46	0.17	0.19	0.19	0.20	0.22	0.24	0.26	0.29	0.32	0.36	0.43	0.52	0.60	0.68	0.76	0.84	0.93	1.17	1.45	1.76
47	0.18	0.19	0.20	0.22	0.23	0.25	0.28	0.32	0.35	0.39	0.47	0.57	0.65	0.74	0.83	0.92	1.01	1.29	1.59	1.92
48	0.19	0.20	0.21	0.23	0.25	0.28	0.31	0.35	0.38	0.43	0.52	0.61	0.71	0.80	0.91	1.00	1.10	1.40	1.72	2.09
49	0.19	0.20	0.23	0.25	0.28	0.31	0.35	0.38	0.42	0.45	0.55	0.65	0.77	0.87	0.97	1.08	1.19	1.51	1.86	2.26
50	0.20	0.22	0.24	0.27	0.30	0.34	0.38	0.41	0.44	0.48	0.59	0.70	0.82	0.94	1.05	1.16	1.27	1.62	2.01	2.44
51	0.22	0.24	0.26	0.29	0.33	0.37	0.40	0.44	0.47	0.51	0.63	0.75	0.88	1.00	1.13	1.26	1.39	1.76	2.17	2.64
52	0.23	0.26	0.29	0.32	0.36	0.40	0.43	0.46	0.50	0.54	0.68	0.82	0.96	1.09	1.23	1.37	1.50	1.92	2.37	2.88
53	0.25	0.28	0.32	0.35	0.38	0.41	0.45	0.49	0.53	0.59	0.74	0.89	1.03	1.19	1.34	1.48	1.64	2.09	2.58	3.14
54	0.28	0.31	0.34	0.38	0.40	0.44	0.47	0.51	0.57	0.63	0.79	0.96	1.13	1.29	1.46	1.63	1.79	2.27	2.82	3.43
55	0.30	0.33	0.37	0.40	0.43	0.46	0.50	0.56	0.61	0.68	0.86	1.04	1.22	1.40	1.59	1.77	1.95	2.49	3.09	3.75
56	0.32	0.35	0.38	0.41	0.45	0.49	0.54	0.60	0.66	0.71	0.91	1.11	1.31	1.51	1.71	1.91	2.11	2.70	3.34	4.08
57	0.34	0.37	0.40	0.43	0.47	0.52	0.58	0.63	0.69	0.74	0.96	1.19	1.41	1.62	1.85	2.07	2.29	2.91	3.63	4.43
58	0.35	0.38	0.42	0.45	0.51	0.56	0.61	0.66	0.71	0.77	1.02	1.25	1.50	1.74	1.99	2.24	2.48	3.16	3.93	4.83
59	0.37	0.40	0.44	0.48	0.54	0.59	0.64	0.69	0.74	0.79	1.06	1.34	1.61	1.89	2.16	2.43	2.71	3.44	4.29	5.29
60	0.38	0.42	0.46	0.52	0.56	0.62	0.66	0.71	0.76	0.81	1.12	1.43	1.73	2.04	2.35	2.65	2.95	3.77	4.71	5.82

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

Appendix 4: Current Select Monthly Cost of Insurance Rates per Thousand Additional Protection Benefit Rider Coverage

Issue Age	Unisex, Preferred Tobacco																			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
61	0.41	0.45	0.49	0.54	0.59	0.63	0.69	0.73	0.78	0.83	1.17	1.52	1.86	2.21	2.55	2.89	3.23	4.13	5.19	6.40
62	0.43	0.47	0.52	0.56	0.61	0.66	0.70	0.75	0.80	0.86	1.25	1.63	2.02	2.40	2.79	3.17	3.55	4.56	5.69	7.06
63	0.45	0.50	0.53	0.58	0.62	0.67	0.72	0.77	0.83	0.91	1.33	1.75	2.17	2.60	3.02	3.45	3.87	4.98	6.27	7.71
64	0.48	0.51	0.55	0.59	0.63	0.68	0.73	0.79	0.86	0.94	1.40	1.86	2.34	2.80	3.27	3.73	4.20	5.44	6.84	8.39
65	0.49	0.52	0.56	0.60	0.65	0.69	0.75	0.82	0.89	0.97	1.47	1.99	2.50	3.01	3.53	4.04	4.55	5.91	7.44	9.14
66	0.50	0.53	0.57	0.61	0.66	0.71	0.78	0.84	0.91	1.00	1.56	2.13	2.69	3.26	3.83	4.39	4.95	6.45	8.11	9.99
67	0.51	0.54	0.57	0.62	0.67	0.74	0.80	0.86	0.94	1.02	1.65	2.27	2.89	3.52	4.14	4.76	5.39	7.01	8.84	10.89
68	0.51	0.55	0.58	0.63	0.69	0.75	0.82	0.88	0.96	1.05	1.73	2.42	3.11	3.80	4.49	5.18	5.87	7.65	9.66	11.91
69	0.51	0.55	0.59	0.65	0.71	0.77	0.83	0.90	0.98	1.08	1.82	2.59	3.35	4.10	4.86	5.61	6.37	8.32	10.51	12.96
70	0.52	0.55	0.60	0.66	0.71	0.78	0.84	0.92	1.00	1.10	1.92	2.76	3.58	4.41	5.24	6.06	6.89	9.00	11.39	14.06
71	0.55	0.60	0.66	0.71	0.78	0.84	0.92	1.00	1.10	1.20	2.09	2.98	3.87	4.76	5.65	6.54	7.42	9.70	12.27	15.14
72	0.60	0.66	0.71	0.78	0.84	0.92	1.00	1.10	1.20	1.32	2.25	3.19	4.13	5.06	6.01	6.94	7.87	10.28	12.99	16.03
73	0.66	0.71	0.78	0.84	0.92	1.00	1.10	1.20	1.32	1.45	2.43	3.42	4.41	5.40	6.39	7.38	8.37	10.92	13.81	17.02
74	0.71	0.78	0.84	0.92	1.00	1.10	1.20	1.32	1.45	1.57	2.63	3.67	4.73	5.77	6.83	7.87	8.93	11.64	14.70	18.11
75	0.78	0.84	0.92	1.00	1.10	1.20	1.32	1.45	1.57	1.71	2.83	3.94	5.05	6.17	7.28	8.40	9.51	12.40	15.66	19.29
76	0.84	0.92	1.00	1.10	1.20	1.32	1.45	1.57	1.71	1.87	3.06	4.25	5.44	6.64	7.83	9.02	10.21	13.28	16.72	20.69
77	0.92	1.00	1.10	1.20	1.32	1.45	1.57	1.71	1.87	2.04	3.30	4.55	5.81	7.06	8.33	9.59	10.84	14.07	17.79	21.93
78	1.00	1.10	1.20	1.32	1.45	1.57	1.71	1.87	2.04	2.23	3.55	4.88	6.20	7.53	8.86	10.19	11.50	14.98	18.88	23.24
79	1.10	1.20	1.32	1.45	1.57	1.71	1.87	2.04	2.23	2.43	3.81	5.18	6.55	7.93	9.30	10.68	12.05	15.66	19.73	24.27
80	1.20	1.32	1.45	1.57	1.71	1.87	2.04	2.23	2.43	2.63	4.02	5.42	6.81	8.21	9.60	10.99	12.39	16.09	20.24	24.87
81	1.32	1.45	1.57	1.71	1.87	2.04	2.23	2.43	2.63	2.83	4.22	5.62	7.01	8.40	9.80	11.19	12.59	16.30	20.49	25.15
82	1.45	1.57	1.71	1.87	2.04	2.23	2.43	2.63	2.83	3.00	4.39	5.79	7.18	8.58	9.98	11.37	12.77	16.52	20.75	25.44
83	1.57	1.71	1.87	2.04	2.23	2.43	2.63	2.83	3.00	3.18	4.58	5.98	7.38	8.77	10.18	11.57	12.98	16.77	21.03	25.77
84	1.71	1.87	2.04	2.23	2.43	2.63	2.83	3.00	3.18	3.39	4.76	6.15	7.53	8.91	10.30	11.69	13.07	16.86	21.11	25.83
85	1.87	2.04	2.23	2.43	2.63	2.83	3.00	3.18	3.39	3.61	4.97	6.33	7.69	9.05	10.41	11.77	13.14	16.91	21.14	25.83

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

Appendix 4: Current Select Monthly Cost of Insurance Rates per Thousand Additional Protection Benefit Rider Coverage

Issue Age	Unisex, Standard Tobacco																			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
20	0.05	0.06	0.06	0.07	0.07	0.07	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.09	0.09	0.10	0.12	0.15	0.18
21	0.06	0.06	0.07	0.07	0.07	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.09	0.09	0.10	0.10	0.11	0.14	0.17
22	0.06	0.07	0.07	0.07	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.09	0.09	0.10	0.10	0.11	0.12	0.16	0.21
23	0.07	0.07	0.07	0.07	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.09	0.09	0.10	0.10	0.11	0.12	0.16	0.18	0.23
24	0.06	0.07	0.07	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.09	0.10	0.10	0.11	0.12	0.13	0.17	0.19	0.24
25	0.07	0.07	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.09	0.10	0.10	0.11	0.12	0.13	0.14	0.18	0.21	0.25
26	0.07	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.09	0.10	0.10	0.11	0.12	0.13	0.14	0.15	0.18	0.22	0.26
27	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.09	0.09	0.10	0.11	0.11	0.13	0.14	0.14	0.16	0.20	0.23	0.28
28	0.08	0.08	0.08	0.08	0.08	0.08	0.08	0.09	0.09	0.10	0.11	0.11	0.13	0.14	0.15	0.16	0.17	0.22	0.26	0.31
29	0.07	0.07	0.07	0.07	0.08	0.08	0.09	0.09	0.10	0.10	0.11	0.12	0.13	0.14	0.16	0.17	0.18	0.23	0.27	0.33
30	0.07	0.07	0.07	0.08	0.08	0.09	0.09	0.10	0.10	0.11	0.11	0.13	0.14	0.15	0.17	0.18	0.19	0.24	0.29	0.35
31	0.07	0.07	0.08	0.08	0.09	0.09	0.10	0.10	0.11	0.11	0.13	0.14	0.15	0.17	0.18	0.19	0.21	0.26	0.31	0.38
32	0.07	0.08	0.08	0.08	0.09	0.09	0.10	0.11	0.11	0.12	0.13	0.15	0.16	0.18	0.20	0.21	0.23	0.28	0.35	0.42
33	0.08	0.08	0.08	0.09	0.09	0.10	0.11	0.11	0.12	0.13	0.15	0.17	0.19	0.20	0.22	0.24	0.26	0.32	0.39	0.47
34	0.08	0.08	0.09	0.09	0.10	0.10	0.11	0.12	0.13	0.14	0.16	0.18	0.20	0.22	0.25	0.26	0.28	0.36	0.43	0.52
35	0.08	0.09	0.09	0.10	0.10	0.11	0.11	0.13	0.14	0.16	0.18	0.20	0.23	0.25	0.28	0.30	0.32	0.41	0.49	0.59
36	0.09	0.09	0.10	0.10	0.11	0.11	0.13	0.14	0.16	0.18	0.20	0.23	0.26	0.28	0.31	0.34	0.36	0.45	0.54	0.66
37	0.09	0.10	0.10	0.11	0.11	0.13	0.14	0.16	0.17	0.19	0.22	0.25	0.28	0.31	0.34	0.36	0.39	0.50	0.61	0.73
38	0.10	0.10	0.11	0.11	0.12	0.14	0.16	0.17	0.19	0.20	0.23	0.27	0.30	0.33	0.36	0.40	0.44	0.56	0.68	0.82
39	0.10	0.10	0.11	0.12	0.13	0.15	0.17	0.19	0.20	0.21	0.25	0.29	0.32	0.36	0.40	0.43	0.47	0.60	0.74	0.88
40	0.10	0.11	0.12	0.13	0.15	0.17	0.18	0.20	0.21	0.22	0.26	0.31	0.35	0.39	0.43	0.47	0.51	0.65	0.79	0.96
41	0.11	0.11	0.13	0.15	0.17	0.18	0.20	0.20	0.22	0.23	0.28	0.33	0.38	0.42	0.47	0.51	0.56	0.71	0.87	1.05
42	0.11	0.13	0.14	0.16	0.17	0.19	0.20	0.22	0.23	0.25	0.31	0.36	0.41	0.46	0.51	0.57	0.62	0.78	0.96	1.16
43	0.13	0.14	0.16	0.17	0.19	0.20	0.21	0.23	0.25	0.27	0.33	0.39	0.45	0.51	0.57	0.62	0.68	0.87	1.07	1.29
44	0.14	0.16	0.17	0.19	0.20	0.21	0.22	0.25	0.26	0.29	0.36	0.43	0.49	0.57	0.63	0.69	0.76	0.96	1.19	1.45
45	0.16	0.17	0.19	0.19	0.20	0.22	0.24	0.26	0.29	0.32	0.40	0.47	0.55	0.62	0.69	0.76	0.84	1.06	1.31	1.59
46	0.17	0.19	0.19	0.20	0.22	0.24	0.26	0.29	0.32	0.36	0.43	0.52	0.60	0.68	0.76	0.84	0.93	1.17	1.45	1.76
47	0.18	0.19	0.20	0.22	0.23	0.25	0.28	0.32	0.35	0.39	0.47	0.57	0.65	0.74	0.83	0.92	1.01	1.29	1.59	1.92
48	0.19	0.20	0.21	0.23	0.25	0.28	0.31	0.35	0.38	0.43	0.52	0.61	0.71	0.80	0.91	1.00	1.10	1.40	1.72	2.09
49	0.19	0.20	0.23	0.25	0.28	0.31	0.35	0.38	0.42	0.45	0.55	0.65	0.77	0.87	0.97	1.08	1.19	1.51	1.86	2.26
50	0.20	0.22	0.24	0.27	0.30	0.34	0.38	0.41	0.44	0.48	0.59	0.70	0.82	0.94	1.05	1.16	1.27	1.62	2.01	2.44
51	0.22	0.24	0.26	0.29	0.33	0.37	0.40	0.44	0.47	0.51	0.63	0.75	0.88	1.00	1.13	1.26	1.39	1.76	2.17	2.64
52	0.23	0.26	0.29	0.32	0.36	0.40	0.43	0.46	0.50	0.54	0.68	0.82	0.96	1.09	1.23	1.37	1.50	1.92	2.37	2.88
53	0.25	0.28	0.32	0.35	0.38	0.41	0.45	0.49	0.53	0.59	0.74	0.89	1.03	1.19	1.34	1.48	1.64	2.09	2.58	3.14
54	0.28	0.31	0.34	0.38	0.40	0.44	0.47	0.51	0.57	0.63	0.79	0.96	1.13	1.29	1.46	1.63	1.79	2.27	2.82	3.43
55	0.30	0.33	0.37	0.40	0.43	0.46	0.50	0.56	0.61	0.68	0.86	1.04	1.22	1.40	1.59	1.77	1.95	2.49	3.09	3.75
56	0.32	0.35	0.38	0.41	0.45	0.49	0.54	0.60	0.66	0.71	0.91	1.11	1.31	1.51	1.71	1.91	2.11	2.70	3.34	4.08
57	0.34	0.37	0.40	0.43	0.47	0.52	0.58	0.63	0.69	0.74	0.96	1.19	1.41	1.62	1.85	2.07	2.29	2.91	3.63	4.43
58	0.35	0.38	0.42	0.45	0.51	0.56	0.61	0.66	0.71	0.77	1.02	1.25	1.50	1.74	1.99	2.24	2.48	3.16	3.93	4.83
59	0.37	0.40	0.44	0.48	0.54	0.59	0.64	0.69	0.74	0.79	1.06	1.34	1.61	1.89	2.16	2.43	2.71	3.44	4.29	5.29
60	0.38	0.42	0.46	0.52	0.56	0.62	0.66	0.71	0.76	0.81	1.12	1.43	1.73	2.04	2.35	2.65	2.95	3.77	4.71	5.82

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

Appendix 4: Current Select Monthly Cost of Insurance Rates per Thousand Additional Protection Benefit Rider Coverage

Issue Age	Unisex, Standard Tobacco																			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
61	0.41	0.45	0.49	0.54	0.59	0.63	0.69	0.73	0.78	0.83	1.17	1.52	1.86	2.21	2.55	2.89	3.23	4.13	5.19	6.40
62	0.43	0.47	0.52	0.56	0.61	0.66	0.70	0.75	0.80	0.86	1.25	1.63	2.02	2.40	2.79	3.17	3.55	4.56	5.69	7.06
63	0.45	0.50	0.53	0.58	0.62	0.67	0.72	0.77	0.83	0.91	1.33	1.75	2.17	2.60	3.02	3.45	3.87	4.98	6.27	7.71
64	0.48	0.51	0.55	0.59	0.63	0.68	0.73	0.79	0.86	0.94	1.40	1.86	2.34	2.80	3.27	3.73	4.20	5.44	6.84	8.39
65	0.49	0.52	0.56	0.60	0.65	0.69	0.75	0.82	0.89	0.97	1.47	1.99	2.50	3.01	3.53	4.04	4.55	5.91	7.44	9.14
66	0.50	0.53	0.57	0.61	0.66	0.71	0.78	0.84	0.91	1.00	1.56	2.13	2.69	3.26	3.83	4.39	4.95	6.45	8.11	9.99
67	0.51	0.54	0.57	0.62	0.67	0.74	0.80	0.86	0.94	1.02	1.65	2.27	2.89	3.52	4.14	4.76	5.39	7.01	8.84	10.89
68	0.51	0.55	0.58	0.63	0.69	0.75	0.82	0.88	0.96	1.05	1.73	2.42	3.11	3.80	4.49	5.18	5.87	7.65	9.66	11.91
69	0.51	0.55	0.59	0.65	0.71	0.77	0.83	0.90	0.98	1.08	1.82	2.59	3.35	4.10	4.86	5.61	6.37	8.32	10.51	12.96
70	0.52	0.55	0.60	0.66	0.71	0.78	0.84	0.92	1.00	1.10	1.92	2.76	3.58	4.41	5.24	6.06	6.89	9.00	11.39	14.06
71	0.55	0.60	0.66	0.71	0.78	0.84	0.92	1.00	1.10	1.20	2.09	2.98	3.87	4.76	5.65	6.54	7.42	9.70	12.27	15.14
72	0.60	0.66	0.71	0.78	0.84	0.92	1.00	1.10	1.20	1.32	2.25	3.19	4.13	5.06	6.01	6.94	7.87	10.28	12.99	16.03
73	0.66	0.71	0.78	0.84	0.92	1.00	1.10	1.20	1.32	1.45	2.43	3.42	4.41	5.40	6.39	7.38	8.37	10.92	13.81	17.02
74	0.71	0.78	0.84	0.92	1.00	1.10	1.20	1.32	1.45	1.57	2.63	3.67	4.73	5.77	6.83	7.87	8.93	11.64	14.70	18.11
75	0.78	0.84	0.92	1.00	1.10	1.20	1.32	1.45	1.57	1.71	2.83	3.94	5.05	6.17	7.28	8.40	9.51	12.40	15.66	19.29
76	0.84	0.92	1.00	1.10	1.20	1.32	1.45	1.57	1.71	1.87	3.06	4.25	5.44	6.64	7.83	9.02	10.21	13.28	16.72	20.69
77	0.92	1.00	1.10	1.20	1.32	1.45	1.57	1.71	1.87	2.04	3.30	4.55	5.81	7.06	8.33	9.59	10.84	14.07	17.79	21.93
78	1.00	1.10	1.20	1.32	1.45	1.57	1.71	1.87	2.04	2.23	3.55	4.88	6.20	7.53	8.86	10.19	11.50	14.98	18.88	23.24
79	1.10	1.20	1.32	1.45	1.57	1.71	1.87	2.04	2.23	2.43	3.81	5.18	6.55	7.93	9.30	10.68	12.05	15.66	19.73	24.27
80	1.20	1.32	1.45	1.57	1.71	1.87	2.04	2.23	2.43	2.63	4.02	5.42	6.81	8.21	9.60	10.99	12.39	16.09	20.24	24.87
81	1.32	1.45	1.57	1.71	1.87	2.04	2.23	2.43	2.63	2.83	4.22	5.62	7.01	8.40	9.80	11.19	12.59	16.30	20.49	25.15
82	1.45	1.57	1.71	1.87	2.04	2.23	2.43	2.63	2.83	3.00	4.39	5.79	7.18	8.58	9.98	11.37	12.77	16.52	20.75	25.44
83	1.57	1.71	1.87	2.04	2.23	2.43	2.63	2.83	3.00	3.18	4.58	5.98	7.38	8.77	10.18	11.57	12.98	16.77	21.03	25.77
84	1.71	1.87	2.04	2.23	2.43	2.63	2.83	3.00	3.18	3.39	4.76	6.15	7.53	8.91	10.30	11.69	13.07	16.86	21.11	25.83
85	1.87	2.04	2.23	2.43	2.63	2.83	3.00	3.18	3.39	3.61	4.97	6.33	7.69	9.05	10.41	11.77	13.14	16.91	21.14	25.83

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

Appendix 4a: Current Ultimate
Monthly Cost Of Insurance Rates Per Thousand
Additional Protection Benefit Rider Face Amount

ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Attained Age	Unisex				
	ENT	PNT	SNT	PT	ST
20			0.06		
21			0.06		
22			0.06		
23			0.06		
24			0.06		
25			0.06		
26			0.06		
27			0.06		
28			0.07		
29			0.07		
30			0.07		
31			0.07		
32			0.07		
33			0.07		
34			0.07		
35			0.08		
36			0.08		
37			0.09		
38			0.09		
39			0.09		
40	0.10	0.10	0.10	0.21	0.21
41	0.09	0.09	0.09	0.23	0.23
42	0.09	0.09	0.09	0.25	0.25
43	0.09	0.09	0.09	0.26	0.26
44	0.10	0.10	0.10	0.27	0.27
45	0.10	0.10	0.10	0.29	0.29
46	0.11	0.11	0.11	0.31	0.31
47	0.12	0.12	0.12	0.34	0.34
48	0.13	0.13	0.13	0.35	0.35
49	0.14	0.14	0.14	0.38	0.38
50	0.15	0.15	0.15	0.42	0.42
51	0.17	0.17	0.17	0.46	0.46
52	0.19	0.19	0.19	0.52	0.52
53	0.21	0.21	0.21	0.57	0.57
54	0.24	0.24	0.24	0.65	0.65
55	0.27	0.27	0.27	0.73	0.73
56	0.31	0.31	0.31	0.81	0.81
57	0.34	0.34	0.34	0.91	0.91
58	0.37	0.37	0.37	0.98	0.98
59	0.41	0.41	0.41	1.07	1.07
60	0.44	0.44	0.44	1.16	1.16
61	0.49	0.49	0.49	1.28	1.28
62	0.55	0.55	0.55	1.44	1.44
63	0.62	0.62	0.62	1.60	1.60
64	0.69	0.69	0.69	1.76	1.76
65	0.76	0.76	0.76	1.95	1.95
66	0.85	0.85	0.85	2.13	2.13

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

Appendix 4a: Current Ultimate
Monthly Cost Of Insurance Rates Per Thousand
Additional Protection Benefit Rider Face Amount

ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Attained Age	Unisex				
	ENT	PNT	SNT	PT	ST
67	0.93	0.93	0.93	2.31	2.31
68	1.01	1.01	1.01	2.50	2.50
69	1.11	1.11	1.11	2.70	2.70
70	1.21	1.21	1.21	2.93	2.93
71	1.33	1.33	1.33	3.19	3.19
72	1.46	1.46	1.46	3.48	3.48
73	1.62	1.62	1.62	3.81	3.81
74	1.79	1.79	1.79	4.16	4.16
75	1.97	1.97	1.97	4.52	4.52
76	2.18	2.18	2.18	4.91	4.91
77	2.42	2.42	2.42	5.36	5.36
78	2.71	2.71	2.71	5.87	5.87
79	3.03	3.03	3.03	6.46	6.46
80	3.38	3.38	3.38	7.11	7.11
81	3.77	3.77	3.77	7.83	7.83
82	4.17	4.17	4.17	8.56	8.56
83	4.59	4.59	4.59	9.33	9.33
84	5.10	5.10	5.10	10.15	10.15
85	5.70	5.70	5.70	11.09	11.09
86	6.42	6.42	6.42	12.09	12.09
87	7.21	7.21	7.21	13.22	13.22
88	8.04	8.04	8.04	14.40	14.40
89	8.89	8.89	8.89	15.62	15.62
90	9.72	9.72	9.72	16.82	16.82
91	10.69	10.69	10.69	17.81	17.81
92	11.77	11.77	11.77	18.91	18.91
93	13.41	13.41	13.41	20.12	20.12
94	15.25	15.25	15.25	21.43	21.43
95	17.11	17.11	17.11	22.98	22.98
96	18.90	18.90	18.90	24.36	24.36
97	20.13	20.13	20.13	25.81	25.81
98	20.86	20.86	20.86	26.96	26.96
99	21.79	21.79	21.79	27.62	27.62

Actuarial Memorandum
Additional Protection Benefit Rider 8536(0707)
Attached to Policy Form 8733(0709)

Appendix 4a: Current Ultimate
Monthly Cost Of Insurance Rates Per Thousand
Additional Protection Benefit Rider Face Amount

ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Attained Age	Unisex				
	ENT	PNT	SNT	PT	ST
100	21.79	21.79	21.79	27.93	27.93
101	21.79	21.79	21.79	28.26	28.26
102	21.79	21.79	21.79	28.62	28.62
103	21.79	21.79	21.79	28.69	28.69
104	21.79	21.79	21.79	28.69	28.69
105	21.79	21.79	21.79	28.69	28.69
106	21.79	21.79	21.79	28.69	28.69
107	21.79	21.79	21.79	28.69	28.69
108	21.79	21.79	21.79	28.69	28.69
109	21.79	21.79	21.79	28.69	28.69
110	21.79	21.79	21.79	28.69	28.69
111	21.79	21.79	21.79	28.69	28.69
112	21.79	21.79	21.79	28.69	28.69
113	21.79	21.79	21.79	28.69	28.69
114	21.79	21.79	21.79	28.69	28.69
115	21.79	21.79	21.79	28.69	28.69
116	21.79	21.79	21.79	28.69	28.69
117	21.79	21.79	21.79	28.69	28.69
118	21.79	21.79	21.79	28.69	28.69
119	21.79	21.79	21.79	28.69	28.69
120	21.79	21.79	21.79	28.69	28.69

**Actuarial Memorandum
Balance Sheet Benefit Rider
Policy Form 8459(0606)
Attached to Base Policy 8733(0709)**

Purpose and Scope

This actuarial memorandum has been prepared to support the establishment of unisex rates for rider policy form 8459(0606) to be used with base policy form 8733(0709). This document has been prepared for the purpose of demonstrating compliance with regulatory authority and may not be appropriate for other purposes.

Rider Description

Policy form 8459(0606) is a Balance Sheet Benefit Rider for attachment to form number 8733(0709), which is a Single life Flexible Premium Adjustable Benefit Life Insurance policy.

This form, when attached to a base policy, waives a specified percentage of policy Surrender Charges. This percentage is specified by the policyholder at issue and may take any positive value up to and including 100%.

The Monthly Deduction for this rider is equal to the appropriate Monthly Balance Sheet Benefit Rider Rate per \$1,000 of Face Amount multiplied by the number of units of base policy Face Amount multiplied by the specified percentage of Surrender Charges to be waived. The rates vary by sex, risk class and issue age. Rates are level for ten years and zero thereafter.

Certifications

I hereby certify, to the best of my knowledge and judgment, that:

- (1.) No additional cash values are generated by this form and none are required under the NAIC Standard Nonforfeiture Law or the NAIC Universal Life Insurance Model Regulation.
- (2.) The valuation standards used in establishing reserves for this policy form comply with the NAIC Standard Valuation Law, the NAIC Universal Life Insurance Model Regulation, and all applicable NAIC Actuarial Guidelines.
- (3.) No assumptions or provisions unfairly discriminate in availability, rates, benefits, or in any other way for prospective insureds of the same class, equal expectation of life, and degree of risk hazard.
- (4.) The rider charges are reasonable and self-supporting.

Statement of Professional Qualifications

I, Nancy W. Winings, am a Designated Representative of Life Insurance Company of the Southwest and I am a member in good standing of the American Academy of Actuaries.

Nancy W. Winings

Nancy W. Winings FSA MAAA
April 29, 2009

Actuarial Memorandum
BalanceSheet Benefit Rider 8459(0606)
Attached To Policy Form 8733(0709)

Appendix 1: Balance Sheet Benefit Rider
Monthly Minimum Premium Rates

Per Thousand of Base Coverage

ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Issue Age	Unisex				
	ENT	PNT	SNT	PT	ST
0			0.01		
1			0.01		
2			0.01		
3			0.01		
4			0.01		
5			0.01		
6			0.01		
7			0.01		
8			0.01		
9			0.01		
10			0.01		
11			0.01		
12			0.01		
13			0.01		
14			0.01		
15			0.01		
16			0.01		
17			0.01		
18			0.01		
19			0.01		
20	0.01	0.01	0.01	0.01	0.01
21	0.01	0.01	0.01	0.01	0.01
22	0.01	0.01	0.01	0.01	0.01
23	0.01	0.01	0.01	0.01	0.01
24	0.01	0.01	0.01	0.01	0.01
25	0.01	0.01	0.01	0.01	0.01
26	0.01	0.01	0.01	0.01	0.01
27	0.01	0.01	0.01	0.01	0.01
28	0.01	0.02	0.02	0.01	0.01
29	0.02	0.02	0.02	0.01	0.02
30	0.02	0.02	0.02	0.01	0.02
31	0.02	0.02	0.02	0.01	0.02
32	0.02	0.02	0.02	0.01	0.02
33	0.02	0.02	0.02	0.01	0.02
34	0.02	0.02	0.02	0.02	0.02
35	0.02	0.02	0.02	0.02	0.02
36	0.02	0.02	0.02	0.02	0.02
37	0.02	0.02	0.02	0.02	0.02
38	0.02	0.02	0.02	0.02	0.02
39	0.02	0.02	0.02	0.02	0.03
40	0.02	0.02	0.02	0.02	0.03
41	0.02	0.02	0.03	0.02	0.03
42	0.02	0.02	0.03	0.02	0.03
43	0.02	0.03	0.03	0.02	0.03

Actuarial Memorandum
BalanceSheet Benefit Rider 8459(0606)
Attached To Policy Form 8733(0709)

Appendix 1: Balance Sheet Benefit Rider
Monthly Minimum Premium Rates

Per Thousand of Base Coverage

ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Issue Age	Unisex				
	ENT	PNT	SNT	PT	ST
44	0.03	0.03	0.03	0.03	0.03
45	0.03	0.03	0.03	0.03	0.04
46	0.03	0.03	0.03	0.03	0.04
47	0.03	0.03	0.04	0.03	0.04
48	0.03	0.03	0.04	0.03	0.04
49	0.03	0.04	0.04	0.03	0.05
50	0.04	0.04	0.04	0.04	0.05
51	0.04	0.04	0.05	0.04	0.06
52	0.04	0.04	0.05	0.04	0.06
53	0.04	0.04	0.05	0.04	0.06
54	0.05	0.05	0.05	0.05	0.07
55	0.05	0.05	0.06	0.05	0.07
56	0.05	0.05	0.06	0.06	0.08
57	0.05	0.06	0.06	0.06	0.08
58	0.06	0.06	0.07	0.07	0.09
59	0.07	0.07	0.08	0.08	0.11
60	0.07	0.08	0.09	0.10	0.13
61	0.08	0.09	0.10	0.11	0.15
62	0.09	0.09	0.10	0.12	0.16
63	0.10	0.10	0.11	0.13	0.17
64	0.11	0.11	0.13	0.15	0.19
65	0.13	0.13	0.15	0.16	0.20
66	0.14	0.15	0.16	0.18	0.22
67	0.15	0.15	0.17	0.18	0.22
68	0.15	0.16	0.17	0.19	0.23
69	0.16	0.16	0.18	0.20	0.24
70	0.16	0.16	0.18	0.21	0.26
71	0.16	0.16	0.18	0.22	0.27
72	0.16	0.16	0.19	0.22	0.28
73	0.15	0.16	0.18	0.22	0.28
74	0.15	0.16	0.19	0.23	0.29
75	0.15	0.16	0.19	0.23	0.29
76		0.16	0.19	0.24	0.30
77		0.16	0.20	0.25	0.31
78		0.17	0.20	0.25	0.32
79		0.17	0.20	0.26	0.33
80		0.17	0.20	0.27	0.34
81		0.17	0.21	0.28	0.36
82		0.18	0.22	0.29	0.38
83		0.19	0.24	0.31	0.41
84		0.20	0.26	0.34	0.46
85		0.23	0.29	0.39	0.54

Actuarial Memorandum
BalanceSheet Benefit Rider 8459(0606)
Attached To Policy Form 8733(0709)

Appendix 2: Balance Sheet Benefit Rider
Monthly Cost of Insurance Rates
Per Thousand of Base Coverage

ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Guaranteed and current rates are equal. Rates are charged for ten years and are the same for each policy year.

Policy Years 1-10:

Issue Age	Unisex				
	ENT	PNT	SNT	PT	ST
0			0.01		
1			0.01		
2			0.01		
3			0.01		
4			0.01		
5			0.01		
6			0.01		
7			0.01		
8			0.01		
9			0.01		
10			0.01		
11			0.01		
12			0.01		
13			0.01		
14			0.01		
15			0.01		
16			0.01		
17			0.01		
18			0.01		
19			0.01		
20	0.01	0.01	0.01	0.01	0.01
21	0.01	0.01	0.01	0.01	0.01
22	0.01	0.01	0.01	0.01	0.01
23	0.01	0.01	0.01	0.01	0.01
24	0.01	0.01	0.01	0.01	0.01
25	0.01	0.01	0.01	0.01	0.01
26	0.01	0.01	0.01	0.01	0.01
27	0.01	0.01	0.01	0.01	0.01
28	0.01	0.02	0.02	0.01	0.01
29	0.02	0.02	0.02	0.01	0.02
30	0.02	0.02	0.02	0.01	0.02
31	0.02	0.02	0.02	0.01	0.02
32	0.02	0.02	0.02	0.01	0.02
33	0.02	0.02	0.02	0.01	0.02
34	0.02	0.02	0.02	0.02	0.02
35	0.02	0.02	0.02	0.02	0.02
36	0.02	0.02	0.02	0.02	0.02
37	0.02	0.02	0.02	0.02	0.02
38	0.02	0.02	0.02	0.02	0.02
39	0.02	0.02	0.02	0.02	0.03
40	0.02	0.02	0.02	0.02	0.03
41	0.02	0.02	0.03	0.02	0.03
42	0.02	0.02	0.03	0.02	0.03
43	0.02	0.02	0.03	0.02	0.03

Actuarial Memorandum
BalanceSheet Benefit Rider 8459(0606)
Attached To Policy Form 8733(0709)

Appendix 2: Balance Sheet Benefit Rider
Monthly Cost of Insurance Rates
Per Thousand of Base Coverage

ENT = Elite Non-tobacco
PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Guaranteed and current rates are equal. Rates are charged for ten years and are the same for each policy year.

Policy Years 1-10:

Issue Age	Unisex				
	ENT	PNT	SNT	PT	ST
44	0.02	0.03	0.03	0.02	0.03
45	0.03	0.03	0.03	0.02	0.03
46	0.03	0.03	0.03	0.03	0.04
47	0.03	0.03	0.03	0.03	0.04
48	0.03	0.03	0.03	0.03	0.04
49	0.03	0.03	0.04	0.03	0.05
50	0.03	0.04	0.04	0.03	0.05
51	0.04	0.04	0.04	0.04	0.05
52	0.04	0.04	0.05	0.04	0.05
53	0.04	0.04	0.05	0.04	0.06
54	0.04	0.05	0.05	0.05	0.06
55	0.04	0.05	0.05	0.05	0.07
56	0.05	0.05	0.06	0.06	0.07
57	0.05	0.05	0.06	0.06	0.08
58	0.06	0.06	0.07	0.07	0.09
59	0.06	0.07	0.07	0.08	0.10
60	0.07	0.07	0.08	0.09	0.12
61	0.08	0.08	0.09	0.11	0.14
62	0.08	0.09	0.10	0.11	0.15
63	0.09	0.09	0.11	0.13	0.16
64	0.10	0.11	0.12	0.14	0.18
65	0.12	0.12	0.14	0.15	0.19
66	0.14	0.14	0.16	0.17	0.21
67	0.14	0.14	0.16	0.17	0.21
68	0.14	0.15	0.16	0.18	0.22
69	0.15	0.15	0.17	0.19	0.23
70	0.15	0.15	0.17	0.20	0.24
71	0.15	0.15	0.17	0.20	0.25
72	0.15	0.15	0.18	0.21	0.26
73	0.14	0.15	0.17	0.21	0.26
74	0.14	0.15	0.18	0.21	0.27
75	0.14	0.15	0.18	0.22	0.28
76		0.15	0.18	0.23	0.29
77		0.15	0.18	0.23	0.30
78		0.16	0.19	0.24	0.30
79		0.16	0.19	0.25	0.31
80		0.16	0.19	0.25	0.32
81		0.16	0.20	0.26	0.34
82		0.17	0.21	0.27	0.35
83		0.18	0.22	0.29	0.39
84		0.19	0.24	0.32	0.43
85		0.21	0.28	0.37	0.51

**Actuarial Memorandum
Other Insured Rider
Policy Form 8535(0707)
Attached to Base Policy Form 8733(0709)**

Scope and Purpose

This actuarial memorandum has been prepared to support the filing of new rates for an existing other insured rider. This document has been prepared for the purpose of demonstrating compliance with regulatory authority and may not be appropriate for other purposes.

Rider Description

The rates filed with actuarial memorandum are designed to be attached to policy form 8733(0709) which is an indexed flexible premium adjustable benefit life insurance policy. This rider utilizes unisex cost factors.

Death Benefit

This rider provides level term insurance on the life of one or more other insureds. Coverage on each other insured will terminate on the earliest of the date the policy terminate, the date the rider terminates, the date the other insured's coverage is converted, or the anniversary on which the other insured reaches attained age 100.

Conversion

Coverage on the life of each other insured can be exchanged for a new permanent policy for the same face amount on the life of each other insured without evidence of insurability within 31 days of the death of the insured under the base policy or at any time while the insured is living and prior to the termination of the rider. The new policy will be issued at the attained age of the other insured on the exchange date and in the same risk class as the rider.

Premium

The monthly cost of insurance charge for each other insured is deducted from the accumulated value of the policy and is computed as the amount of insurance on the other insured times the appropriate cost of insurance rate for the other insured.

The cost of insurance rates are a flexible factor for this form. The current cost of insurance rates are guaranteed for the first five policy years. Tables of the current and guaranteed cost of insurance rates are shown in the appendix.

The company intends to review anticipated experience and conduct profit studies to determine whether changes in anticipated experience are significant enough to warrant adjusting the cost of insurance rates for both in force riders and new riders.

Any modification to the current cost of insurance rates for in force riders will meet the following requirements:

- 1) Any such modification will be based upon future anticipated or emerging experience.
- 2) Any such modification will be made on a class basis based on the classes initially identified when policies are issued.
- 3) Any such modification will not result in the distribution of prior profits or the recovery of prior losses, nor will any such modification be used to increase the expected profitability of these policies.

The company will provide the Department with appropriate information concerning a change in the cost of insurance rates for this policy form prior to the implementation of such a change. Advance notice will be provided as required by the Department.

**Actuarial Memorandum
Other Insured Rider
Policy Form 8535(0707)
Attached to Base Policy Form 8733(0709)**

Nonforfeiture Benefits

This rider provides no additional nonforfeiture benefits, and none are required by the NAIC Standard Nonforfeiture Law or the NAIC Universal Life Insurance Model Regulation.

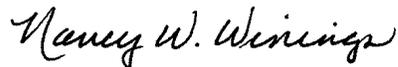
Certifications

I hereby certify, to the best of my knowledge and judgment, that:

- (1.) These policy forms provide no additional nonforfeiture benefits and none are required by the NAIC Standard Nonforfeiture Law or the NAIC Universal Life Insurance Model Regulation.
- (2.) The valuation standards used in establishing reserves for this policy form comply with the NAIC Standard Valuation Law, the NAIC Universal Life Insurance Model Regulation, and all applicable NAIC Actuarial Guidelines.
- (3.) No assumptions or provisions unfairly discriminate in availability, rates, benefits, or in any other way for prospective insureds of the same class, equal expectation of life, and degree of risk hazard.
- (4.) The rider charges are reasonable and self-supporting.

Statement of Professional Qualifications

I, Nancy W. Winings, am a Designated Representative of Life Insurance Company of the Southwest and I am a member in good standing of the American Academy of Actuaries.



Nancy W. Winings FSA MAAA
April 27, 2009

Actuarial Memorandum
Other Insured Rider Policy Form 8535(0707)
Attached To Base Policy Forms 8733(0709) and 8734(0709)

Appendix 1: Minimum Monthly Premium

Rates Per Thousand

Other Insured Rider Coverage

PNT = Preferred Non-tobacco

SNT = Standard Non-tobacco

PT = Preferred Tobacco

ST = Standard Tobacco

Issue Age	Unisex			
	PNT	SNT	PT	ST
0		0.07		
1		0.07		
2		0.07		
3		0.07		
4		0.07		
5		0.07		
6		0.07		
7		0.08		
8		0.08		
9		0.08		
10		0.09		
11		0.09		
12		0.10		
13		0.11		
14		0.12		
15		0.13		
16		0.13		
17		0.13		
18		0.13		
19		0.13		
20	0.12	0.13	0.17	0.18
21	0.12	0.13	0.17	0.18
22	0.12	0.13	0.17	0.18
23	0.12	0.13	0.18	0.18
24	0.12	0.13	0.18	0.18
25	0.12	0.13	0.18	0.18
26	0.12	0.13	0.18	0.19
27	0.12	0.13	0.18	0.19
28	0.13	0.14	0.19	0.20
29	0.13	0.14	0.19	0.20
30	0.13	0.14	0.20	0.21
31	0.13	0.14	0.22	0.23
32	0.13	0.15	0.23	0.24
33	0.13	0.16	0.24	0.25
34	0.13	0.17	0.24	0.27
35	0.13	0.18	0.25	0.30
36	0.14	0.19	0.28	0.32
37	0.15	0.21	0.30	0.35
38	0.16	0.22	0.32	0.37
39	0.17	0.24	0.36	0.42
40	0.20	0.26	0.39	0.45
41	0.21	0.28	0.41	0.50
42	0.21	0.29	0.44	0.54
43	0.22	0.31	0.49	0.60

Actuarial Memorandum
Other Insured Rider Policy Form 8535(0707)
Attached To Base Policy Forms 8733(0709) and 8734(0709)

Appendix 1: Minimum Monthly Premium

Rates Per Thousand

Other Insured Rider Coverage

PNT = Preferred Non-tobacco

SNT = Standard Non-tobacco

PT = Preferred Tobacco

ST = Standard Tobacco

Issue Age	Unisex			
	PNT	SNT	PT	ST
44	0.25	0.33	0.52	0.65
45	0.26	0.36	0.55	0.71
46	0.27	0.39	0.61	0.77
47	0.31	0.41	0.67	0.83
48	0.33	0.45	0.73	0.90
49	0.35	0.49	0.81	0.97
50	0.38	0.53	0.87	1.05
51	0.41	0.57	0.92	1.14
52	0.43	0.63	0.97	1.23
53	0.47	0.68	1.04	1.33
54	0.52	0.74	1.10	1.42
55	0.56	0.80	1.18	1.53
56	0.62	0.89	1.29	1.66
57	0.69	0.96	1.41	1.80
58	0.75	1.06	1.51	1.94
59	0.83	1.17	1.62	2.06
60	0.89	1.26	1.74	2.22
61	0.97	1.38	1.86	2.38
62	1.06	1.51	1.99	2.56
63	1.18	1.67	2.16	2.79
64	1.31	1.85	2.35	3.03
65	1.45	2.04	2.56	3.30
66	1.63	2.26	2.77	3.58
67	1.82	2.49	3.02	3.87
68	2.04	2.75	3.30	4.19
69	2.29	3.03	3.60	4.53
70	2.56	3.35	3.90	4.89
71	2.90	3.70	4.28	5.26
72	3.26	4.08	4.67	5.67
73	3.68	4.52	5.09	6.09
74	4.15	4.99	5.55	6.55
75	4.65	5.50	6.03	7.00
76	4.99	5.98	6.50	7.54
77	5.35	6.39	6.97	8.07
78	5.74	6.79	7.47	8.64
79	6.11	7.19	7.97	9.20
80	6.51	7.59	8.48	9.78
81	7.18	8.21	9.11	10.40
82	7.95	8.92	9.82	11.10
83	8.86	9.73	10.70	11.94
84	9.90	10.66	11.73	12.91
85	11.13	11.72	12.95	14.04

Actuarial Memorandum
Other Insured Rider Policy Form 8535(0707)
Attached To Base Policy Forms 8733(0709) and 8734(0709)

Appendix 2: Guaranteed Select
Monthly Cost of Insurance Rates
Per Thousand of Other Insured Rider Coverage

PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Rates are the same over all 5 policy years of the select period

Issue Age	Unisex			
	PNT	SNT	PT	ST
0		0.07		
1		0.07		
2		0.06		
3		0.06		
4		0.06		
5		0.06		
6		0.06		
7		0.06		
8		0.06		
9		0.06		
10		0.06		
11		0.06		
12		0.07		
13		0.08		
14		0.09		
15		0.10		
16		0.11		
17		0.12		
18		0.12		
19		0.12		
20	0.10	0.11	0.16	0.16
21	0.10	0.11	0.15	0.15
22	0.10	0.11	0.16	0.16
23	0.10	0.11	0.16	0.16
24	0.10	0.11	0.16	0.16
25	0.10	0.11	0.16	0.16
26	0.11	0.11	0.16	0.16
27	0.11	0.11	0.16	0.16
28	0.11	0.11	0.16	0.16
29	0.11	0.12	0.16	0.16
30	0.11	0.12	0.16	0.16
31	0.11	0.12	0.17	0.17
32	0.11	0.12	0.18	0.18
33	0.11	0.13	0.19	0.19
34	0.12	0.13	0.20	0.20
35	0.12	0.14	0.21	0.21
36	0.13	0.15	0.23	0.23
37	0.14	0.16	0.25	0.25
38	0.15	0.17	0.27	0.27
39	0.15	0.18	0.29	0.29
40	0.16	0.19	0.32	0.32
41	0.17	0.21	0.35	0.35
42	0.18	0.22	0.39	0.39
43	0.19	0.24	0.43	0.43

Actuarial Memorandum
Other Insured Rider Policy Form 8535(0707)
Attached To Base Policy Forms 8733(0709) and 8734(0709)

Appendix 2: Guaranteed Select
Monthly Cost of Insurance Rates
Per Thousand of Other Insured Rider Coverage

PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Rates are the same over all 5 policy years of the select period

Issue Age	Unisex			
	PNT	SNT	PT	ST
44	0.21	0.26	0.46	0.47
45	0.23	0.27	0.49	0.51
46	0.24	0.30	0.53	0.56
47	0.26	0.32	0.59	0.60
48	0.29	0.35	0.65	0.66
49	0.31	0.38	0.71	0.71
50	0.33	0.41	0.77	0.78
51	0.35	0.44	0.82	0.85
52	0.38	0.49	0.86	0.92
53	0.42	0.54	0.91	1.01
54	0.45	0.59	0.97	1.11
55	0.50	0.64	1.04	1.22
56	0.55	0.71	1.14	1.32
57	0.61	0.77	1.25	1.44
58	0.66	0.86	1.33	1.56
59	0.73	0.94	1.44	1.68
60	0.79	1.03	1.54	1.83
61	0.86	1.13	1.65	1.99
62	0.94	1.25	1.76	2.18
63	1.04	1.39	1.92	2.39
64	1.16	1.55	2.09	2.61
65	1.29	1.72	2.27	2.86
66	1.44	1.90	2.47	3.12
67	1.61	2.09	2.69	3.38
68	1.81	2.30	2.93	3.65
69	2.03	2.54	3.19	3.95
70	2.27	2.80	3.46	4.27
71	2.57	3.11	3.80	4.60
72	2.90	3.46	4.14	4.94
73	3.27	3.87	4.52	5.32
74	3.68	4.32	4.93	5.73
75	4.13	4.81	5.35	6.14
76	4.44	5.29	5.77	6.62
77	4.76	5.65	6.20	7.10
78	5.09	6.02	6.63	7.61
79	5.42	6.38	7.09	8.12
80	5.77	6.74	7.53	8.66
81	6.38	7.30	8.09	9.23
82	7.06	7.92	8.73	9.87
83	7.86	8.64	9.51	10.61
84	8.80	9.47	10.42	11.47
85	9.90	10.42	11.51	12.48

Actuarial Memorandum
Other Insured Rider Policy Form 8535(0707)
Attached To Base Policy Forms 8733(0709) and 8734(0709)

Appendix 2a: Guaranteed Ultimate
Monthly Cost Of Insurance Rates Per Thousand

Other Insured Rider Coverage

PNT = Preferred Non-tobacco

SNT = Standard Non-tobacco

PT = Preferred Tobacco

ST = Standard Tobacco

Attained Age	Unisex			
	PNT	SNT	PT	ST
5		0.07		
6		0.07		
7		0.06		
8		0.06		
9		0.06		
10		0.06		
11		0.07		
12		0.07		
13		0.08		
14		0.10		
15		0.11		
16		0.11		
17		0.12		
18		0.12		
19		0.13		
20		0.13		
21		0.13		
22		0.13		
23		0.12		
24		0.12		
25	0.12	0.12	0.16	0.16
26	0.12	0.12	0.16	0.16
27	0.12	0.12	0.16	0.16
28	0.12	0.12	0.16	0.16
29	0.12	0.12	0.16	0.16
30	0.12	0.12	0.17	0.17
31	0.12	0.12	0.17	0.17
32	0.12	0.12	0.18	0.18
33	0.13	0.13	0.19	0.19
34	0.13	0.13	0.20	0.20
35	0.14	0.14	0.21	0.21
36	0.15	0.15	0.23	0.23
37	0.16	0.16	0.25	0.25
38	0.17	0.17	0.27	0.27
39	0.18	0.18	0.30	0.30
40	0.19	0.19	0.33	0.33
41	0.21	0.21	0.36	0.36
42	0.23	0.23	0.40	0.40
43	0.24	0.24	0.43	0.43
44	0.26	0.26	0.47	0.47
45	0.28	0.28	0.52	0.52
46	0.30	0.30	0.56	0.56
47	0.33	0.33	0.61	0.61
48	0.35	0.35	0.66	0.66
49	0.38	0.38	0.72	0.72
50	0.41	0.41	0.78	0.78
51	0.45	0.45	0.85	0.85
52	0.49	0.49	0.93	0.93

Actuarial Memorandum
Other Insured Rider Policy Form 8535(0707)
Attached To Base Policy Forms 8733(0709) and 8734(0709)

Appendix 2a: Guaranteed Ultimate
Monthly Cost Of Insurance Rates Per Thousand
Other Insured Rider Coverage

PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Attained Age	Unisex			
	PNT	SNT	PT	ST
53	0.54	0.54	1.02	1.02
54	0.60	0.60	1.12	1.12
55	0.65	0.65	1.22	1.22
56	0.72	0.72	1.33	1.33
57	0.79	0.79	1.44	1.44
58	0.86	0.86	1.56	1.56
59	0.94	0.94	1.69	1.69
60	1.03	1.03	1.83	1.83
61	1.14	1.14	2.00	2.00
62	1.26	1.26	2.18	2.18
63	1.40	1.40	2.39	2.39
64	1.55	1.55	2.62	2.62
65	1.72	1.72	2.87	2.87
66	1.91	1.91	3.12	3.12
67	2.10	2.10	3.38	3.38
68	2.31	2.31	3.66	3.66
69	2.54	2.54	3.96	3.96
70	2.81	2.81	4.29	4.29
71	3.11	3.11	4.66	4.66
72	3.47	3.47	5.10	5.10
73	3.87	3.87	5.58	5.58
74	4.32	4.32	6.11	6.11
75	4.81	4.81	6.68	6.68
76	5.32	5.32	7.27	7.27
77	5.86	5.86	7.87	7.87
78	6.43	6.43	8.48	8.48
79	7.05	7.05	9.12	9.12
80	7.73	7.73	9.81	9.81
81	8.51	8.51	10.58	10.58
82	9.38	9.38	11.44	11.44
83	10.36	10.36	12.38	12.38
84	11.42	11.42	13.37	13.37
85	12.55	12.55	14.38	14.38
86	13.72	13.72	15.39	15.39
87	14.92	14.92	16.43	16.43
88	16.16	16.16	17.51	17.51
89	17.45	17.45	18.60	18.60
90	18.79	18.79	19.73	19.73
91	20.24	20.24	20.92	20.92
92	21.83	21.83	22.28	22.28
93	23.72	23.72	24.00	24.00
94	26.25	26.25	26.35	26.35
95	30.02	30.02	30.02	30.02
96	36.23	36.23	36.23	36.23
97	47.14	47.14	47.14	47.14
98	66.18	66.18	66.18	66.18
99	90.91	90.91	90.91	90.91

Actuarial Memorandum
Other Insured Rider Policy Form 8535(0707)
Attached To Base Policy Forms 8733(0709) and 8734(0709)

Appendix 3: Current Select
Monthly Cost of Insurance Rates
Per Thousand of Other Insured Rider Coverage

PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Rates are the same over first 5 policy years as the guaranteed and then are the same as each other over the next 10 policy years

Policy Years 6-15:

Issue Age	Unisex			
	PNT	SNT	PT	ST
0		0.06		
1		0.06		
2		0.06		
3		0.06		
4		0.06		
5		0.06		
6		0.06		
7		0.07		
8		0.08		
9		0.09		
10		0.10		
11		0.10		
12		0.11		
13		0.11		
14		0.11		
15		0.11		
16		0.11		
17		0.11		
18		0.11		
19		0.11		
20	0.11	0.11	0.16	0.16
21	0.11	0.11	0.16	0.16
22	0.11	0.11	0.16	0.16
23	0.11	0.11	0.16	0.16
24	0.11	0.12	0.16	0.16
25	0.11	0.12	0.16	0.16
26	0.12	0.12	0.17	0.17
27	0.12	0.12	0.18	0.18
28	0.12	0.13	0.19	0.19
29	0.12	0.13	0.20	0.20
30	0.12	0.14	0.21	0.21
31	0.12	0.15	0.23	0.23
32	0.13	0.16	0.23	0.25
33	0.13	0.17	0.25	0.27
34	0.13	0.18	0.24	0.29
35	0.13	0.18	0.24	0.32
36	0.14	0.20	0.27	0.34
37	0.15	0.21	0.31	0.39
38	0.16	0.23	0.33	0.41
39	0.16	0.25	0.36	0.45
40	0.19	0.27	0.38	0.49
41	0.20	0.29	0.40	0.54
42	0.20	0.31	0.44	0.59
43	0.21	0.32	0.48	0.66

Actuarial Memorandum
Other Insured Rider Policy Form 8535(0707)
Attached To Base Policy Forms 8733(0709) and 8734(0709)

Appendix 3: Current Select
Monthly Cost of Insurance Rates
Per Thousand of Other Insured Rider Coverage

PNT = Preferred Non-tobacco
SNT = Standard Non-tobacco
PT = Preferred Tobacco
ST = Standard Tobacco

Rates are the same over first 5 policy years as the guaranteed and then are the same as each other over the next 10 policy years

Policy Years 6-15:

Issue Age	Unisex			
	PNT	SNT	PT	ST
44	0.23	0.35	0.51	0.71
45	0.25	0.37	0.54	0.78
46	0.27	0.40	0.60	0.84
47	0.29	0.43	0.65	0.90
48	0.32	0.47	0.71	0.97
49	0.34	0.51	0.78	1.05
50	0.36	0.55	0.85	1.13
51	0.40	0.59	0.90	1.22
52	0.42	0.65	0.95	1.31
53	0.45	0.71	1.01	1.42
54	0.50	0.76	1.07	1.50
55	0.54	0.83	1.15	1.59
56	0.60	0.92	1.25	1.73
57	0.68	0.99	1.37	1.87
58	0.73	1.10	1.47	2.00
59	0.80	1.20	1.58	2.13
60	0.87	1.30	1.70	2.26
61	0.95	1.42	1.81	2.41
62	1.03	1.54	1.94	2.57
63	1.15	1.70	2.11	2.79
64	1.28	1.87	2.30	3.02
65	1.41	2.06	2.50	3.27
66	1.59	2.28	2.71	3.54
67	1.77	2.52	2.95	3.82
68	1.99	2.78	3.22	4.15
69	2.24	3.07	3.51	4.48
70	2.50	3.40	3.81	4.83
71	2.83	3.74	4.18	5.20
72	3.19	4.10	4.56	5.60
73	3.60	4.51	4.97	6.02
74	4.05	4.95	5.42	6.46
75	4.55	5.42	5.89	6.90
76	4.88	5.87	6.35	7.42
77	5.23	6.25	6.81	7.94
78	5.60	6.64	7.30	8.49
79	5.98	7.02	7.79	9.02
80	6.36	7.41	8.29	9.58
81	7.01	8.03	8.90	10.17
82	7.78	8.72	9.59	10.85
83	8.66	9.51	10.46	11.66
84	9.68	10.42	11.47	12.62
85	10.88	11.46	12.66	13.73

Actuarial Memorandum
Other Insured Rider Policy Form 8535(0707)
Attached To Base Policy Forms 8733(0709) and 8734(0709)

Appendix 3a: Current Ultimate
Monthly Cost Of Insurance Rates Per Thousand

Other Insured Rider Coverage

PNT = Preferred Non-tobacco

SNT = Standard Non-tobacco

PT = Preferred Tobacco

ST = Standard Tobacco

Attained Age	Unisex			
	PNT	SNT	PT	ST
15		0.10		
16		0.11		
17		0.11		
18		0.11		
19		0.11		
20		0.11		
21		0.11		
22		0.11		
23		0.11		
24		0.11		
25		0.11		
26		0.10		
27		0.10		
28		0.09		
29		0.09		
30		0.09		
31		0.08		
32		0.08		
33		0.08		
34		0.08		
35	0.07	0.09	0.10	0.16
36	0.07	0.09	0.11	0.17
37	0.07	0.09	0.12	0.19
38	0.07	0.10	0.13	0.20
39	0.08	0.10	0.14	0.22
40	0.08	0.11	0.16	0.24
41	0.09	0.12	0.17	0.26
42	0.09	0.12	0.19	0.29
43	0.10	0.13	0.20	0.31
44	0.11	0.15	0.22	0.34
45	0.12	0.16	0.25	0.37
46	0.13	0.18	0.28	0.41
47	0.15	0.20	0.30	0.46
48	0.16	0.21	0.34	0.50
49	0.17	0.23	0.38	0.56
50	0.19	0.25	0.41	0.61
51	0.21	0.28	0.45	0.68
52	0.24	0.31	0.50	0.74
53	0.26	0.33	0.55	0.81
54	0.29	0.36	0.61	0.88
55	0.31	0.39	0.67	0.97
56	0.34	0.43	0.72	1.03
57	0.37	0.47	0.78	1.11

Actuarial Memorandum
Other Insured Rider Policy Form 8535(0707)
Attached To Base Policy Forms 8733(0709) and 8734(0709)

Appendix 3a: Current Ultimate
Monthly Cost Of Insurance Rates Per Thousand

Other Insured Rider Coverage

PNT = Preferred Non-tobacco

SNT = Standard Non-tobacco

PT = Preferred Tobacco

ST = Standard Tobacco

Attained Age	Unisex			
	PNT	SNT	PT	ST
58	0.41	0.51	0.84	1.18
59	0.45	0.56	0.91	1.27
60	0.50	0.61	0.98	1.37
61	0.55	0.68	1.06	1.47
62	0.61	0.73	1.15	1.57
63	0.66	0.80	1.23	1.68
64	0.74	0.88	1.32	1.79
65	0.81	0.96	1.41	1.91
66	0.88	1.04	1.53	2.05
67	0.97	1.14	1.66	2.21
68	1.06	1.25	1.78	2.38
69	1.17	1.37	1.93	2.56
70	1.29	1.50	2.08	2.75
71	1.44	1.67	2.27	2.99
72	1.59	1.84	2.49	3.25
73	1.77	2.05	2.71	3.54
74	1.97	2.26	2.96	3.84
75	2.20	2.51	3.23	4.18
76	2.43	2.76	3.50	4.52
77	2.69	3.05	3.80	4.88
78	2.98	3.36	4.12	5.27
79	3.30	3.71	4.47	5.69
80	3.65	4.08	4.83	6.13
81	4.02	4.49	5.21	6.58
82	4.43	4.92	5.60	7.06
83	4.86	5.38	6.01	7.53
84	5.34	5.88	6.44	8.04
85	5.87	6.44	6.91	8.58
86	6.53	7.02	7.50	9.13
87	7.26	7.65	8.12	9.69
88	8.07	8.31	8.78	10.24
89	8.92	8.99	9.46	10.79
90	9.63	9.70	10.18	11.31
91	10.37	10.47	10.93	11.86
92	11.12	11.27	11.68	12.40
93	11.89	12.09	12.40	12.89
94	12.66	12.92	13.08	13.34
95	13.76	13.76	13.76	13.76
96	14.65	14.65	14.65	14.65
97	15.56	15.56	15.56	15.56
98	16.49	16.49	16.49	16.49
99	17.45	17.45	17.45	17.45

**Actuarial Memorandum
Overloan Protection Rider
Policy Form 8597(0708)
Attached to Base Policy Form 8733(0709)**

Scope and Purpose

This actuarial memorandum has been prepared to support the establishment of unisex rates for rider policy form 8597(0606) to be used with base policy form 8733(0709). This document has been prepared for the purpose of demonstrating compliance with regulatory authority and may not be appropriate for other purposes.

Rider Description

This rider is designed to be attached to policy forms 8733(0709) which is a unisex versions of an indexed flexible premium adjustable benefit life insurance policy.

Benefits

This rider, when exercised, will prevent the policy from lapsing due to a large outstanding policy loan. The following conditions must be satisfied in order for this option to be exercised. We will notify the policyholder when the conditions have been met.

- The insured's attained age must be greater than or equal to 75.
- The policy must have been in force for at least fifteen years.
- The outstanding debt on the policy must exceed the total face amount of the policy.
- The outstanding debt divided by the excess of the accumulated value over the surrender charge must exceed 95%.

At the time of exercise, the policy will be modified as described below.

- The account value of any outstanding indexed crediting segments will be increased as necessary such that the annual index earnings for the elapsed term of each segment is at least equal to 2.5%.
- All account value will be transferred from the fixed and indexed crediting strategies to the basic strategy.
- No further transfers may be made from the basic strategy to any other interest crediting strategy except as required for the initiation of a fixed net cost loan.
- Any policy loan that is not a fixed net cost loan will be rewritten as a fixed net cost loan.
- No additional loans may be taken except as required to capitalize loan interest due.
- The accumulated value held in the loan collateral account will be credited with interest at a rate equal to the loan interest rate;
- No additional premiums may be paid.
- Withdrawals will no longer be permitted.
- Monthly deductions will cease.
- Any additional benefit riders which have additional charges, except for the additional protection benefit rider, will be terminated.
- The policy death benefit option will be switched to option A if option B is in effect and no further change in the death benefit option will be permitted. There will be no adjustment to the face amount of the policy as a result of this change.

Premium

When this rider is exercised, there will be a one time exercise charge assessed against the accumulated value of the policy. The Exercise Charge is a percentage of the contract's Accumulated Value. The Exercise Charges are shown in the appendix. If the percentage multiplied by the contract's Accumulated Value is greater than 95% of the remaining Cash Surrender Value, then the Exercise Charge will be 95% of the remaining Cash Surrender Value. The exercise charge has been calculated as follows:

**Actuarial Memorandum
Overloan Protection Rider
Policy Form 8597(0708)
Attached to Base Policy Form 8733(0709)**

Exercise Charge = Accumulated Value $\cdot C_x$

$$C_x = \frac{(g_x - 1) \cdot (1 \div f_x)}{1 + (g_x - 1) \cdot (1 \div f_x)}, \text{ where}$$

g_x is the corridor factor at attained age x for policies using the guideline premium test and
 f_x is the corridor factor at attained age x for policies using the cash value accumulation test.

Nonforfeiture Benefits

This rider provides no additional nonforfeiture benefits, and none are required by the NAIC Standard Nonforfeiture Law or the NAIC Universal Life Insurance Model Regulation.

Certifications

I hereby certify, to the best of my knowledge and judgment, that:

- (1.) This policy form provides no additional nonforfeiture benefits and none are required by the NAIC Standard Nonforfeiture Law or the NAIC Universal Life Insurance Model Regulation.
- (2.) The valuation standards used in establishing reserves for this policy form comply with the NAIC Standard Valuation Law, the NAIC Universal Life Insurance Model Regulation, and all applicable NAIC Actuarial Guidelines.
- (3.) No assumptions or provisions unfairly discriminate in availability, rates, benefits, or in any other way for prospective insureds of the same class, equal expectation of life, and degree of risk hazard.
- (4.) The rider charges are reasonable and self-supporting.

Statement of Professional Qualifications

I, Nancy W. Winings, am a Designated Representative of Life Insurance Company of the Southwest and I am a member in good standing of the American Academy of Actuaries.

Nancy W. Winings

Nancy W. Winings FSA MAAA
April 27, 2009

**Actuarial Memorandum
Overloan Protection Rider
Policy Form 8597(0708)
Attached to Base Policy Form 8733(0709)**

Appendix: Exercise Charges as a Percent of Accumulated Value

Age	Rate
75	3.27%
76	3.33%
77	3.40%
78	3.45%
79	3.52%
80	3.57%
81	3.65%
82	3.70%
83	3.76%
84	3.82%
85	3.88%
86	3.91%
87	3.97%
88	4.00%
89	4.07%
90	4.10%
91	3.33%
92	2.54%
93	1.74%
94	0.88%
95	0.89%
96	0.91%
97	0.92%
98	0.94%
99+	0.97%

*Wade H. Mayo
President and CEO*

March 23, 2009

To Whom It May Concern:

This letter is to authorize **Nancy W. Winings**, 2nd Vice President – Product Development, of National Life Insurance Company, Montpelier, Vermont, as a **Designated Representative** of Life Insurance Company of the Southwest to submit product filings on their behalf.

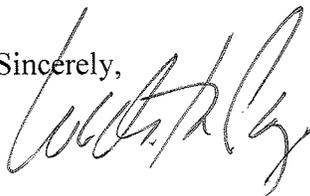
All questions and comments regarding this filing should first be addressed to Mrs. Winings. I stand ready, however, to answer for Life Insurance Company of the Southwest directly should that need arise.

Mrs. Winings may be contacted at:

National Life Insurance Company
One National Life Drive
Montpelier, Vermont 05604
Phone: 802-229-3917
Fax: 802-229-7197

Life Insurance Company of the Southwest thanks you for your consideration in this matter.

Sincerely,



Wade H. Mayo



January 16, 2009

To Whom It May Concern:

This letter is to authorize **Elizabeth MacGowan**, Vice President – Product Development, of National Life Insurance Company, Montpelier, Vermont, as a **Designated Representative** of Life Insurance Company of the Southwest to submit product filings on their behalf.

All questions and comments regarding this filing should first be addressed to Mrs. MacGowan. I stand ready, however, to answer for Life Insurance Company of the Southwest directly should that need arise.

Mrs. MacGowan may be contacted at:

National Life Insurance Company
One National Life Drive
Montpelier, Vermont 05604
Phone: 802-229-3589

Life Insurance Company of the Southwest thanks you for your consideration in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Wade H. Mayo".

Wade H. Mayo
President & Chief Executive Officer

January 16, 2009

To Whom It May Concern:

This letter is to authorize **Susan Freedom**, Policy Forms Business Analyst, of National Life Insurance Company, Montpelier, Vermont, as a **Designated Representative** of Life Insurance Company of the Southwest to submit product filings on their behalf.

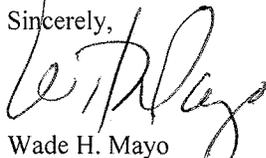
All questions and comments regarding this filing should first be addressed to Mrs. Freedom. I stand ready, however, to answer for Life Insurance Company of the Southwest directly should that need arise.

Mrs. Freedom may be contacted at:

National Life Insurance Company
One National Life Drive
Montpelier, Vermont 05604
Phone: 802-229-7387
Fax: 802-229-3743

Life Insurance Company of the Southwest thanks you for your consideration in this matter.

Sincerely,



Wade H. Mayo
President & Chief Executive Officer

January 16, 2009

To Whom It May Concern:

This letter is to authorize **Bennett E. Law**, Vice President – Policy Forms & General Services, of National Life Insurance Company, Montpelier, Vermont, as a **Designated Representative** of Life Insurance Company of the Southwest to submit product filings on their behalf.

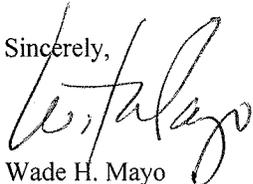
All questions and comments regarding this filing should first be addressed to Mr. Law. I stand ready, however, to answer for Life Insurance Company of the Southwest directly should that need arise.

Mr. Law may be contacted at:

National Life Insurance Company
One National Life Drive
Montpelier, Vermont 05604
Phone: 802-229-3675
Fax: 802-229-3743

Life Insurance Company of the Southwest thanks you for your consideration in this matter.

Sincerely,



Wade H. Mayo
President & Chief Executive Officer



May 7, 2009

Director, Life & Health Division
Department of Insurance
1200 West Third Street
Little Rock, AR 72201-1904

RE: Indexed Flexible Premium Adjustable Benefit Life Insurance Submission

Life Insurance Company of the Southwest
NAIC No. 0634-65528
FEIN No. 75-0953004

Form Numbers: 8733AR(0709), Indexed Flexible Premium Adjustable Benefit Life Insurance Unisex

Today we are submitting a new Indexed Flexible Premium Adjustable Benefit Life Insurance unisex policy for your consideration. This policy will be used exclusively when a unisex plan of insurance is required pursuant to the Norris decision and/or Title VII of the Civil Rights Act of 1964. This form will not replace any forms currently approved by your Department.

The submitted policy is similar to previously approved policy form 8387AR(0606), which was approved by your Department on 01/09/2007, save that form 8733AR(0709) is a Unisex Version of the policy. The submitted policy has six interest-crediting strategies with one-year strategy durations and will offer both a Fixed Net Cost Loan option and a Variable Net Cost Loan option. It will be marketed with an illustration and will be available to Insureds ages 0-85. Insureds ages 20 and above will be assigned to one of the following five rate classes: Elite Non-Tobacco, Preferred Non-Tobacco, Standard Non-Tobacco, Preferred Tobacco, or Standard Tobacco. The Standard Non-Tobacco class will be used for Insureds aged 0-19. The minimum policy size for this form is \$100,000 for individual issues. The pension initial face amount for standard rate classes is \$5,000 and for preferred rate classes is \$25,000. Flat extra substandard ratings and percentage substandard ratings may be applied to the policy. The proposed effective date for the submitted forms is July 1, 2009.

Six interest-crediting strategies will be made available under the submitted Indexed Flexible Premium Adjustable Benefit policy. Accumulated Value in the policy will be apportioned into one or more segments of the interest crediting strategies.

Basic Strategy

All Net Premiums will be paid into the Basic Strategy. Interest will be credited to Accumulated Value in this strategy on a daily basis at a rate not less than 2.50% per year. On the 21st day of each month, the Accumulated Value that is in excess of a Basic Strategy Minimum Value, will be transferred to one or more of the following five interest crediting strategies.

Fixed-Term Strategy

Each transfer of Accumulated Value made to this strategy will create a distinct Fixed-Term Segment which will have a duration of one year. Interest will be credited to the Accumulated Value in each Fixed-Term Segment on a daily basis at a rate not less than 2.50% per year. Accumulated Value cannot be transferred out of any Fixed-Term Segment prior to the end of its one-year duration and at that time will be automatically transferred to the Basic Strategy.

Indexed Strategies

Four Indexed Strategies are made available under this policy. Each transfer of Accumulated Value made to an Indexed Strategy creates a distinct Indexed Segment which will have a duration of one year. Index Earnings will be credited to the Accumulated Value in each segment at the end of the crediting period. Each Indexed Segment will have a Participation Rate and an Index Earnings Cap.

Indexed Strategies 1, 2, and 3 (Point-to-Point). Index Earnings will be credited to Accumulated Value in each Indexed Segment of these three Indexed Strategies at the end of the crediting period based on the performance of the Index on such day. Indexed Strategy 2 will feature a higher Participation Rate and a lower Index Earnings Cap than that of Indexed Strategy 1. Indexed Strategy 3 will feature a lower Participation Rate than either Indexed Strategies 1 and 2 and will guarantee no Index Earnings Cap.

Indexed Strategy 4 (Point-to-Average). Index Earnings will be credited to Accumulated Value in each Indexed Segment of Indexed Strategy 4 at the end of the crediting period based on the performance of the Index averaged throughout the preceding twelve months. Indexed Strategy 4 will calculate the Index Growth differently than the other three Indexed Strategies, and it will guarantee no Index Earnings Cap.

Policy Loan Options

The submitted policy will offer both a Fixed Net Cost Loan option and a Variable Net Cost Loan option. The loan option is selected at the time a loan is taken, and all outstanding loans use the same loan option. The Owner may change the loan option only on a Policy Anniversary. The Fixed Net Cost Loan option will use a Loan Collateral Account, and Accumulated Value will be removed from the Interest Crediting Strategies and held in the Loan Crediting Strategies and therefore will not use a Loan Collateral Account.

The Flesch Readability Score for the submitted form is:

8733AR(0709) Indexed Flexible Premium Adjustable Benefit Life 72.1
Insurance Unisex Policy

Also included with this submission are the following materials:

- Actuarial Memorandums in support of the submitted forms;
- Illustration Actuary and Responsible Officer Certifications;
- Sample Annual Report and sample NAIC-compliant Illustration;
- Any required Certifications or checklists;
- Actuarial Memorandum and revised rates for the previously approved Additional Protection Benefit Rider, form 8536 (noted in the table below) in support of the revised rates;

- Actuarial Memorandum and revised rates for the previously approved Balance Sheet Benefit Rider, form 8459 (noted in table below) in support of the revised rates;
- Actuarial Memorandum and revised rates for previously approved Overloan Protection Rider, form 8597 (noted in table below) in support of the revised rates.
- Actuarial Memorandum and revised rates for the previously approved Other Insured Rider, form 8535 (noted in table below) in support of the revised rates.

We would also like to extend the use of a number of other riders and endorsements, previously approved by your Department, for use with the policy submitted today. Those forms and their approval dates are presented in the table below:

Rider/Endorsement Name	Form Number	Approval Date
Accelerated Benefits Rider 1 (Terminal)	8052(0798)	09/01/1998
Accelerated Benefits Rider 2 (Cronic)	8095AR(0399)	04/04/2000
Accelerated Benefits Rider 3 (Critical)	8165(0703)	09/18/2003
Accidental Death Benefit Rider	8050(0798)	09/01/1998
Additional Protection Benefit Rider – Unisex	8536AR(0707)	09/27/2007
Aircraft Limitation Rider	8516(0707)	09/27/2007
Aircraft Limitation Rider – Military	8517(0707)	09/27/2007
Balance Sheet Benefit Rider	8459(0606)	01/09/2007
Children’s Term Rider	8056(0798)	09/01/1998
Disability Income Rider – 2 Year	8054(0798)	09/01/1998
Disability Income Rider – 5 Year	8065(0798)	09/01/1998
Extension of Benefits Rider	8097AR(0899)	01/22/2003
Guaranteed Insurability Rider	8051(0798)	09/01/1998
Long Term Care Insurance Rider (CCP)	8096AR(0899)	01/22/2003
Other Insured Rider – Unisex	8535(0707)	09/27/2007
Overloan Protection Rider	8597(0708)	04/03/2008
Qualified Plan Exchange Privilege Rider	8518(0707)	09/27/2007
Unemployment Rider	8058(0798)	09/01/1998
Waiver of Target Premium Rider	8053(0798)	09/01/1998
Limitation of Liability Endorsement	8070(0798)	09/01/1998
Exclusion Endorsement	8071(0798)	09/01/1998
No Lapse Guarantee Rider -- (FILING CONCURRENTLY UNDER SEPARATE COVER)	8744(0709)	

We appreciate your consideration of this submission. If you have any questions regarding this filing, please contact me by phone at 802-229-7387 or by Email at spredom@nationallife.com.

Sincerely,



Susan C.B. Freedom
Policy Forms Business Analyst

CERTIFICATION
STATE OF ARKANSAS

Re: 8733AR(0709), Equity-Indexed Flexible Premium Adjustable Benefit Life Insurance.

I, Bennett E. Law, certify for Life Insurance Company of the Southwest that the forms referenced above are in compliance with Regulation 34 published by the Arkansas Insurance Department.

Life Insurance Company of the Southwest



Bennett E. Law
Designated Representative

05/05/2009
Date

Arkansas Certification

Re: **8733AR(0709)**, Equity-Indexed Flexible Premium Adjustable Benefit Life Insurance

I, Bennett E. Law, certify for Life Insurance Company of the Southwest, headquartered in Montpelier, Vermont, that the forms referenced above meet the provisions of Regulation 19§10B, as well as all applicable requirements of the Arkansas Insurance Department.

I further certify that the forms referenced above are in compliance with Regulation 49 concerning Life & Health Guaranty Association Notices and Arkansas Insurance Code 23-79-138 concerning required policy information.

Signed on behalf of Life Insurance Company of the Southwest, by



Bennett E. Law
Designated Representative

05/05/2009

Date