

SERFF Tracking Number: AMGN-126222054 State: Arkansas  
Filing Company: American General Life and Accident Insurance Company State Tracking Number: 42909  
Company Tracking Number: AGLA 08TRM REV0709, PGS 3, 10/11  
TOI: L04I Individual Life - Term Sub-TOI: L04I.103 Renewable - Single Life - Fixed/Indeterminate Premium  
Product Name: AGLA 08TRM REV0709 Insert Page Filing  
Project Name/Number: AGLA 08TRM REV0709 Insert Page Filing/AGLA 08TRM REV0709, Pgs 3, 10/11

## Filing at a Glance

Company: American General Life and Accident Insurance Company

Product Name: AGLA 08TRM REV0709 Insert SERFF Tr Num: AMGN-126222054 State: Arkansas

Page Filing

TOI: L04I Individual Life - Term

SERFF Status: Closed-Approved- State Tr Num: 42909  
Closed

Sub-TOI: L04I.103 Renewable - Single Life -  
Fixed/Indeterminate Premium

Co Tr Num: AGLA 08TRM State Status: Approved-Closed  
REV0709, PGS 3, 10/11

Filing Type: Form

Author: Marilyn Ellis

Reviewer(s): Linda Bird

Disposition Date: 07/21/2009

Date Submitted: 07/10/2009

Disposition Status: Approved-  
Closed

Implementation Date Requested:

Implementation Date:

State Filing Description:

## General Information

Project Name: AGLA 08TRM REV0709 Insert Page Filing

Status of Filing in Domicile: Authorized

Project Number: AGLA 08TRM REV0709, Pgs 3, 10/11

Date Approved in Domicile: 07/02/2009

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: 07/21/2009

Explanation for Other Group Market Type:

State Status Changed: 07/21/2009

Deemer Date:

Created By: Marilyn Ellis

Submitted By: Marilyn Ellis

Corresponding Filing Tracking Number: AGLA  
08TRM REV0709, Pgs 3, 10/11

Filing Description:

Form Number Description Replaces Previously Approved

AGLA 08TRM REV0709, Pg 3 Policy Insert Page AGLA 08TRM, Pg 3 1/11/08

AGLA 08TRMS REV0709, Pg 10/11 Policy Insert Page AGLA 08TRMS, Pg 10/11 1/11/08

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The above policy insert pages are being submitted for your consideration and approval. Each replaces a previously approved insert page as shown above.

The above insert pages will be used with individual, nonparticipating Adjustable Premium Term Life Insurance Policy AGLA 08TRM, previously approved on January 11, 2008. The enclosed insert pages differ from the previous version in the following ways:

1. The Special Conversion Expiry Date provision on Page 3A has been rewritten.

The John Doe information on the Policy Schedule is for the following specification:  
Male, Age 35, \$100,000 Face Amount and Policy Date of 12/01/2007.

2. The interest rate cited in the Interest provision on Page 10 has been changed to 2%.  
3. The Settlement Options Tables on Page 11 have been updated to reflect the revised settlement option interest rate.

The Flesch readability scores for the insert pages are as follows

Form Number Flesch Scores  
AGLA 08TRM REV0709, Pg 3 59.1  
AGLA 08TRMS REV0709, Pg 10/11 59.1

## Company and Contact

### Filing Contact Information

Kathryn Mitchell, Manager kathryn\_mitchell@aigag.com  
American General Center 615-749-1139 [Phone]  
Mail Stop 456S 615-749-2521 [FAX]  
Nashville, TN 37250-0001

### Filing Company Information

American General Life and Accident Insurance CoCode: 66672 State of Domicile: Tennessee  
Company  
American General Center Group Code: 12 Company Type:

SERFF Tracking Number: AMGN-126222054 State: Arkansas  
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Nashville, TN 37250-0001 Group Name: AIG State ID Number:  
(615) 749-1139 ext. [Phone] FEIN Number: 62-0306330

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**Filing Fees**

Fee Required? Yes  
Fee Amount: \$40.00  
Retaliatory? No  
Fee Explanation: 2 forms x \$20 = \$40.00  
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American General Life and Accident Insurance Company	\$40.00	07/10/2009	29121844





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Product Name: AGLA 08TRM REV0709 Insert Page Filing  
 Project Name/Number: AGLA 08TRM REV0709 Insert Page Filing/AGLA 08TRM REV0709, Pgs 3, 10/11

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Statement of Variability		Yes
Form	Policy Schedule		Yes
Form	Settlement Options Page		Yes

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## Form Schedule

**Lead Form Number: AGLA 08TRM REV0709, Pgs 3, 10/11**

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	AGLA 08TRM REV0709, Pg 3	Certificate Amendmen t, Insert Page, Endorseme nt or Rider	Policy Schedule	Initial		59.100	AGLA08TRM REV0709P3.pdf
	AGLA 08TRMS REV0709, Pg 10/11	Certificate Amendmen t, Insert Page, Endorseme nt or Rider	Settlement Options Page	Initial		59.100	AGLA08TRM REV0709P10.pdf

## POLICY SCHEDULE

<b>Benefits and Premiums</b>
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<b>BASIC POLICY</b>	<b>Amount</b>	<b>Termination* Date</b>	<b>Annual* Premium</b>	<b>Premiums* Payable</b>
Adjustable Premium Term Life Insurance, Convertible and Renewable	[\$100,000]	[12-01-2017]	[\$356.00]	[10 Years]
*For the Initial Term Period. For future periods, see the "Schedule for Renewal Term Periods".				

**ADDITIONAL BENEFITS provided by Riders**

None

**Total Annual Premium:**                   [\$356.00\*]

<b>Schedule for Renewal Term Periods (For Term Life Insurance Policy)</b>
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<b>Insured's Attained Age</b>	<b>Termination Date</b>	<b>Total Current Annual Premium</b>	<b>Total Maximum Annual Premium</b>	<b>Premiums Payable</b>
45	12-01-2017	\$1,255.00	\$1,329.00	1 Year
46	12-01-2018	1,368.00	1,441.00	1 Year
47	12-01-2019	1,486.00	1,563.00	1 Year
48	12-01-2020	1,659.00	1,691.00	1 Year
49	12-01-2021	1,799.00	1,835.00	1 Year
50	12-01-2022	1,960.00	1,987.00	1 Year
51	12-01-2023	2,095.00	2,130.00	1 Year
52	12-01-2024	2,274.00	2,317.00	1 Year
53	12-01-2025	2,440.00	2,527.00	1 Year
54	12-01-2026	2,715.00	2,791.00	1 Year
55	12-01-2027	3,013.00	3,087.00	1 Year
56	12-01-2028	3,307.00	3,383.00	1 Year
57	12-01-2029	3,602.00	3,693.00	1 Year
58	12-01-2030	3,967.00	4,013.00	1 Year
59	12-01-2031	4,271.00	4,309.00	1 Year
60	12-01-2032	4,634.00	4,644.00	1 Year
61	12-01-2033	5,062.00	5,062.00	1 Year
62	12-01-2034	5,566.00	5,566.00	1 Year
63	12-01-2035	6,121.00	6,121.00	1 Year
64	12-01-2036	6,703.00	6,703.00	1 Year
65	12-01-2037	7,295.00	7,295.00	1 Year
66	12-01-2038	7,807.00	7,807.00	1 Year
67	12-01-2039	8,292.00	8,292.00	1 Year
68	12-01-2040	8,742.00	8,796.00	1 Year
69	12-01-2041	9,192.00	9,285.00	1 Year
70	12-01-2042	9,723.00	9,884.00	1 Year
71	12-01-2043	10,339.00	10,535.00	1 Year
72	12-01-2044	11,228.00	11,439.00	1 Year
73	12-01-2045	12,094.00	12,338.00	1 Year
74	12-01-2046	12,898.00	13,229.00	1 Year
75	12-01-2047	13,866.00	14,266.00	1 Year

# POLICY SCHEDULE

(Continued)

<b>Schedule for Renewal Term Periods (For Term Life Insurance Policy) (Continued)</b>
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<b>Insured's Attained Age</b>	<b>Termination Date</b>	<b>Total Current Annual Premium</b>	<b>Total Maximum Annual Premium</b>	<b>Premiums Payable</b>
76	12-01-2048	\$14,892.00	\$15,356.00	1 Year
77	12-01-2049	16,003.00	16,615.00	1 Year
78	12-01-2050	17,406.00	18,066.00	1 Year
79	12-01-2051	18,762.00	19,709.00	1 Year
80	12-01-2052	20,724.00	21,442.00	1 Year
81	12-01-2053	22,854.00	23,369.00	1 Year
82	12-01-2054	25,076.00	25,276.00	1 Year
83	12-01-2055	27,019.00	27,247.00	1 Year
84	12-01-2056	29,235.00	29,371.00	1 Year
85	12-01-2057	31,870.00	31,870.00	1 Year
86	12-01-2058	35,022.00	35,022.00	1 Year
87	12-01-2059	38,307.00	38,307.00	1 Year
88	12-01-2060	41,757.00	41,757.00	1 Year
89	12-01-2061	45,326.00	45,326.00	1 Year
90	12-01-2062	48,963.00	48,963.00	1 Year
91	12-01-2063	52,239.00	52,761.00	1 Year
92	12-01-2064	55,572.00	56,682.00	1 Year
93	12-01-2065	59,756.00	61,546.00	1 Year
94	12-01-2066	65,072.00	67,672.00	1 Year]

On the [tenth] Policy anniversary and any later Policy anniversary, We have the right to change the premium for this Policy. See the "Right to Change Premium" provision on Page 5.

[12-01-2067] is the Termination Date of the Last Renewal Term Period referred to in the "Renewal Option" provision on Page 6.

<b>Conversion Schedule</b>
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**Conversion Expiry Date:** [12-01-2015]

**Minimum Face Amount:** [\$100,000]

See "Conversion Option" provision on Page 7.

**Conversion Credit Expiry Date:** [12-01-2012]

See "Conversion Credit" provision on Page 7.

**[Special Conversion Expiry Date:** [12-01-2012]

If You convert this Policy by the Special Conversion Expiry Date; and

- (a) This Policy has Accelerated Death Benefit Rider(s) shown on the Policy Schedule for which no premium is separately stated; and
- (b) You select as a New Policy a Policy that is made available by Us for conversion which, under Our then-current rules, can have attached to it one or more Accelerated Death Benefit Riders which are identical to or substantially similar, as determined by Us, to the Accelerated Death Benefit Riders attached to this Policy, then,

We will attach to such New Policy, at Our option, either:

- (a) The identical Accelerated Death Benefit Rider(s); or
- (b) Such substantially similar Accelerated Death Benefit Rider(s).

We reserve the right, at Our sole option, to make other riders available on a similar basis, but nothing herein shall require Us to do so.]

## SETTLEMENT OPTIONS

Any amount payable under this Policy may be applied under one or more of the following Settlement Options. The payee under any Settlement Option will be the person who would have received the amount applied if a Settlement Option had not been elected.

### **OPTION ONE - PAYMENTS OF INTEREST ONLY**

Periodic payments will be made of the interest credited on the amount applied.

### **OPTION TWO - PAYMENTS OF A CHOSEN AMOUNT**

Periodic payments for the amount chosen will be made until the amount applied, together with interest credited, is paid.

### **OPTION THREE - PAYMENTS FOR A CHOSEN PERIOD**

Periodic payments will be made so that the amount applied, together with interest credited, will be paid over the period chosen. The period must be at least 5 years and not more than 30 years.

### **OPTION FOUR - PAYMENT FOR LIFE WITH A GUARANTEED PERIOD**

The amount applied will be used to provide a life annuity with a guaranteed payment period. The amount of the annuity payments per \$1,000 of the amount applied is shown in the Option Four Table on Page 11. The guaranteed payment period must be 10 or 20 years. The payee must submit proof of age satisfactory to Us.

### **OPTION FIVE - OTHER PLANS OF PAYMENTS FOR LIFE**

The amount applied will be used to provide a life annuity of any kind We issue on the date this option is elected. The amount of the annuity payments will be based on the same mortality and interest rates We then use to determine Our published rates for a single premium annuity of like kind. The payee must submit proof of age satisfactory to Us.

### **PERIODIC PAYMENTS**

Monthly, quarterly, semiannual or annual periodic payments may be selected. However, each periodic payment must be at least equal to the minimum required under Our current rules at the time payments are made.

### **INTEREST**

We guarantee interest under Settlement Options One, Two, Three and Four at the rate of 2% per year. At Our

sole discretion, We can pay or credit interest at a higher rate for such times and in such manner as We may determine.

### **ELECTION OF OPTIONS**

Settlement Options may be elected or changed:

- (a) by You, while the Insured is living; or
- (b) by the Beneficiary when the Insured dies and before any payments have been made.

Settlement Options Four and Five cannot be changed after the first payment is made.

You may request that the Policy be endorsed to prevent the Beneficiary from changing a Settlement Option You have elected. You must request this endorsement while the Insured is living.

We can require that any election, or later change of election, be endorsed on the Policy. Any election will be effective as of the date the election was signed, except that it will not apply to any payment We may make or any action We take before We record the election in Our Home Office.

### **LIMITATIONS**

We have the right to pay any amount payable under this Policy in a lump sum, rather than under a Settlement Option, if the payee is:

- (a) an assignee;
- (b) a fiduciary; or
- (c) not a natural person (such as a corporation).

All Settlement Options will be subject to Our rules at the time payments under the Option begin. These include withdrawal rights, designation of payees and evidence of age and survival.

Settlement Options cannot be assigned. To the extent permitted by law, they will be exempt from the claims of creditors.

### **DEATH OF PAYEE**

If the payee dies and We have not agreed to other arrangements, We will pay to the payee's estate:

- (a) any unpaid amount applied and accrued interest under Option One;
- (b) the discounted value of any remaining payments under Options Two and Three; or
- (c) the discounted value of any remaining guaranteed payments under Options Four and Five.

The discounted values for Options Two, Three, Four or Five will be calculated using the interest rate that was used to determine the amount of the annuity payments selected.

# SETTLEMENT OPTION TABLES

## OPTION THREE - PAYMENTS FOR A CHOSEN PERIOD Monthly Payments for each \$1,000 of Amount Applied

No. of Years Payable	Monthly Payment								
5	\$17.49	10	\$9.18	15	\$6.42	20	\$5.04	25	\$4.22
6	14.72	11	8.42	16	6.07	21	4.85	26	4.10
7	12.74	12	7.80	17	5.77	22	4.67	27	3.98
8	11.25	13	7.26	18	5.50	23	4.51	28	3.87
9	10.10	14	6.81	19	5.26	24	4.36	29	3.77
								30	3.68

**PAYMENTS OTHER THAN MONTHLY** - To determine the annual, semiannual, or quarterly payment equivalent to any given monthly payment shown above for Option Three, multiply the monthly payment by 11.84, 5.96, or 2.99, respectively.

## OPTION FOUR - PAYMENTS FOR LIFE WITH A GUARANTEED PERIOD Monthly Payment for each \$1,000 of Amount Applied

Age	Male		Female		Age	Male		Female	
	Guaranteed 10 Years	Guaranteed 20 Years	Guaranteed 10 Years	Guaranteed 20 Years		Guaranteed 10 Years	Guaranteed 20 Years	Guaranteed 10 Years	Guaranteed 20 Years
10 *	\$2.20	\$2.20	\$2.13	\$2.13	46	\$3.24	\$3.19	\$3.01	\$2.98
11	2.22	2.21	2.15	2.14	47	3.30	3.24	3.05	3.03
12	2.23	2.23	2.16	2.16	48	3.35	3.29	3.10	3.07
13	2.25	2.24	2.17	2.17	49	3.42	3.34	3.16	3.12
14	2.26	2.26	2.19	2.18	50	3.48	3.40	3.21	3.17
15	2.28	2.28	2.20	2.20	51	3.55	3.45	3.27	3.22
16	2.30	2.29	2.21	2.21	52	3.62	3.51	3.33	3.28
17	2.31	2.31	2.23	2.23	53	3.69	3.57	3.39	3.33
18	2.33	2.33	2.24	2.24	54	3.77	3.63	3.45	3.39
19	2.35	2.34	2.26	2.26	55	3.85	3.70	3.52	3.45
20	2.37	2.36	2.28	2.27	56	3.93	3.76	3.59	3.51
21	2.39	2.38	2.29	2.29	57	4.03	3.83	3.67	3.57
22	2.41	2.40	2.31	2.31	58	4.12	3.90	3.75	3.64
23	2.43	2.42	2.33	2.33	59	4.22	3.96	3.84	3.71
24	2.45	2.44	2.35	2.34	60	4.32	4.03	3.93	3.78
25	2.47	2.47	2.37	2.36	61	4.44	4.10	4.02	3.85
26	2.50	2.49	2.39	2.38	62	4.55	4.17	4.12	3.92
27	2.52	2.51	2.41	2.40	63	4.67	4.24	4.22	4.00
28	2.55	2.54	2.43	2.43	64	4.80	4.31	4.34	4.07
29	2.57	2.56	2.45	2.45	65	4.94	4.37	4.45	4.15
30	2.60	2.59	2.47	2.47	66	5.08	4.44	4.58	4.23
31	2.63	2.62	2.50	2.49	67	5.22	4.50	4.71	4.30
32	2.66	2.65	2.52	2.52	68	5.37	4.56	4.85	4.37
33	2.69	2.68	2.55	2.54	69	5.53	4.62	4.99	4.45
34	2.72	2.71	2.58	2.57	70	5.69	4.67	5.15	4.52
35	2.75	2.74	2.60	2.60	71	5.85	4.72	5.31	4.58
36	2.79	2.77	2.63	2.63	72	6.02	4.77	5.48	4.64
37	2.83	2.81	2.66	2.66	73	6.20	4.81	5.65	4.70
38	2.87	2.85	2.70	2.69	74	6.37	4.85	5.84	4.75
39	2.91	2.88	2.73	2.72	75	6.55	4.88	6.03	4.80
40	2.95	2.92	2.76	2.75	76	6.73	4.91	6.22	4.84
41	2.99	2.96	2.80	2.79	77	6.91	4.93	6.42	4.88
42	3.04	3.00	2.84	2.82	78	7.09	4.96	6.63	4.91
43	3.08	3.05	2.88	2.86	79	7.27	4.98	6.83	4.94
44	3.13	3.09	2.92	2.90	80 +	7.44	4.99	7.03	4.96
45	3.19	3.14	2.96	2.94					

**PAYMENTS OTHER THAN MONTHLY** - To determine the annual, semiannual or quarterly payment equivalent to any given monthly payment shown above for Option Four, multiply the monthly payment by 11.68, 5.98 or 2.99, respectively.

\*and under

+ monthly payments for ages above 80 will be furnished upon request

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## Supporting Document Schedules

	<b>Item Status:</b>	<b>Status Date:</b>
<p><b>Satisfied - Item:</b> Flesch Certification</p> <p><b>Comments:</b>            I have not included the R&amp;R 49 form or the Consumer Info Notice as this is an insert page filing only and these forms were sent with the original filing of policy form AGLA 08TRM.</p> <p><b>Attachments:</b>            FleschAR.pdf            R&amp;R19AR.pdf</p>		
<p><b>Bypassed - Item:</b> Application</p> <p><b>Bypass Reason:</b> Not applicable as this is an insert page filing, the application was submitted when the original filing was submitted.</p> <p><b>Comments:</b></p>		
<p><b>Satisfied - Item:</b> Statement of Variability</p> <p><b>Comments:</b></p> <p><b>Attachment:</b>            Statement of Variability in Policy Form 08TRM.pdf</p>		



**American General Life and  
Accident Insurance Company**  
American General Center  
Nashville, TN 37250-0001

**AMERICAN GENERAL LIFE AND ACCIDENT INSURANCE COMPANY**

**ARKANSAS CERTIFICATION**

Subject: AGLA 08TRM REV0709, Pg 3      Policy Insert Page  
          AGLA 08TRMS REV0709, Pg 10/11 Policy Insert Page

This is to certify that, to the best of my knowledge and belief, the above forms comply with the requirements of Ark. Stat. Ann. 66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Language Simplification Act.

A handwritten signature in black ink, reading "Kerry Kixmiller". The signature is written in a cursive, flowing style.

Kerry Kixmiller, FSA, MAAA  
Vice President

DATE: July 9, 2009



CHANGING THE WAY AMERICANS THINK ABOUT, PURCHASE AND USE LIFE INSURANCE.®



**American General Life and  
Accident Insurance Company**  
American General Center  
Nashville, TN 37250-0001

AMERICAN GENERAL LIFE AND ACCIDENT INSURANCE COMPANY

ARKANSAS CERTIFICATION

Subject: AGLA 08TRM REV0709, Pg 3      Policy Insert Page  
          AGLA 08TRMS REV0709, Pg 10/11      Policy Insert Page

This is to certify that the above form, to the best of my knowledge and belief, meets the provision of Arkansas Rule and Regulation 19 as well as all applicable requirements of the State of Arkansas Department of Insurance.

A handwritten signature in black ink, appearing to read "Kerry Kixmiller".

Kerry Kixmiller, FSA, MAAA  
Vice President

DATE: July 9, 2009



CHANGING THE WAY AMERICANS THINK ABOUT, PURCHASE AND USE LIFE INSURANCE.®

## Statement of Variability in Policy Form AGLA 08TRM

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### Benefits and Premiums

Amount	This field must be variable to reflect the amount of each coverage. The range of values is from \$5,000 - \$20,000,000. This amount is chosen by the policyholder and fixed at issue.
Termination Date	This field must be variable to reflect the termination date of the initial term period. This value is defined as the date that is the number of years of the initial term period from the policy date. The range of values is from the 12-01-2017 to 12-31-9999. For any policy date/initial term period combination, this value is fixed.
Annual Premium	This field must be variable to reflect the annual premium to be paid by the policyholder for the specified coverage. The factors that determine this value are gender, issue age, premium class, face amount, and initial term period. The range of values is from \$10 - \$1,000,000. For any factor combination, this value is fixed.
Premiums Payable	This field must be variable to reflect the number of years in the initial term period. This amount is chosen by the policyholder and fixed at issue.
Total Annual Premium	This field must be variable to reflect the total annual premium to be paid by the policyholder for all coverages. The factors that determine this value are gender, issue age, premium class, face amount for each coverage, and initial term period. The range of values is from \$10 - \$1,000,000. For any factor combination, this value is fixed.

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### Schedule for Renewal Term Periods

Insured's Attained Age	This field must be variable to reflect the insured's attained ages for each year after the end of the initial term period until age 94. For any issue age/initial term period combination, these values are fixed.
Termination Date	This field must be variable to reflect the termination date of the renewal term period. The first value is defined as one year after the Termination Date in the "Benefits and Premiums" section described above. All subsequent values are defined as one year after the prior value until the insured's attained age 94. The range of values is from the 12-01-2018 to 12-31-9999. For any policy date/initial term period combination, these values are fixed.
Total Current Annual Premium	This field must be variable to reflect the annual premiums due for each year after the end of the initial term period until age 94 on a current basis. The factors that determine this value are gender, issue age, premium class, face amount for each coverage, and initial term period. The range of values is from \$10 - \$1,000,000. For any factor combination, these values are fixed.

Total Maximum Annual Premium This field must be variable to reflect the annual premiums due for each year after the end of the initial term period until age 94 on a guaranteed maximum basis. The factors that determine this value are gender, issue age, premium class, face amount for each coverage, and initial term period. The range of values is from \$10 - \$1,000,000. For any factor combination, these values are fixed.

The first note in this section refers to the first policy anniversary at which the initial premium is no longer guaranteed. The number of this anniversary must be variable to reflect how many years the initial premium is guaranteed. The range of this value is from 1 to 10 years as determined by the company. This value is fixed at issue.

The second note in this section refers to the Termination Date of the Last Renewal Term period. This value must be variable to reflect this date and is defined as the policy anniversary of the insured's attained age 94. This value is fixed at issue.

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### Conversion Schedule

Conversion Expiry Date This field must be variable to reflect the termination date of the Conversion Option. The factors that determine this value are the policy date and the initial term period. The range of values is from the 12-01-2015 to 12-31-9999. For any policy date/initial term period combination, this value is fixed.

Conversion Credit Expiry Date This field must be variable to reflect the termination date of the Conversion Credit. This value is defined as the date that is at least 1 year, but not more than 30 years, from the policy date. The range of values is from the 12-01-2012 to 12-31-9999. For any policy date, this value is fixed.

Special Conversion Expiry Date This field must be variable to reflect the termination date of the Special Conversion. This value is defined as the date that is at least 1 year, but not more than 30 years, from the policy date. The range of values is from the 12-01-2012 to 12-31-9999. For any policy date, this value is fixed. The Special Conversion language will not appear on the Policy Schedule if the original term policy is issued without accelerated death benefit rider(s).

Minimum Face Amount This field must be variable to reflect the face amount of the. The range of values is from \$100,000 - \$20,000,000. This amount is chosen by the policyholder and fixed at issue.