

SERFF Tracking Number: PRUD-126299677 State: Arkansas  
Filing Company: Pruco Life Insurance Company State Tracking Number: 43509  
Company Tracking Number: PLTIR-2009 ET AL-JSAR  
TOI: L04I Individual Life - Term Sub-TOI: L04I.500 Other  
Product Name: PLTIR-2009 ET AL  
Project Name/Number: PLTIR-2009 ET AL/

## Filing at a Glance

Company: Pruco Life Insurance Company

Product Name: PLTIR-2009 ET AL

TOI: L04I Individual Life - Term

Sub-TOI: L04I.500 Other

Filing Type: Form

SERFF Tr Num: PRUD-126299677 State: Arkansas

SERFF Status: Closed-Approved-  
Closed State Tr Num: 43509

Co Tr Num: PLTIR-2009 ET AL-  
JSAR State Status: Approved-Closed

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John Steiniger, Genetta Williams

Date Submitted: 09/15/2009

Reviewer(s): Linda Bird

Disposition Date: 09/17/2009

Disposition Status: Approved-  
Closed

Implementation Date:

Implementation Date Requested: 11/02/2009

State Filing Description:

## General Information

Project Name: PLTIR-2009 ET AL

Project Number:

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 09/17/2009

Deemer Date:

Submitted By: Eula Armstrong

Filing Description:

In Re: Pruco Life Insurance Company

NAIC # 30479227

Status of Filing in Domicile: Not Filed

Date Approved in Domicile:

Domicile Status Comments: This filing is  
exempt from review in our domicile state,  
Arizona.

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 09/17/2009

Created By: David Koonce

Corresponding Filing Tracking Number:

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Individual Life  
Form Numbers PLTIR-2009 et al

Dear Commissioner:

We enclose the following forms for filing:

PLTIR-2009 Term Life Policy  
TB 165 (15)-2009 Rider for Return of Premium  
TB 165 (20)-2009 Rider for Return of Premium  
TB 165 (30)-2009 Rider for Return of Premium

These are new forms and will be used as we are replacing our previously approved term life policy and riders (approved on November 17, 2006).

To assist you in your review, the major differences between the new policy form and the earlier version are:

- PLTIR-2009 will only offer Living Needs Benefit and the Return of Premium Rider,
- for ages under 59, the conversion period has been changed from the earlier of (a) the tenth contract anniversary and (b) the contract anniversary on or immediately following the Insured's 65th birthday to the earlier of (a) the end of the level premium paying period shown under Premium Period and (b) the contract anniversary on or immediately following the Insured's 65th birthday,
- substandard classes and flat extras have been removed,
- base premium rates have been changed.
- the cash value and reduced paid-up insurance generated by the rider are displayed in a table in the rider data pages

We plan to introduce these forms in November 2009.

The policy is designed with the choice of a 15-, 20-, or 30-year premium period. Rider form TB 165 (15)-2009 will be attached to policies that have a 15-year level premium period, form TB 165 (20)-2009 will be attached to policies with a 20-year level premium period and form TB 165 (30)-2009 will be attached to policies with a 30-year level premium period. The rider for return of premium is designed to return all premiums paid by the client if the policy is in force at the end of the level premium period, and to provide for the return a portion of the premiums paid if the policy is surrendered prior to the end of the level premium period. The rider will also provide that the policy can have loan value (equal to the cash value) during the level premium period. Reduced paid-up insurance to attained age 95 will be provided as the nonforfeiture option.

These new forms will be used with the following previously approved application forms:

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Project Name/Number: PLTIR-2009 ET AL/

ORD 96200-98 - Part 1 and Part 2 - Application for Life Insurance or Policy Change, and

COMB 84379-98 - Part 2 of Application or Request for Policy Change

The policy forms will be marketed to the general public. These forms will be marketed by our agency staff, brokers authorized to sell Pruco Life products, and over the Internet. Internet sites such as [www.prudential.com](http://www.prudential.com), commercial quoting engines and agent/broker Internet sites will all have information about our new life product and the options/riders that are available with it. The plan is to use the Internet to increase consumer awareness of this product through banner advertisement, content integration agreements, and other partnership agreements that direct consumers to our life product information.

We will not, however, accept applications for this policy over the Internet. Our normal underwriting rules will apply and the commissions and gross premium rates are comparable to those of our other individual products.

In accordance with the regulations of your state, the contract forms in this submission will not be illustrated.

Variable and illustrative material in the contract data pages has been bracketed. A memorandum of variable material is enclosed.

These forms are submitted in final print and are subject to only minor modification in paper size and stock, ink, border, Company logo and adaptation to computer printing.

The required agent's statement relating to replacement is on the bottom of the last page of application form ORD 96200-98.

This is to assure you that the required policy information as described in Ark Code Ann 23-79-138 will be provided to the owner when this policy is issued.

This is to assure you that the Life and Health Guaranty Association Notice required by Regulation 49 will be provided to each policy owner.

This is to assure you that this filing complies with the applicable Regulation 34 requirements and that we will comply with Bulletin 11-83 if rates are changed.

In accordance with a previous agreement between your Department and Pruco Life Insurance Company, we will include on our claim form (COMB 38) the following wording in Arkansas so that we are in compliance with Arkansas code

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section 23-81-118, supplemented by Bulletin 15-79.

If payment is made after 30 days from the day we receive proof of death of the insured, life insurance death benefits payable under policies issued in Arkansas will include interest at the rate of 8 percent per year.

If you have any questions, please call me toll-free at (888)-800-8244, or contact me via e-mail at John.Steiniger@Prudential.com.

## Company and Contact

### Filing Contact Information

John Steiniger, Second Vice President John.Steiniger@Prudential.com  
 Individual Insurance Group 973-802-6104 [Phone]  
 213 Washington Street 973-367-8134 [FAX]  
 Newark, NJ 07102-2992

### Filing Company Information

Pruco Life Insurance Company CoCode: 79227 State of Domicile: Arizona  
 751 Broad Street Group Code: 304 Company Type: Life  
 Newark, NJ 07102-3777 Group Name: State ID Number:  
 (973) 802-6000 ext. [Phone] FEIN Number: 22-1944557

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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? No  
 Fee Explanation: The filing fee is \$50.00 per policy (with or without riders)  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Pruco Life Insurance Company	\$50.00	09/15/2009	30573506

SERFF Tracking Number: PRUD-126299677 State: Arkansas  
Filing Company: Pruco Life Insurance Company State Tracking Number: 43509  
Company Tracking Number: PLTIR-2009 ET AL-JSAR  
TOI: L041 Individual Life - Term Sub-TOI: L041.500 Other  
Product Name: PLTIR-2009 ET AL  
Project Name/Number: PLTIR-2009 ET AL/

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	09/17/2009	09/17/2009

<i>SERFF Tracking Number:</i>	<i>PRUD-126299677</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Pruco Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>43509</i>
<i>Company Tracking Number:</i>	<i>PLTIR-2009 ET AL-JSAR</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.500 Other</i>
<i>Product Name:</i>	<i>PLTIR-2009 ET AL</i>		
<i>Project Name/Number:</i>	<i>PLTIR-2009 ET AL/</i>		

## **Disposition**

Disposition Date: 09/17/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: PRUD-126299677 State: Arkansas  
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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Statement of Variability		Yes
Supporting Document	Reserves		Yes
Form	Term Life Policy		Yes
Form	RIDER FOR RETURN OF PREMIUM		Yes
Form	RIDER FOR RETURN OF PREMIUM		Yes
Form	RIDER FOR RETURN OF PREMIUM		Yes

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## Form Schedule

### Lead Form Number: PLTIR-2009

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	PLTIR-2009	Policy/Cont Term Life Policy ract/Fratern al Certificate	Initial		62.400	PLTIR-2009 Policy for AR.pdf
	TB 165 (15)-2009	Policy/Cont RIDER FOR ract/Fratern RETURN OF al PREMIUM Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		56.100	TB 165 (15)- 2009 BASIC.pdf
	TB 165 (20)-2009	Policy/Cont RIDER FOR ract/Fratern RETURN OF al PREMIUM Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		56.100	TB 165(20)- 2009 BASIC.pdf
	TB 165 (30)-2009	Policy/Cont RIDER FOR ract/Fratern RETURN OF al PREMIUM Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		56.100	TB 165 (30)- 2009 BASIC.pdf



**Pruco Life Insurance Company**  
213 Washington Street, Newark, NJ 07102-2992  
A Prudential company

**Insured** JOHN DOE

XX XXX XXX **Policy Number**  
NOV 2, 2009 **Contract Date**

**Agency** R-NK1

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**Term Life Policy. Provides a level benefit. Life insurance payable upon death within stated term period. Premiums payable during Insured's lifetime for stated premium period. After a period of level premiums, the premiums will increase annually as shown under Premium Period on page 3. Convertible, as limited, but not renewable. Non-participating.**

We will pay the beneficiary the death benefit described in this contract promptly if we receive due proof that the Insured died in the term period. We make this promise subject to all the provisions of this contract. The term period starts on the contract date. The anniversary at the end of the term period is part of the term period.

If there is ever a question about this contract, just see a Pruco Life representative or contact one of our offices.

**10-Day Right to Cancel Contract**

If you return this contract to us no later than 10 days after you receive it, we will refund your money promptly. The contract will be canceled from the start. All you have to do is take it or mail it to one of our offices or to the representative who sold it to you.

Signed for Pruco Life Insurance Company,  
an Arizona Corporation.



Secretary



President

PLEASE READ YOUR POLICY CAREFULLY; it is a legal contract between you and Pruco Life.

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**A copy of the application and any riders or endorsements can be found at the end of the contract**

**CONTRACT DATA**

**Insured**

[JOHN DOE] [Male], [Issue Age 35]

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**Rating Class**

[Nonsmoker]

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**Basic Contract Information**

Policy Number [XX XXX XXX]  
 Contract Date [November 2, 2009]  
 Term Period [60] years  
 Premium Period [60] years (premiums for the Basic Amount are level for [15] years, then increase annually for [45] years.)  
 Beneficiary [Class 1 MARY DOE, wife]  
 [Class 2 ROBERT DOE, son]

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**Life Insurance on the Insured**

Basic Amount [ \$100,000.00 ]

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**Schedule of Premiums**

Total Initial Premium [on Contract Date] for the following modes:

Annual	Semi-annual	Quarterly	Monthly
[\$116.00]	[\$58.00]	[\$29.00]	[\$9.66]

Contract premiums are due on the contract date and every [12] months after that date. The [annual] premium is [\$116.00] and changes as shown below.

<u>Premium Change Date(s)</u>	<u>[Total Annual] Contract Premiums</u>
[NOV 2, 2024]	[\$949.00]
[NOV 2, 2025]	[\$1,037.00]
[NOV 2, 2026]	[\$1,144.00]
[NOV 2, 2027]	[\$1,268.00]
[NOV 2, 2028]	[\$1,425.00]

CONTRACT DATA CONTINUED ON NEXT PAGE

PROCESSING DATE: [XXX XX, XXXX]  
POLICY NO. [XX XXX XXX]

**CONTRACT DATA CONTINUED**

Premium Change Date(s)	[Total Annual Contract Premiums]
[NOV 2, 2029]	[\$1,601.00]
[NOV 2, 2030]	[\$1,782.00]
[NOV 2, 2031]	[\$1,958.00]
[NOV 2, 2032]	[\$2,134.00]
[NOV 2, 2033]	[\$2,340.00]
[NOV 2, 2034]	[\$2,591.00]
[NOV 2, 2035]	[\$2,896.00]
[NOV 2, 2036]	[\$3,251.00]
[NOV 2, 2037]	[\$3,638.00]
[NOV 2, 2038]	[\$4,043.00]
[NOV 2, 2039]	[\$4,463.00]
[NOV 2, 2040]	[\$4,890.00]
[NOV 2, 2041]	[\$5,335.00]
[NOV 2, 2042]	[\$5,805.00]
[NOV 2, 2043]	[\$6,333.00]
[NOV 2, 2044]	[\$6,949.00]
[NOV 2, 2045]	[\$7,697.00]
[NOV 2, 2046]	[\$8,572.00]
[NOV 2, 2047]	[\$9,493.00]
[NOV 2, 2048]	[\$10,483.00]
[NOV 2, 2049]	[\$11,561.00]
[NOV 2, 2050]	[\$12,777.00]
[NOV 2, 2051]	[\$14,190.00]
[NOV 2, 2052]	[\$15,832.00]
[NOV 2, 2053]	[\$17,672.00]
[NOV 2, 2054]	[\$19,723.00]
[NOV 2, 2055]	[\$21,953.00]
[NOV 2, 2056]	[\$24,316.00]
[NOV 2, 2057]	[\$26,895.00]
[NOV 2, 2058]	[\$29,763.00]
[NOV 2, 2059]	[\$32,953.00]
[NOV 2, 2060]	[\$36,462.00]
[NOV 2, 2061]	[\$40,255.00]
[NOV 2, 2062]	[\$44,286.00]
[NOV 2, 2063]	[\$48,516.00]
[NOV 2, 2064]	[\$52,729.00]
[NOV 2, 2065]	[\$56,876.00]
[NOV 2, 2066]	[\$61,221.00]
[NOV 2, 2067]	[\$65,802.00]
[NOV 2, 2068]	[\$70,628.00]

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END OF CONTRACT DATA

PROCESSING DATE: [XXX XX, XXXX]  
POLICY NO. [XX XXX XXX]

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## DEFINITIONS

**We, our, us** and **Pruco Life**.-Pruco Life Insurance Company.

**You** and **Your**.-The owner of the contract.

**Insured**.-The person named as the Insured on the first page. He or she need not be the owner.

**Issue date**.-Same as the contract date.

**Anniversary** or **contract anniversary**.-The same day and month as the contract date in each later year.

**Contract year**.-A year that starts on the contract date or on an anniversary.

**Attained age**.-The Insured's issue age plus the length of time since the contract date. You will find the Insured's issue age near the top of page 3.

---

## THE CONTRACT

### Entire Contract

This policy and any attached copy of an application, including an application requesting a change, form the entire contract. We assume that all statements in an application are made to the best of the knowledge and belief of the person(s) who make them; in the absence of fraud, they are deemed to be representations and not warranties. We rely on those statements when we issue the contract and when we change it. We will not use any statement, unless made in an application, to try to void the contract, to contest a change, or to deny a claim.

### Contract Modifications

Only a Pruco Life officer with the rank or title of vice president may agree to modify this contract, and then only in writing.

### Incontestability

Except for non-payment of premium, we will not contest this contract after it has been in force during the Insured's lifetime for two years from the issue date.

---

## OWNERSHIP

On the contract date, the Insured is the owner of the contract, unless a different owner is named in the application. If a different owner is named, we will show that owner in a provision we endorse in the contract. The ownership arrangement in effect on the contract date will remain in effect unless you ask us to change it.

You may change the ownership of the contract by sending us a request in a form that meets our needs. We may ask you to send us the contract to be endorsed. If we receive your request in a form that meets our needs, and the contract if we ask for it, we will file and record the change, and it will take effect as of the date you signed the request.

While the Insured is living, the owner alone is entitled to any contract benefit and value, and to the exercise of any right and privilege granted by the contract or by us.

---

## DEATH BENEFITS

If the Insured dies in the term period, we will pay a benefit at the Insured's death (except as we state in the Suicide Exclusion) if this contract is in force at the time of death; that is, the initial premium has been paid and no premium is past due beyond the 31 day grace period we describe under Premium Payment.

The benefit payable at the Insured's death will be equal to the Life Insurance on the Insured as described on a contract data page, plus a return of any unearned premium paid by you less any past due premium.

This contract may provide other benefits on the death of the Insured or benefits on the death of other insureds. If it does, each benefit will be listed on a contract data page, and a form describing the benefit and the conditions under which it is payable will be included in this contract. Any such benefit will be payable only if the contract is in force, unless the form that describes the benefit states otherwise.

### Unearned Premium

When we pay a death benefit on the Insured, we will return that part of the last premium paid by you for that benefit that covers the period after the date of death.

### Interest on Death Benefit

Any death benefit described above will be credited with interest from the date of death at a rate declared by Pruco Life or in accordance with applicable laws.

### Suicide Exclusion

If the Insured, whether sane or insane, dies by suicide within two years from the issue date, this contract will end and we will return the premiums paid. The contract will provide no further benefit.

### Method of Payment

You may choose to have any death benefit paid in a single sum or under an optional mode of settlement (see Settlement Options).

---

## BENEFICIARY

You may designate or change a beneficiary by sending us a request in a form that meets our needs. We may ask you to send us the contract to be endorsed. If we receive your request, and the contract if we ask for it, we will file and record the change and it will take effect as of the date you signed the request. But if we make any payment(s) before we receive the request, we will not have to make the payment(s) again. Any beneficiary's interest is subject to the rights of any assignee we know of.

When a beneficiary is designated, any relationship shown is to the Insured, unless otherwise stated. To show priority, we will use numbered classes, so that the class with first priority is called class 1, the class with next priority is called class 2, and so on. When we use numbered classes, these statements apply to beneficiaries unless the form states otherwise:

1. One who survives the Insured will have the right to be paid only if no one in a prior class survives the Insured.
2. One who has the right to be paid will be the only one paid if no one else in the same class survives the Insured.
3. Two or more in the same class who have the right to be paid will be paid in equal shares.
4. If none survives the Insured, we will pay in one sum to the Insured's estate.

Before we make a payment, we have the right to decide what proof we need of the identity, age or any other facts about any persons designated as beneficiaries. If beneficiaries are not designated by name and we make payment(s) based on that proof, we will not have to make the payment(s) again.

---

## **CONVERSION TO ANOTHER PLAN OF INSURANCE**

### **Right to Convert**

You may convert this contract to a new contract of life insurance on the Insured's life. You will not have to prove that the Insured is insurable.

### **Conditions**

You must ask for the conversion in a form that meets our needs, while this contract is in force, and on or before the following date:

If the issue age of this contract is 59 or less you must ask for the conversion on or before the earlier of (a) the end of the level premium paying period shown under Premium Period on page 3 and (b) the contract anniversary on or immediately following the Insured's 65th birthday.

If the issue age of the contract is 60 or above, you must ask for the conversion on or before the fifth contract anniversary.

We may require you to send us the contract.

The new contract will not take effect unless the premium for it is paid while the Insured is living and within 31 days after its contract date. If the premium is paid as we state, it will be deemed that the new contract took effect on its contract date and that this contract ended just before that date. We will return that part, if any, of the last premium paid for this contract that is more than was needed to pay premiums to the contract date of the new contract.

### **Contract Date**

You may choose any contract date for the new contract that is (a) not after the date to which premiums are paid for this contract, (b) not after the 60th day following the date we receive your request, (c) not after the date described in the second and third paragraphs under Conditions, and (d) not more than 31 days prior to the date we receive your request.

### **Contract Specifications**

The new contract will be in the same or equivalent rating class as this contract. We will set the issue age and the premiums for the new contract in accordance with our regular rules in use on its contract date.

Except as we state in the next sentence, the new contract may be any life policy we or The Prudential Insurance Company of America regularly issue on its contract date for the same or equivalent rating class, amount, issue age, and sex. It may not be: one that insures anyone in addition to the Insured; one that includes or provides for term insurance, other than extended insurance; or one with any benefit other than the basic insurance benefit and the waiver and accidental death benefits we refer to below.

The basic amount of the new contract may be any amount you ask for as long as it is at least \$25,000 and not more than the basic amount of this contract. We will always make available at least one policy for conversion with a minimum basic amount of \$25,000.

If this contract has a benefit for waiving premiums in the event of disability, we will include a benefit for waiving premiums in the new contract if its premium period runs to at least the Insured's attained age 85 and if we would include a waiver benefit in other contracts like the new one.

We will not deny a benefit for waiving premiums that we would have allowed under this contract, and that we would otherwise allow under the new contract, just because disability started before the contract date of the new contract. But any premium to be waived for disability under the new contract must be at the frequency that was in effect for this contract when the disability started. We will not waive any premium under the new contract unless it has a benefit for waiving premiums in the event of disability, even if we have waived premiums under this contract.

If this contract has an accidental death benefit, we will include an accidental death benefit in the new contract if we would regularly issue contracts like the new contract with that benefit. But you must ask for the benefit in your request for conversion, and the basic amount of the new contract must be no larger than the basic amount of this contract. The amount of the accidental death benefit in the new contract will be the smaller of the basic amount of the new contract and the amount of the accidental death benefit in this contract.

Any benefit for waiving premiums and any accidental death benefit in the new contract will be the same one with the same provisions that we put in other contracts like it on the new contract date. In any of these paragraphs, when we refer to other contracts, we mean contracts we would regularly issue on the same plan as the new contract and for the same rating class, amount, issue age and sex.

---

## **CHANGE IN PLAN**

You may be able to have this contract changed to another plan of life insurance other than in accordance with the requirements for conversion we describe above. Any change will be made only if we consent, and will be subject to conditions and charges that are then determined.

---

## **PREMIUM PAYMENT**

### **Payment of Premiums**

The schedule of premiums shows the amounts of the premiums and when they are due. These premiums are due only while the Insured is living and only during the premium period.

### **Change of Frequency**

If you ask us and we agree, you may change the frequency of premium payments.

### **Grace Period**

We grant a 31-day grace period for paying each premium except the first one. If the premium has not been paid by its due date, the contract will stay in force during the grace period. If the premium has not been paid when its grace period is over, the contract will end and have no value.

---

## **REINSTATEMENT**

You may reinstate this contract after the grace period of a past due premium if: the term period has not ended; the premium payment is not past due more than five years; and you prove to us that the Insured is insurable for the contract.

You must pay us all premiums in arrears; we may also charge compound interest at a rate of up to 6% per year.

---

## **GENERAL PROVISIONS**

### **Currency**

Any money we pay, or that is paid to us, must be in United States currency.

### **Misstatement of Age or Sex**

If the Insured's stated age or sex or both are not correct, we will change each benefit and any amount to be paid to what the premium would have bought for the correct age and sex.

The Schedule of Premiums may show that premiums change or stop on a certain date. We may have used that date because the Insured would attain a certain age on that date. If we find that the issue age was wrong, we will correct that date.

### **Cancellation**

If you ask us in a form that meets our needs and while no premium is past due, we will cancel this contract on the date we receive your request. On that date, the contract will end and have no value. We will return that part of the last premium paid by you that covers the period after the cancellation date.

### **Assignment**

We will not be deemed to know of an assignment unless we receive it, or a copy of it. We are not obliged to see that an assignment is valid or sufficient. This contract may not be assigned to any employee benefit plan without our consent. This contract may not be assigned if such assignment would violate any federal, state, or local law or regulation prohibiting sex distinct rates for insurance.

### **Non-Participating**

This contract will not share in our profits or surplus earnings. We will pay no dividends on it.

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## SETTLEMENT OPTIONS

### Options Described

You may choose to have any death benefit paid in a single sum or under one of the optional modes of settlement described below.

If the person who is to receive the proceeds of this contract wishes to take advantage of one of these optional modes, we will be glad to furnish, on request, details of the options we describe below or any others we may have available at the time the proceeds become payable.

### Option 1 (Instalments for a Fixed Period)

We will make equal payments for up to 25 years. The Option 1 Table shows the minimum amounts we will pay.

### Option 2 (Life Income)

We will make equal monthly payments for as long as the person on whose life the settlement is based lives with payments certain for 120 months. The Option 2 Table shows the minimum amounts we will pay. But, we must have proof of the date of birth of the person on whose life the settlement is based.

### Option 3 (Interest Payment)

We will hold an amount at interest. We will pay the interest annually, semi-annually, quarterly, or monthly.

### Option 4 (Instalments of a Fixed Amount)

We will make equal annual, semi-annual, quarterly, or monthly payments for as long as the available proceeds provide.

### Option 5 (Non- Participating Income)

We will make payments like those of any annuity we then regularly issue that: (1) is based on United States currency; (2) is bought by a single sum; (3) does not provide for dividends; and (4) does not normally provide for deferral of the first payment. Each payment will be at least equal to what we would pay under that kind of annuity with its first payment due on its contract date. If a life income is chosen, we must have proof of the date of birth of any person on whose life the option is based. Option 5 cannot be chosen more than 30 days before the due date of the first payment.

### Interest Rate

Payments under Options 1, 3 and 4 will be calculated assuming an effective interest rate of at least 1.5% a year. We may include more interest.

## SETTLEMENT OPTIONS TABLES

OPTION 1 TABLE

OPTION 2 TABLE

MINIMUM AMOUNT OF MONTHLY PAYMENT FOR EACH \$1,000, THE FIRST PAYABLE IMMEDIATELY		MINIMUM AMOUNT OF MONTHLY PAYMENT FOR EACH \$1,000, THE FIRST PAYABLE IMMEDIATELY					
Number of Years	Monthly Payment	AGE LAST BIRTHDAY	Male	Female	AGE LAST BIRTHDAY	Male	Female
		1	\$83.90	5	\$2.72	\$2.68	48
2	42.26	6	2.73	2.69	49	3.77	3.56
3	28.39	7	2.74	2.69	50	3.83	3.61
4	21.45	8	2.75	2.70	51	3.88	3.66
5	17.28	9	2.76	2.71	52	3.95	3.71
6	14.51	10	2.77	2.72	53	4.01	3.76
7	12.53	11	2.78	2.73	54	4.08	3.82
8	11.04	12	2.79	2.74	55	4.15	3.88
9	9.89	13	2.80	2.75	56	4.22	3.94
10	8.96	14	2.82	2.76	57	4.30	4.01
11	8.21	15	2.83	2.77	58	4.38	4.08
12	7.58	16	2.84	2.78	59	4.47	4.16
13	7.05	17	2.85	2.79	60	4.56	4.24
14	6.59	18	2.87	2.80	61	4.66	4.32
15	6.20	19	2.88	2.81	62	4.76	4.41
16	5.85	20	2.89	2.83	63	4.87	4.50
17	5.55	21	2.91	2.84	64	4.98	4.60
18	5.27	22	2.93	2.85	65	5.10	4.71
19	5.03	23	2.94	2.87	66	5.23	4.82
20	4.81	24	2.96	2.88	67	5.36	4.94
21	4.62	25	2.98	2.90	68	5.49	5.06
22	4.44	26	3.00	2.91	69	5.64	5.19
23	4.28	27	3.01	2.93	70	5.78	5.33
24	4.13	28	3.03	2.94	71	5.94	5.48
25	3.99	29	3.06	2.96	72	6.10	5.63
Multiply the monthly amount By 2.996 for quarterly, 5.981 for semi-annual or 11.919 for annual.		30	3.08	2.98	73	6.26	5.79
		31	3.10	3.00	74	6.43	5.96
		32	3.13	3.02	75	6.60	6.14
		33	3.15	3.04	76	6.78	6.33
		34	3.18	3.07	77	6.95	6.52
		35	3.21	3.09	78	7.13	6.71
		36	3.23	3.11	79	7.31	6.92
		37	3.27	3.14	80	7.49	7.12
		38	3.30	3.16	81	7.67	7.33
		39	3.33	3.19	82	7.85	7.53
40	3.37	3.22	83	8.02	7.73		
41	3.40	3.25	84	8.18	7.93		
42	3.44	3.29	85	8.33	8.12		
43	3.48	3.32	86	8.48	8.29		
44	3.53	3.35	87	8.62	8.46		
45	3.57	3.39	88	8.75	8.61		
46	3.62	3.43	89	8.87	8.75		
47	3.67	3.47	90	8.98	8.88		
		and over			and over		

(This page intentionally left blank)

**Term Life Policy. Provides a level benefit. Life insurance payable upon death within stated term period. Premiums payable during Insured's lifetime for stated premium period. After a period of level premiums, the premiums will increase annually as shown under Premium Period on page 3. Convertible, as limited, but not renewable. Non-participating.**

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## **RIDER FOR RETURN OF PREMIUM**

This benefit is a part of this contract only if it is listed on a contract data page.

### **Rider Benefit**

Subject to all of the provisions of this rider and the rest of the contract, we will pay you the Accumulated Premiums less any contract debt on the Rider Benefit Date if all due premiums have been paid and the Insured is living on that date.

### **Benefit Premiums**

We show the premiums for this benefit on a contract data page.

## **DEFINITIONS**

### **Scheduled Premiums**

The Scheduled Premiums and their due dates are shown under the Schedule of Premiums.

### **Accumulated Premiums**

The total of all Scheduled Premiums due and paid. The Accumulated Premiums will not include any interest charged on premiums in arrears needed to reinstate this contract (see Reinstatement).

### **Rider Benefit Date**

The contract anniversary at the end of the level premium period shown under Premium Period on page 3. This rider expires on the Rider Benefit Date and will provide no further benefit except as described under Reduced Paid-Up Insurance below.

## **RIDER CASH VALUE**

At any time prior to the Rider Benefit Date, you may surrender this contract for the Rider Net Cash Value. The Rider Net Cash Value at any time is the Rider Cash Value less any contract debt. To do so, you must ask us in a form that meets our needs. We may require you to send us the contract. This contract will terminate upon surrender and will provide no further benefit.

Here is how we compute the Rider Cash Value:

1. If no premium is past due beyond the grace period described under Premium Payment, the Rider Cash Value is the Accumulated Premiums times the Rider Surrender Factor as of the date we receive your request. The Rider Surrender Factor at the end of each contract year is shown under the Table of Rider Surrender Factors. On a date that falls between two anniversaries, the factor will fall between the factors for those two anniversaries considering the time that has passed since the last anniversary.
2. If premium payment is past due three months or less, we will compute the Rider Cash Value as of the due date of the first unpaid premium. But we will adjust this value for any loan you take out or pay back in the grace period of that premium.
3. If premium payment is past due more than three months, the Rider Cash Value as of any date will be the value on that date of any reduced paid-up insurance then in force. Such cash value is computed by multiplying the appropriate attained age factor (see Table of Attained Age Factors) by the amount of reduced paid-up insurance and dividing the result by \$1,000.

However, within 30 days after an anniversary, the Rider Cash Value under 2 and 3 will not be less than the Rider Cash Value on that anniversary, adjusted for any loan you take out or pay back in those 30 days.

On and after the fifth contract anniversary, if all due premiums are paid, the Rider Cash Value will not be less than \$2.00 per \$1,000 of the basic amount shown on contract data page 3.

## **DEATH BENEFIT**

Under the Death Benefits provision, we describe the amount we will pay upon the death of the Insured within the term period if the contract is in force at the time of death with no premium past due beyond the 31-day grace period. If death occurs before the Rider Benefit Date, however, we will pay the greater of (a) the Basic Amount as shown under Life Insurance on the Insured on contract data page 3 and (b) the Rider Net Cash Value as of the date of death divided by the appropriate factor shown in or derived from the Table of Attained Age Factors attached to this rider multiplied by \$1,000.

## **REDUCED PAID-UP INSURANCE**

Under the Premium Payment provision, we state that if a past due premium has not been paid before its grace period is over, the contract will end and have no value. However, if that due date is before the Rider Benefit Date, this contract may continue to provide a death benefit as reduced paid-up insurance.

The contract will be in force as reduced paid-up insurance if: (a) a premium is past due beyond the 31-day grace period, (b) the Rider Net Cash Value is greater than zero, (c) the due date of the past due premium is prior to the Rider Benefit Date, and (d) you have not surrendered the contract for its net cash value.

If a contract is in force as reduced paid-up insurance and the Insured dies within the term period shown on contract data page 3, we will pay a benefit equal to the amount of reduced paid-up insurance, minus any contract debt. The reduced paid-up insurance will have cash and loan values.

The amount of the reduced paid-up insurance will be what is provided when we use the Rider Net Cash Value at the net single premium rate. This rate depends on the Insured's issue age, sex, smoker status and the length of the time since the contract date. The amount of reduced paid-up insurance may be obtained by (1) dividing the Rider Net Cash Value as of the due date of the premium in default by the appropriate factor shown in or derived from the Table of Attained Age Factors attached to this rider and (2) multiplying the result by \$1,000.

If this contract is in force as reduced paid-up insurance at the end of the five-year reinstatement period (see Reinstatement) we reserve the right to surrender this contract for the Rider Net Cash Value if the amount of paid-up insurance is \$250 or less.

### **Computations**

We will make all computations for reduced paid-up insurance as of the due date of a past due premium. But we will consider any loan you take out or pay back in the grace period of that premium.

## **REINSTATEMENT**

The Reinstatement provision describes how this contract may be reinstated after the grace period of a past due premium.

Additionally, this contract may not be reinstated if the contract had been surrendered for the Rider Cash Value, or this contract had been terminated because of excess contract debt.

If the date we approve your request for reinstatement is before the Rider Benefit Date, we will reinstate both the contract and this rider; they may not be reinstated separately.

If the date we approve your request for reinstatement is after the Rider Benefit Date but the due date of the first past due premium is before that date, we will pay the Rider Benefit on the date we approve your request.

Any contract debt must be restored or paid back with interest to date at the loan interest rate. If that debt with interest would exceed the loan value of the reinstated contract, the excess must be paid to us before reinstatement.

## **LOANS**

### **Loan Requirements**

You may borrow from us on the contract if it has a loan value. We describe loan value below. The contract must be in force, the Insured must be living, you must assign the contract to us as sole security for the loan, and the resulting contract debt must not be more than the loan value.

If there is already contract debt when you borrow from us, we will add the new amount you borrow and unpaid interest to that debt.

### **Interest Charge**

We will charge interest daily on any loan at a rate that is equivalent to an effective annual rate of 8%. Interest is due on each contract anniversary, when you borrow from us (if there is already contract debt), or when all or part of the loan is paid back, whichever comes first. If interest is not paid when due, we will increase the loan amount by any unpaid interest.

### **Loan Value**

If the contract is in force with no premium past due beyond the 31-day grace period, the loan value on a premium due date is the Rider Cash Value on that date. In the grace period of a past due premium, the loan value is what it was on the due date of that premium. At any other time, the loan value is the amount that would grow at the loan interest rate to equal the loan value on the next premium due date.

If the contract is in force as reduced paid-up insurance, the loan value is the net value we describe in the Basis of Computation below. On a contract anniversary, the loan value is determined on that date. At any other time, the loan value is the amount that would grow at the loan interest rate to equal the loan value on the next anniversary.

This contract will have no loan value on or after the Rider Benefit Date.

### **Contract Debt**

Contract debt at any time means the loan on the contract at that time, plus the interest we have charged that is not yet due and that we have not yet added to the loan.

### **Repayment**

All or part of any contract debt may be paid back at any time while the Insured is living. But if there is contract debt at the end of the grace period of a past due premium, it may be paid back only if the contract is reinstated. When we settle the contract, any contract debt is due us. We will make an adjustment so that the proceeds will not include the amount of that debt.

### **Postponement of Loans**

We will usually make a loan promptly. But we have the right to postpone making a loan for up to six months unless it will be used to pay premiums on this or other contracts with us.

### **Excess Contract Debt**

If contract debt ever grows to be equal to or more than the loan value, the contract will expire without value 31 days after we mail you a notice. In the notice we will state the amount that, if paid to us, will reduce the contract debt enough to keep the contract's benefits from ending for a limited time.

### **Automatic Premium Loan**

If this provision is in effect at the end of the 31-day grace period of a past due premium, the premium will be paid by charging it as a loan on the contract if there is enough loan value to do so. When we compute the loan value, we will do so as if the premium to be borrowed had been paid.

This provision will take effect if elected in the application, or you may elect it at a later time by notifying us in a form that meets our needs. You may revoke such election at any time.

If there is insufficient loan value to pay a past due premium, the contract will end and provide no further benefit except as stated in this rider.

## **CONVERSION**

In the Conversion To Another Plan Of Insurance provision, we describe the conditions under which you may convert this policy to a new contract of life insurance on the Insured's life. If this contract is converted before the Rider Benefit Date, however:

1. we will pay you the Rider Net Cash Value as of the contract date of the new contract, and;
2. the basic insurance amount of the new contract may not exceed the basic insurance amount of this contract less the Rider Net Cash Value.

## **BASIS OF COMPUTATION**

We compute all net single premiums and values for reduced paid-up insurance using:

1. the Commissioners 2001 Standard Ordinary Smoker and Nonsmoker Ultimate Mortality Table;
2. the issue age of the Insured, and the length of time since the contract date;
3. continuous functions based on age last birthday; and
4. an effective interest rate of 5% a year.

The cash surrender values provided by this contract are at least as large as those set by law where it is delivered. Where required, we have given the insurance regulator a detailed statement of how we compute values and benefits.

## **SETTLEMENT OPTIONS**

You may have the proceeds (that is, the death benefit, the Rider Net Cash Value, and the Rider Benefit) paid in a single sum or under one of the optional modes of settlement described in the Settlement Options provision of this contract.

## **TERMINATION**

This benefit will end on the earliest of:

1. the date this contract is cancelled and surrendered for the rider cash value;
2. the date this contract ends due to excess contract debt;
3. the date this contract is converted to a new plan of life insurance; and
4. the Rider Benefit Date.

If this rider ends as in items 1 or 3 above, we will return that part of any scheduled premium due and paid by you that covers the period following the termination date.

### **This Supplementary Benefit rider attached to this contract on the Contract Date**

Pruco Life Insurance Company

By



Secretary

Table of Attained Age Factors

These factors are used to determine your death benefit and reduced paid-up insurance amount as described in the Rider For Return Of Premium.

The Insured's Attained Age is the issue age found on contract data page 3 plus the length of time since the contract date. On a date that falls between two anniversaries, the factor will fall between the factors for those two anniversaries considering the time that has passed since the last anniversary. The Insured's smoker status is found under the table of Rider Surrender Factors.

Attained Age	Smoker		Nonsmoker		Attained Age	Smoker		Nonsmoker	
	Male	Female	Male	Female		Male	Female	Male	Female
15	86.81	71.05	66.02	52.36	55	397.68	357.85	330.68	276.72
16	90.54	74.26	68.69	54.63	56	410.72	369.49	343.25	286.92
17	94.27	77.57	71.39	56.99	57	423.87	381.24	356.08	297.31
18	98.02	81.00	74.13	59.44	58	437.20	393.10	369.21	307.89
19	101.87	84.57	76.97	62.00	59	450.79	405.08	382.69	318.67
20	105.84	88.28	79.93	64.67	60	464.58	417.17	396.48	329.66
21	109.94	92.14	83.03	67.47	61	478.46	429.39	410.51	340.87
22	114.20	96.16	86.29	70.39	62	492.30	441.70	424.72	352.28
23	118.61	100.36	89.72	73.46	63	506.01	454.11	439.03	363.90
24	123.19	104.74	93.31	76.67	64	516.56	466.64	453.43	375.73
25	127.93	109.31	97.07	80.04	65	533.00	479.28	467.91	387.75
26	132.84	114.06	101.00	83.56	66	546.40	492.00	482.51	399.94
27	137.92	119.00	105.10	87.22	67	559.86	504.79	497.25	412.28
28	143.22	124.15	109.38	91.05	68	573.43	517.59	512.17	424.74
29	148.79	129.50	113.90	95.04	69	587.16	530.37	527.27	437.28
30	154.65	135.08	118.66	99.21	70	601.03	543.08	542.53	449.88
31	160.83	140.89	123.68	103.56	71	614.98	555.64	557.86	462.47
32	167.32	146.92	128.96	108.10	72	628.82	567.96	573.11	474.97
33	174.12	153.20	134.50	112.83	73	642.42	579.98	588.15	487.34
34	181.22	159.71	140.29	117.76	74	655.87	591.61	603.00	499.53
35	188.64	166.44	146.37	122.88	75	669.14	602.85	617.63	511.44
36	196.37	173.41	152.71	128.20	76	682.14	613.65	632.00	523.00
37	204.41	180.63	159.33	133.72	77	694.80	623.92	646.00	534.12
38	212.75	188.13	166.23	139.48	78	706.94	633.57	659.45	544.68
39	221.40	195.92	173.41	145.49	79	718.33	642.48	672.12	554.56
40	230.35	204.03	180.89	151.75	80	728.83	650.50	683.81	563.62
41	239.59	212.45	188.67	158.27	81	738.23	657.14	694.30	571.42
42	249.10	221.20	196.73	165.06	82	746.37	661.76	703.35	577.43
43	258.87	230.24	205.09	172.12	83	753.10	664.06	710.75	581.36
44	268.86	239.61	213.72	179.45	84	758.10	663.65	716.10	582.89
45	279.07	249.27	222.63	187.05	85	760.72	659.92	718.79	581.39
46	289.51	259.22	231.83	194.91	86	760.04	652.49	717.96	576.39
47	300.20	269.45	241.33	203.04	87	754.87	640.01	712.44	566.67
48	311.22	279.91	251.18	211.42	88	743.53	620.28	700.61	550.33
49	322.66	290.57	261.44	220.05	89	723.55	591.20	680.13	525.55
50	334.49	301.41	272.11	228.93	90	691.24	550.38	647.59	490.19
51	346.67	312.42	283.16	238.04	91	641.27	496.60	598.17	443.13
52	359.14	323.58	294.56	247.39	92	565.49	426.63	524.63	381.33
53	371.84	334.88	306.30	256.95	93	450.46	331.21	415.14	296.41
54	384.71	346.31	318.36	266.72	94	274.27	196.86	250.67	175.87
					95	0.00	0.00	0.00	0.00

**TABLE OF RIDER SURRENDER FACTORS  
FOR RIDER [TB 165 (15)]  
Rating Class: [NONSMOKER]  
Smoker Status: [NONSMOKER]**

These factors are used to determine the Rider Cash Value and loan value as described in the Rider For Return of Premium.

<b>End of Contract Year</b>	<b>Factors</b>
1 [- 2]	0.00000
[3]	[0.22137]
[4]	[0.38745]
[5]	[0.49625]
[6]	[0.57683]
[7]	[0.64170]
[8]	[0.69713]
[9]	[0.74664]
[10]	[0.79237]
[11]	[0.83570]
[13]	[0.87758]
[12]	[0.91862]
[14]	[0.95929]
[15]	[1.00000]

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TABLE(S) CONTINUED ON NEXT PAGE

**TABLE OF CASH VALUES AND REDUCED PAID-UP INSURANCE**

The following values are based on the Rider Cash Value, Reduced Paid-Up Insurance and Basis of Computation provisions of this rider. These cash values and reduced paid-up values assume you pay all premiums annually on or before their due dates. Any changes to these assumptions may cause the actual cash values and reduced paid-up insurance to deviate from those shown below.

<b>End of Contract Year</b>	<b>Cash Value</b>	<b>Reduced Paid-Up Insurance</b>
1 [- 2]	\$0.00	[\$0.00]
[3]	[\$713.36]	[\$4,291.40]
[4]	[\$1,664.73]	[\$9,599.97]
[5]	[\$2,665.26]	[\$14,734.15]
[6]	[\$3,717.65]	[\$19,704.51]
[7]	[\$4,825.02]	[\$24,526.10]
[8]	[\$5,990.63]	[\$29,209.76]
[9]	[\$7,218.10]	[\$33,773.63]
[10]	[\$8,511.32]	[\$38,230.79]
[11]	[\$9,874.43]	[\$42,593.41]
[12]	[\$11,311.94]	[\$46,873.33]
[13]	[\$12,827.68]	[\$51,069.67]
[14]	[\$14,426.03]	[\$55,179.12]
[15]	[\$16,112.40]	N/A

If we need to compute these values during a contract year, we will take into account the time since the start of the year and any premiums paid for the year. If you ask us, we will tell you the values for durations other than those shown in this table.

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END OF TABLE

**CONTRACT DATA**

**Insured**

[JOHN DOE] [Male], [Issue Age 35]

**Rating Class**

[Nonsmoker]

**Basic Contract Information**

Policy Number [XX XXX XXX]  
 Contract Date [November 2, 2009]  
 Term Period [60] years  
 Premium Period [60] years (premiums for the Basic Amount are level for [15] years, then increase annually for [45] years.)  
 Beneficiary [Class 1 MARY DOE, wife]  
 [Class 2 ROBERT DOE, son]

**Life Insurance on the Insured**

Basic Amount [ \$100,000.00 ]

**Other Benefit(s) on the Insured** (see appropriate form for details)

[Rider TB 165 (15) – Rider for Return of Premium.]

**Schedule of Premiums**

Total Initial Premium [on Contract Date] for the following modes:

Annual	Semi-annual	Quarterly	Monthly
[\$1,074.16]	[\$537.08]	[\$268.54]	[\$89.45]

Contract premiums are due on the contract date and every [12] months after that date. The [annual] premium is [\$1,074.16] and changes as shown below.

Premium Change Date(s)	[Total Annual] Contract Premiums
[NOV 2, 2024]	[\$949.00]
[NOV 2, 2025]	[\$1,037.00]
[NOV 2, 2026]	[\$1,144.00]
[NOV 2, 2027]	[\$1,268.00]
[NOV 2, 2028]	[\$1,425.00]

CONTRACT DATA CONTINUED ON NEXT PAGE

**CONTRACT DATA CONTINUED**

Premium Change Date(s)	[Total Annual] Contract Premiums
[NOV 2, 2029]	[\$1,601.00]
[NOV 2, 2030]	[\$1,782.00]
[NOV 2, 2031]	[\$1,958.00]
[NOV 2, 2032]	[\$2,134.00]
[NOV 2, 2033]	[\$2,340.00]
[NOV 2, 2034]	[\$2,591.00]
[NOV 2, 2035]	[\$2,896.00]
[NOV 2, 2036]	[\$3,251.00]
[NOV 2, 2037]	[\$3,638.00]
[NOV 2, 2038]	[\$4,043.00]
[NOV 2, 2039]	[\$4,463.00]
[NOV 2, 2040]	[\$4,890.00]
[NOV 2, 2041]	[\$5,335.00]
[NOV 2, 2042]	[\$5,805.00]
[NOV 2, 2043]	[\$6,333.00]
[NOV 2, 2044]	[\$6,949.00]
[NOV 2, 2045]	[\$7,697.00]
[NOV 2, 2046]	[\$8,572.00]
[NOV 2, 2047]	[\$9,493.00]
[NOV 2, 2048]	[\$10,483.00]
[NOV 2, 2049]	[\$11,561.00]
[NOV 2, 2050]	[\$12,777.00]
[NOV 2, 2051]	[\$14,190.00]
[NOV 2, 2052]	[\$15,832.00]
[NOV 2, 2053]	[\$17,672.00]
[NOV 2, 2054]	[\$19,723.00]
[NOV 2, 2055]	[\$21,953.00]
[NOV 2, 2056]	[\$24,316.00]
[NOV 2, 2057]	[\$26,895.00]
[NOV 2, 2058]	[\$29,763.00]
[NOV 2, 2059]	[\$32,953.00]
[NOV 2, 2060]	[\$36,462.00]
[NOV 2, 2061]	[\$40,255.00]
[NOV 2, 2062]	[\$44,286.00]
[NOV 2, 2063]	[\$48,516.00]
[NOV 2, 2064]	[\$52,729.00]
[NOV 2, 2065]	[\$56,876.00]
[NOV 2, 2066]	[\$61,221.00]
[NOV 2, 2067]	[\$65,802.00]
[NOV 2, 2068]	[\$70,628.00]

Each contract premium consists of the premium for the basic amount and the premium(s) for the benefit(s) shown in the section that follows.

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CONTRACT DATA CONTINUED ON NEXT PAGE

PROCESSING DATE: [XXX XX, XXXX]  
POLICY NO. [XX XXX XXX]

**CONTRACT DATA CONTINUED**

**Premium(s) for Benefit(s)**

[Premium for Benefit TB 165 (15) (return of premium):]

[Starting on the Contract Date]

[\$958.16] payable until  
[NOV 2, 2024].

---

END OF CONTRACT DATA

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## **RIDER FOR RETURN OF PREMIUM**

This benefit is a part of this contract only if it is listed on a contract data page.

### **Rider Benefit**

Subject to all of the provisions of this rider and the rest of the contract, we will pay you the Accumulated Premiums less any contract debt on the Rider Benefit Date if all due premiums have been paid and the Insured is living on that date.

### **Benefit Premiums**

We show the premiums for this benefit on a contract data page.

## **DEFINITIONS**

### **Scheduled Premiums**

The Scheduled Premiums and their due dates are shown under the Schedule of Premiums.

### **Accumulated Premiums**

The total of all Scheduled Premiums due and paid. The Accumulated Premiums will not include any interest charged on premiums in arrears needed to reinstate this contract (see Reinstatement).

### **Rider Benefit Date**

The contract anniversary at the end of the level premium period shown under Premium Period on page 3. This rider expires on the Rider Benefit Date and will provide no further benefit except as described under Reduced Paid-Up Insurance below.

## **RIDER CASH VALUE**

At any time prior to the Rider Benefit Date, you may surrender this contract for the Rider Net Cash Value. The Rider Net Cash Value at any time is the Rider Cash Value less any contract debt. To do so, you must ask us in a form that meets our needs. We may require you to send us the contract. This contract will terminate upon surrender and will provide no further benefit.

Here is how we compute the Rider Cash Value:

1. If no premium is past due beyond the grace period described under Premium Payment, the Rider Cash Value is the Accumulated Premiums times the Rider Surrender Factor as of the date we receive your request. The Rider Surrender Factor at the end of each contract year is shown under the Table of Rider Surrender Factors. On a date that falls between two anniversaries, the factor will fall between the factors for those two anniversaries considering the time that has passed since the last anniversary.
2. If premium payment is past due three months or less, we will compute the Rider Cash Value as of the due date of the first unpaid premium. But we will adjust this value for any loan you take out or pay back in the grace period of that premium.
3. If premium payment is past due more than three months, the Rider Cash Value as of any date will be the value on that date of any reduced paid-up insurance then in force. Such cash value is computed by multiplying the appropriate attained age factor (see Table of Attained Age Factors) by the amount of reduced paid-up insurance and dividing the result by \$1,000.

However, within 30 days after an anniversary, the Rider Cash Value under 2 and 3 will not be less than the Rider Cash Value on that anniversary, adjusted for any loan you take out or pay back in those 30 days.

On and after the fifth contract anniversary, if all due premiums are paid, the Rider Cash Value will not be less than \$2.00 per \$1,000 of the basic amount shown on contract data page 3.

## **DEATH BENEFIT**

Under the Death Benefits provision, we describe the amount we will pay upon the death of the Insured within the term period if the contract is in force at the time of death with no premium past due beyond the 31-day grace period. If death occurs before the Rider Benefit Date, however, we will pay the greater of (a) the Basic Amount as shown under Life Insurance on the Insured on contract data page 3 and (b) the Rider Net Cash Value as of the date of death divided by the appropriate factor shown in or derived from the Table of Attained Age Factors attached to this rider multiplied by \$1,000.

## **REDUCED PAID-UP INSURANCE**

Under the Premium Payment provision, we state that if a past due premium has not been paid before its grace period is over, the contract will end and have no value. However, if that due date is before the Rider Benefit Date, this contract may continue to provide a death benefit as reduced paid-up insurance.

The contract will be in force as reduced paid-up insurance if: (a) a premium is past due beyond the 31-day grace period, (b) the Rider Net Cash Value is greater than zero, (c) the due date of the past due premium is prior to the Rider Benefit Date, and (d) you have not surrendered the contract for its net cash value.

If a contract is in force as reduced paid-up insurance and the Insured dies within the term period shown on contract data page 3, we will pay a benefit equal to the amount of reduced paid-up insurance, minus any contract debt. The reduced paid-up insurance will have cash and loan values.

The amount of the reduced paid-up insurance will be what is provided when we use the Rider Net Cash Value at the net single premium rate. This rate depends on the Insured's issue age, sex, smoker status and the length of the time since the contract date. The amount of reduced paid-up insurance may be obtained by (1) dividing the Rider Net Cash Value as of the due date of the premium in default by the appropriate factor shown in or derived from the Table of Attained Age Factors attached to this rider and (2) multiplying the result by \$1,000.

If this contract is in force as reduced paid-up insurance at the end of the five-year reinstatement period (see Reinstatement) we reserve the right to surrender this contract for the Rider Net Cash Value if the amount of paid-up insurance is \$250 or less.

### **Computations**

We will make all computations for reduced paid-up insurance as of the due date of a past due premium. But we will consider any loan you take out or pay back in the grace period of that premium.

## **REINSTATEMENT**

The Reinstatement provision describes how this contract may be reinstated after the grace period of a past due premium.

Additionally, this contract may not be reinstated if the contract had been surrendered for the Rider Cash Value, or this contract had been terminated because of excess contract debt.

If the date we approve your request for reinstatement is before the Rider Benefit Date, we will reinstate both the contract and this rider; they may not be reinstated separately.

If the date we approve your request for reinstatement is after the Rider Benefit Date but the due date of the first past due premium is before that date, we will pay the Rider Benefit on the date we approve your request.

Any contract debt must be restored or paid back with interest to date at the loan interest rate. If that debt with interest would exceed the loan value of the reinstated contract, the excess must be paid to us before reinstatement.

## **LOANS**

### **Loan Requirements**

You may borrow from us on the contract if it has a loan value. We describe loan value below. The contract must be in force, the Insured must be living, you must assign the contract to us as sole security for the loan, and the resulting contract debt must not be more than the loan value.

If there is already contract debt when you borrow from us, we will add the new amount you borrow and unpaid interest to that debt.

### **Interest Charge**

We will charge interest daily on any loan at a rate that is equivalent to an effective annual rate of 8%. Interest is due on each contract anniversary, when you borrow from us (if there is already contract debt), or when all or part of the loan is paid back, whichever comes first. If interest is not paid when due, we will increase the loan amount by any unpaid interest.

### **Loan Value**

If the contract is in force with no premium past due beyond the 31-day grace period, the loan value on a premium due date is the Rider Cash Value on that date. In the grace period of a past due premium, the loan value is what it was on the due date of that premium. At any other time, the loan value is the amount that would grow at the loan interest rate to equal the loan value on the next premium due date.

If the contract is in force as reduced paid-up insurance, the loan value is the net value we describe in the Basis of Computation below. On a contract anniversary, the loan value is determined on that date. At any other time, the loan value is the amount that would grow at the loan interest rate to equal the loan value on the next anniversary.

This contract will have no loan value on or after the Rider Benefit Date.

### **Contract Debt**

Contract debt at any time means the loan on the contract at that time, plus the interest we have charged that is not yet due and that we have not yet added to the loan.

### **Repayment**

All or part of any contract debt may be paid back at any time while the Insured is living. But if there is contract debt at the end of the grace period of a past due premium, it may be paid back only if the contract is reinstated. When we settle the contract, any contract debt is due us. We will make an adjustment so that the proceeds will not include the amount of that debt.

### **Postponement of Loans**

We will usually make a loan promptly. But we have the right to postpone making a loan for up to six months unless it will be used to pay premiums on this or other contracts with us.

### **Excess Contract Debt**

If contract debt ever grows to be equal to or more than the loan value, the contract will expire without value 31 days after we mail you a notice. In the notice we will state the amount that, if paid to us, will reduce the contract debt enough to keep the contract's benefits from ending for a limited time.

### **Automatic Premium Loan**

If this provision is in effect at the end of the 31-day grace period of a past due premium, the premium will be paid by charging it as a loan on the contract if there is enough loan value to do so. When we compute the loan value, we will do so as if the premium to be borrowed had been paid.

This provision will take effect if elected in the application, or you may elect it at a later time by notifying us in a form that meets our needs. You may revoke such election at any time.

If there is insufficient loan value to pay a past due premium, the contract will end and provide no further benefit except as stated in this rider.

## **CONVERSION**

In the Conversion To Another Plan Of Insurance provision, we describe the conditions under which you may convert this policy to a new contract of life insurance on the Insured's life. If this contract is converted before the Rider Benefit Date, however:

1. we will pay you the Rider Net Cash Value as of the contract date of the new contract, and;
2. the basic insurance amount of the new contract may not exceed the basic insurance amount of this contract less the Rider Net Cash Value.

## **BASIS OF COMPUTATION**

We compute all net single premiums and values for reduced paid-up insurance using:

1. the Commissioners 2001 Standard Ordinary Smoker and Nonsmoker Ultimate Mortality Table;
2. the issue age of the Insured, and the length of time since the contract date;
3. continuous functions based on age last birthday; and
4. an effective interest rate of 5% a year.

The cash surrender values provided by this contract are at least as large as those set by law where it is delivered. Where required, we have given the insurance regulator a detailed statement of how we compute values and benefits.

## **SETTLEMENT OPTIONS**

You may have the proceeds (that is, the death benefit, the Rider Net Cash Value, and the Rider Benefit) paid in a single sum or under one of the optional modes of settlement described in the Settlement Options provision of this contract.

## **TERMINATION**

This benefit will end on the earliest of:

1. the date this contract is cancelled and surrendered for the rider cash value;
2. the date this contract ends due to excess contract debt;
3. the date this contract is converted to a new plan of life insurance; and
4. the Rider Benefit Date.

If this rider ends as in items 1 or 3 above, we will return that part of any scheduled premium due and paid by you that covers the period following the termination date.

### **This Supplementary Benefit rider attached to this contract on the Contract Date**

Pruco Life Insurance Company

By



Secretary

Table of Attained Age Factors

These factors are used to determine your death benefit and reduced paid-up insurance amount as described in the Rider For Return Of Premium.

The Insured's Attained Age is the issue age found on contract data page 3 plus the length of time since the contract date. On a date that falls between two anniversaries, the factor will fall between the factors for those two anniversaries considering the time that has passed since the last anniversary. The Insured's smoker status is found under the table of Rider Surrender Factors.

Attained Age	Smoker		Nonsmoker		Attained Age	Smoker		Nonsmoker	
	Male	Female	Male	Female		Male	Female	Male	Female
15	86.81	71.05	66.02	52.36	55	397.68	357.85	330.68	276.72
16	90.54	74.26	68.69	54.63	56	410.72	369.49	343.25	286.92
17	94.27	77.57	71.39	56.99	57	423.87	381.24	356.08	297.31
18	98.02	81.00	74.13	59.44	58	437.20	393.10	369.21	307.89
19	101.87	84.57	76.97	62.00	59	450.79	405.08	382.69	318.67
20	105.84	88.28	79.93	64.67	60	464.58	417.17	396.48	329.66
21	109.94	92.14	83.03	67.47	61	478.46	429.39	410.51	340.87
22	114.20	96.16	86.29	70.39	62	492.30	441.70	424.72	352.28
23	118.61	100.36	89.72	73.46	63	506.01	454.11	439.03	363.90
24	123.19	104.74	93.31	76.67	64	516.56	466.64	453.43	375.73
25	127.93	109.31	97.07	80.04	65	533.00	479.28	467.91	387.75
26	132.84	114.06	101.00	83.56	66	546.40	492.00	482.51	399.94
27	137.92	119.00	105.10	87.22	67	559.86	504.79	497.25	412.28
28	143.22	124.15	109.38	91.05	68	573.43	517.59	512.17	424.74
29	148.79	129.50	113.90	95.04	69	587.16	530.37	527.27	437.28
30	154.65	135.08	118.66	99.21	70	601.03	543.08	542.53	449.88
31	160.83	140.89	123.68	103.56	71	614.98	555.64	557.86	462.47
32	167.32	146.92	128.96	108.10	72	628.82	567.96	573.11	474.97
33	174.12	153.20	134.50	112.83	73	642.42	579.98	588.15	487.34
34	181.22	159.71	140.29	117.76	74	655.87	591.61	603.00	499.53
35	188.64	166.44	146.37	122.88	75	669.14	602.85	617.63	511.44
36	196.37	173.41	152.71	128.20	76	682.14	613.65	632.00	523.00
37	204.41	180.63	159.33	133.72	77	694.80	623.92	646.00	534.12
38	212.75	188.13	166.23	139.48	78	706.94	633.57	659.45	544.68
39	221.40	195.92	173.41	145.49	79	718.33	642.48	672.12	554.56
40	230.35	204.03	180.89	151.75	80	728.83	650.50	683.81	563.62
41	239.59	212.45	188.67	158.27	81	738.23	657.14	694.30	571.42
42	249.10	221.20	196.73	165.06	82	746.37	661.76	703.35	577.43
43	258.87	230.24	205.09	172.12	83	753.10	664.06	710.75	581.36
44	268.86	239.61	213.72	179.45	84	758.10	663.65	716.10	582.89
45	279.07	249.27	222.63	187.05	85	760.72	659.92	718.79	581.39
46	289.51	259.22	231.83	194.91	86	760.04	652.49	717.96	576.39
47	300.20	269.45	241.33	203.04	87	754.87	640.01	712.44	566.67
48	311.22	279.91	251.18	211.42	88	743.53	620.28	700.61	550.33
49	322.66	290.57	261.44	220.05	89	723.55	591.20	680.13	525.55
50	334.49	301.41	272.11	228.93	90	691.24	550.38	647.59	490.19
51	346.67	312.42	283.16	238.04	91	641.27	496.60	598.17	443.13
52	359.14	323.58	294.56	247.39	92	565.49	426.63	524.63	381.33
53	371.84	334.88	306.30	256.95	93	450.46	331.21	415.14	296.41
54	384.71	346.31	318.36	266.72	94	274.27	196.86	250.67	175.87
					95	0.00	0.00	0.00	0.00

**TABLE OF RIDER SURRENDER FACTORS  
FOR RIDER [TB 165 (20)]  
Rating Class: [NONSMOKER]  
Smoker Status: [NONSMOKER]**

These factors are used to determine the Rider Cash Value and loan value as described in the Rider For Return of Premium.

<b>End of Contract Year</b>	<b>Factors</b>
1 [- 2]	0.00000
[3]	[.01722]
[4]	[.19979]
[5]	[.31704]
[6]	[.40199]
[7]	[.46883]
[8]	[.52467]
[9]	[.57348]
[10]	[.61769]
[11]	[.65884]
[12]	[.69799]
[13]	[.73583]
[14]	[.77290]
[15]	[.80962]
[16]	[.84638]
[17]	[.88351]
[18]	[.92130]
[19]	[.96003]
[20]	[1.00000]

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TABLE(S) CONTINUED ON NEXT PAGE

**TABLE OF CASH VALUES AND REDUCED PAID-UP INSURANCE**

The following values are based on the Rider Cash Value, Reduced Paid-Up Insurance and Basis of Computation provisions of this rider. These cash values and reduced paid-up values assume you pay all premiums annually on or before their due dates. Any changes to these assumptions may cause the actual cash values and reduced paid-up insurance to deviate from those shown below.

<b>End of Contract Year</b>	<b>Cash Value</b>	<b>Reduced Paid-Up Insurance</b>
1[- 2]	\$0.00	[\$0.00]
[3]	[\$40.20]	[\$241.83]
[4]	[\$621.86]	[\$3,586.07]
[5]	[\$1,233.51]	[\$6,819.12]
[6]	[\$1,876.83]	[\$9,947.69]
[7]	[\$2,553.71]	[\$12,980.79]
[8]	[\$3,266.13]	[\$15,925.35]
[9]	[\$4,016.23]	[\$18,792.02]
[10]	[\$4,806.49]	[\$21,589.59]
[11]	[\$5,639.37]	[\$24,325.45]
[12]	[\$6,517.61]	[\$27,007.04]
[13]	[\$7,443.52]	[\$29,634.21]
[14]	[\$8,419.94]	[\$32,206.01]
[15]	[\$9,449.97]	[\$34,728.49]
[16]	[\$10,537.63]	[\$37,214.40]
[17]	[\$11,687.41]	[\$39,677.52]
[18]	[\$12,904.21]	[\$42,129.32]
[19]	[\$12,904.21]	[\$44,583.87]
[20]	[\$15,562.80]	N/A

If we need to compute these values during a contract year, we will take into account the time since the start of the year and any premiums paid for the year. If you ask us, we will tell you the values for durations other than those shown in this table.

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END OF TABLE

**CONTRACT DATA****Insured**

[JOHN DOE] [Male], [Issue Age 35]

**Rating Class**

[Nonsmoker]

**Basic Contract Information**

Policy Number [XX XXX XXX]  
 Contract Date [November 2, 2009]  
 Term Period [60] years  
 Premium Period [60] years (premiums for the Basic Amount are level for [20] years, then increase annually for [40] years.)  
 Beneficiary [Class 1 MARY DOE, wife]  
 [Class 2 ROBERT DOE, son]

**Life Insurance on the Insured**

Basic Amount [\$100,000.00]

**Other Benefit(s) on the Insured** (see appropriate form for details)

[Rider TB 165 (20) – Rider for Return of Premium.]

**Schedule of Premiums**

Total Initial Premium [on Contract Date] for the following modes:

Annual	Semi-annual	Quarterly	Monthly
[\$778.14]	[\$389.07]	[\$194.54]	[\$64.81]

Contract premiums are due on the contract date and every [12] months after that date. The [annual] premium is [\$778.14] and changes as shown below.

Premium Change Date(s)	[Total Annual] Contract Premiums
[NOV 2, 2029]	[\$1,601.00]
[NOV 2, 2030]	[\$1,782.00]
[NOV 2, 2031]	[\$1,958.00]
[NOV 2, 2032]	[\$2,134.00]
[NOV 2, 2033]	[\$2,340.00]

CONTRACT DATA CONTINUED ON NEXT PAGE

**CONTRACT DATA CONTINUED**

Premium Change Date(s)	[Total Annual] Contract Premiums
[NOV 2, 2034]	[\$2,591.00]
[NOV 2, 2035]	[\$2,896.00]
[NOV 2, 2036]	[\$3,251.00]
[NOV 2, 2037]	[\$3,638.00]
[NOV 2, 2038]	[\$4,043.00]
[NOV 2, 2039]	[\$4,463.00]
[NOV 2, 2040]	[\$4,890.00]
[NOV 2, 2041]	[\$5,335.00]
[NOV 2, 2042]	[\$5,805.00]
[NOV 2, 2043]	[\$6,333.00]
[NOV 2, 2044]	[\$6,949.00]
[NOV 2, 2045]	[\$7,697.00]
[NOV 2, 2046]	[\$8,572.00]
[NOV 2, 2047]	[\$9,493.00]
[NOV 2, 2048]	[\$10,483.00]
[NOV 2, 2049]	[\$11,561.00]
[NOV 2, 2050]	[\$12,777.00]
[NOV 2, 2051]	[\$14,190.00]
[NOV 2, 2052]	[\$15,832.00]
[NOV 2, 2053]	[\$17,672.00]
[NOV 2, 2054]	[\$19,723.00]
[NOV 2, 2055]	[\$21,953.00]
[NOV 2, 2056]	[\$24,316.00]
[NOV 2, 2057]	[\$26,895.00]
[NOV 2, 2058]	[\$29,763.00]
[NOV 2, 2059]	[\$32,953.00]
[NOV 2, 2060]	[\$36,462.00]
[NOV 2, 2061]	[\$40,255.00]
[NOV 2, 2062]	[\$44,286.00]
[NOV 2, 2063]	[\$48,516.00]
[NOV 2, 2064]	[\$52,729.00]
[NOV 2, 2065]	[\$56,876.00]
[NOV 2, 2066]	[\$61,221.00]
[NOV 2, 2067]	[\$65,802.00]
[NOV 2, 2068]	[\$70,628.00]

Each contract premium consists of the premium for the basic amount and the premium(s) for the benefit(s) shown in the section that follows.

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CONTRACT DATA CONTINUED ON NEXT PAGE

PROCESSING DATE: [XXX XX, XXXX]  
POLICY NO. [XX XXX XXX]

**CONTRACT DATA CONTINUED**

**Premium(s) for Benefit(s)**

[Premium for Benefit TB 165 (20) (return of premium):]

[Starting on the Contract Date]

[\$647.14] payable until  
[NOV 2, 2029].

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END OF CONTRACT DATA

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## **RIDER FOR RETURN OF PREMIUM**

This benefit is a part of this contract only if it is listed on a contract data page.

### **Rider Benefit**

Subject to all of the provisions of this rider and the rest of the contract, we will pay you the Accumulated Premiums less any contract debt on the Rider Benefit Date if all due premiums have been paid and the Insured is living on that date.

### **Benefit Premiums**

We show the premiums for this benefit on a contract data page.

## **DEFINITIONS**

### **Scheduled Premiums**

The Scheduled Premiums and their due dates are shown under the Schedule of Premiums.

### **Accumulated Premiums**

The total of all Scheduled Premiums due and paid. The Accumulated Premiums will not include any interest charged on premiums in arrears needed to reinstate this contract (see Reinstatement).

### **Rider Benefit Date**

The contract anniversary at the end of the level premium period shown under Premium Period on page 3. This rider expires on the Rider Benefit Date and will provide no further benefit except as described under Reduced Paid-Up Insurance below.

## **RIDER CASH VALUE**

At any time prior to the Rider Benefit Date, you may surrender this contract for the Rider Net Cash Value. The Rider Net Cash Value at any time is the Rider Cash Value less any contract debt. To do so, you must ask us in a form that meets our needs. We may require you to send us the contract. This contract will terminate upon surrender and will provide no further benefit.

Here is how we compute the Rider Cash Value:

1. If no premium is past due beyond the grace period described under Premium Payment, the Rider Cash Value is the Accumulated Premiums times the Rider Surrender Factor as of the date we receive your request. The Rider Surrender Factor at the end of each contract year is shown under the Table of Rider Surrender Factors. On a date that falls between two anniversaries, the factor will fall between the factors for those two anniversaries considering the time that has passed since the last anniversary.
2. If premium payment is past due three months or less, we will compute the Rider Cash Value as of the due date of the first unpaid premium. But we will adjust this value for any loan you take out or pay back in the grace period of that premium.
3. If premium payment is past due more than three months, the Rider Cash Value as of any date will be the value on that date of any reduced paid-up insurance then in force. Such cash value is computed by multiplying the appropriate attained age factor (see Table of Attained Age Factors) by the amount of reduced paid-up insurance and dividing the result by \$1,000.

However, within 30 days after an anniversary, the Rider Cash Value under 2 and 3 will not be less than the Rider Cash Value on that anniversary, adjusted for any loan you take out or pay back in those 30 days.

On and after the fifth contract anniversary, if all due premiums are paid, the Rider Cash Value will not be less than \$2.00 per \$1,000 of the basic amount shown on contract data page 3.

## **DEATH BENEFIT**

Under the Death Benefits provision, we describe the amount we will pay upon the death of the Insured within the term period if the contract is in force at the time of death with no premium past due beyond the 31-day grace period. If death occurs before the Rider Benefit Date, however, we will pay the greater of (a) the Basic Amount as shown under Life Insurance on the Insured on contract data page 3 and (b) the Rider Net Cash Value as of the date of death divided by the appropriate factor shown in or derived from the Table of Attained Age Factors attached to this rider multiplied by \$1,000.

## **REDUCED PAID-UP INSURANCE**

Under the Premium Payment provision, we state that if a past due premium has not been paid before its grace period is over, the contract will end and have no value. However, if that due date is before the Rider Benefit Date, this contract may continue to provide a death benefit as reduced paid-up insurance.

The contract will be in force as reduced paid-up insurance if: (a) a premium is past due beyond the 31-day grace period, (b) the Rider Net Cash Value is greater than zero, (c) the due date of the past due premium is prior to the Rider Benefit Date, and (d) you have not surrendered the contract for its net cash value.

If a contract is in force as reduced paid-up insurance and the Insured dies within the term period shown on contract data page 3, we will pay a benefit equal to the amount of reduced paid-up insurance, minus any contract debt. The reduced paid-up insurance will have cash and loan values.

The amount of the reduced paid-up insurance will be what is provided when we use the Rider Net Cash Value at the net single premium rate. This rate depends on the Insured's issue age, sex, smoker status and the length of the time since the contract date. The amount of reduced paid-up insurance may be obtained by (1) dividing the Rider Net Cash Value as of the due date of the premium in default by the appropriate factor shown in or derived from the Table of Attained Age Factors attached to this rider and (2) multiplying the result by \$1,000.

If this contract is in force as reduced paid-up insurance at the end of the five-year reinstatement period (see Reinstatement) we reserve the right to surrender this contract for the Rider Net Cash Value if the amount of paid-up insurance is \$250 or less.

### **Computations**

We will make all computations for reduced paid-up insurance as of the due date of a past due premium. But we will consider any loan you take out or pay back in the grace period of that premium.

## **REINSTATEMENT**

The Reinstatement provision describes how this contract may be reinstated after the grace period of a past due premium.

Additionally, this contract may not be reinstated if the contract had been surrendered for the Rider Cash Value, or this contract had been terminated because of excess contract debt.

If the date we approve your request for reinstatement is before the Rider Benefit Date, we will reinstate both the contract and this rider; they may not be reinstated separately.

If the date we approve your request for reinstatement is after the Rider Benefit Date but the due date of the first past due premium is before that date, we will pay the Rider Benefit on the date we approve your request.

Any contract debt must be restored or paid back with interest to date at the loan interest rate. If that debt with interest would exceed the loan value of the reinstated contract, the excess must be paid to us before reinstatement.

## **LOANS**

### **Loan Requirements**

You may borrow from us on the contract if it has a loan value. We describe loan value below. The contract must be in force, the Insured must be living, you must assign the contract to us as sole security for the loan, and the resulting contract debt must not be more than the loan value.

If there is already contract debt when you borrow from us, we will add the new amount you borrow and unpaid interest to that debt.

### **Interest Charge**

We will charge interest daily on any loan at a rate that is equivalent to an effective annual rate of 8%. Interest is due on each contract anniversary, when you borrow from us (if there is already contract debt), or when all or part of the loan is paid back, whichever comes first. If interest is not paid when due, we will increase the loan amount by any unpaid interest.

### **Loan Value**

If the contract is in force with no premium past due beyond the 31-day grace period, the loan value on a premium due date is the Rider Cash Value on that date. In the grace period of a past due premium, the loan value is what it was on the due date of that premium. At any other time, the loan value is the amount that would grow at the loan interest rate to equal the loan value on the next premium due date.

If the contract is in force as reduced paid-up insurance, the loan value is the net value we describe in the Basis of Computation below. On a contract anniversary, the loan value is determined on that date. At any other time, the loan value is the amount that would grow at the loan interest rate to equal the loan value on the next anniversary.

This contract will have no loan value on or after the Rider Benefit Date.

### **Contract Debt**

Contract debt at any time means the loan on the contract at that time, plus the interest we have charged that is not yet due and that we have not yet added to the loan.

### **Repayment**

All or part of any contract debt may be paid back at any time while the Insured is living. But if there is contract debt at the end of the grace period of a past due premium, it may be paid back only if the contract is reinstated. When we settle the contract, any contract debt is due us. We will make an adjustment so that the proceeds will not include the amount of that debt.

### **Postponement of Loans**

We will usually make a loan promptly. But we have the right to postpone making a loan for up to six months unless it will be used to pay premiums on this or other contracts with us.

### **Excess Contract Debt**

If contract debt ever grows to be equal to or more than the loan value, the contract will expire without value 31 days after we mail you a notice. In the notice we will state the amount that, if paid to us, will reduce the contract debt enough to keep the contract's benefits from ending for a limited time.

### **Automatic Premium Loan**

If this provision is in effect at the end of the 31-day grace period of a past due premium, the premium will be paid by charging it as a loan on the contract if there is enough loan value to do so. When we compute the loan value, we will do so as if the premium to be borrowed had been paid.

This provision will take effect if elected in the application, or you may elect it at a later time by notifying us in a form that meets our needs. You may revoke such election at any time.

If there is insufficient loan value to pay a past due premium, the contract will end and provide no further benefit except as stated in this rider.

## **CONVERSION**

In the Conversion To Another Plan Of Insurance provision, we describe the conditions under which you may convert this policy to a new contract of life insurance on the Insured's life. If this contract is converted before the Rider Benefit Date, however:

1. we will pay you the Rider Net Cash Value as of the contract date of the new contract, and;
2. the basic insurance amount of the new contract may not exceed the basic insurance amount of this contract less the Rider Net Cash Value.

## **BASIS OF COMPUTATION**

We compute all net single premiums and values for reduced paid-up insurance using:

1. the Commissioners 2001 Standard Ordinary Smoker and Nonsmoker Ultimate Mortality Table;
2. the issue age of the Insured, and the length of time since the contract date;
3. continuous functions based on age last birthday; and
4. an effective interest rate of 5% a year.

The cash surrender values provided by this contract are at least as large as those set by law where it is delivered. Where required, we have given the insurance regulator a detailed statement of how we compute values and benefits.

## **SETTLEMENT OPTIONS**

You may have the proceeds (that is, the death benefit, the Rider Net Cash Value, and the Rider Benefit) paid in a single sum or under one of the optional modes of settlement described in the Settlement Options provision of this contract.

## **TERMINATION**

This benefit will end on the earliest of:

1. the date this contract is cancelled and surrendered for the rider cash value;
2. the date this contract ends due to excess contract debt;
3. the date this contract is converted to a new plan of life insurance; and
4. the Rider Benefit Date.

If this rider ends as in items 1 or 3 above, we will return that part of any scheduled premium due and paid by you that covers the period following the termination date.

### **This Supplementary Benefit rider attached to this contract on the Contract Date**

Pruco Life Insurance Company

By



Secretary

Table of Attained Age Factors

These factors are used to determine your death benefit and reduced paid-up insurance amount as described in the Rider For Return Of Premium.

The Insured's Attained Age is the issue age found on contract data page 3 plus the length of time since the contract date. On a date that falls between two anniversaries, the factor will fall between the factors for those two anniversaries considering the time that has passed since the last anniversary. The Insured's smoker status is found under the table of Rider Surrender Factors.

Attained Age	Smoker		Nonsmoker		Attained Age	Smoker		Nonsmoker	
	Male	Female	Male	Female		Male	Female	Male	Female
15	86.81	71.05	66.02	52.36	55	397.68	357.85	330.68	276.72
16	90.54	74.26	68.69	54.63	56	410.72	369.49	343.25	286.92
17	94.27	77.57	71.39	56.99	57	423.87	381.24	356.08	297.31
18	98.02	81.00	74.13	59.44	58	437.20	393.10	369.21	307.89
19	101.87	84.57	76.97	62.00	59	450.79	405.08	382.69	318.67
20	105.84	88.28	79.93	64.67	60	464.58	417.17	396.48	329.66
21	109.94	92.14	83.03	67.47	61	478.46	429.39	410.51	340.87
22	114.20	96.16	86.29	70.39	62	492.30	441.70	424.72	352.28
23	118.61	100.36	89.72	73.46	63	506.01	454.11	439.03	363.90
24	123.19	104.74	93.31	76.67	64	516.56	466.64	453.43	375.73
25	127.93	109.31	97.07	80.04	65	533.00	479.28	467.91	387.75
26	132.84	114.06	101.00	83.56	66	546.40	492.00	482.51	399.94
27	137.92	119.00	105.10	87.22	67	559.86	504.79	497.25	412.28
28	143.22	124.15	109.38	91.05	68	573.43	517.59	512.17	424.74
29	148.79	129.50	113.90	95.04	69	587.16	530.37	527.27	437.28
30	154.65	135.08	118.66	99.21	70	601.03	543.08	542.53	449.88
31	160.83	140.89	123.68	103.56	71	614.98	555.64	557.86	462.47
32	167.32	146.92	128.96	108.10	72	628.82	567.96	573.11	474.97
33	174.12	153.20	134.50	112.83	73	642.42	579.98	588.15	487.34
34	181.22	159.71	140.29	117.76	74	655.87	591.61	603.00	499.53
35	188.64	166.44	146.37	122.88	75	669.14	602.85	617.63	511.44
36	196.37	173.41	152.71	128.20	76	682.14	613.65	632.00	523.00
37	204.41	180.63	159.33	133.72	77	694.80	623.92	646.00	534.12
38	212.75	188.13	166.23	139.48	78	706.94	633.57	659.45	544.68
39	221.40	195.92	173.41	145.49	79	718.33	642.48	672.12	554.56
40	230.35	204.03	180.89	151.75	80	728.83	650.50	683.81	563.62
41	239.59	212.45	188.67	158.27	81	738.23	657.14	694.30	571.42
42	249.10	221.20	196.73	165.06	82	746.37	661.76	703.35	577.43
43	258.87	230.24	205.09	172.12	83	753.10	664.06	710.75	581.36
44	268.86	239.61	213.72	179.45	84	758.10	663.65	716.10	582.89
45	279.07	249.27	222.63	187.05	85	760.72	659.92	718.79	581.39
46	289.51	259.22	231.83	194.91	86	760.04	652.49	717.96	576.39
47	300.20	269.45	241.33	203.04	87	754.87	640.01	712.44	566.67
48	311.22	279.91	251.18	211.42	88	743.53	620.28	700.61	550.33
49	322.66	290.57	261.44	220.05	89	723.55	591.20	680.13	525.55
50	334.49	301.41	272.11	228.93	90	691.24	550.38	647.59	490.19
51	346.67	312.42	283.16	238.04	91	641.27	496.60	598.17	443.13
52	359.14	323.58	294.56	247.39	92	565.49	426.63	524.63	381.33
53	371.84	334.88	306.30	256.95	93	450.46	331.21	415.14	296.41
54	384.71	346.31	318.36	266.72	94	274.27	196.86	250.67	175.87
					95	0.00	0.00	0.00	0.00

**TABLE OF RIDER SURRENDER FACTORS  
FOR RIDER [TB 165 (30)]  
Rating Class: [NONSMOKER]  
Smoker Status: [NONSMOKER]**

These factors are used to determine the Rider Cash Value and loan value as described in the Rider For Return of Premium.

<b>End of Contract Year</b>	<b>Factors</b>
1 [- 3]	0.00000
[4]	[0.02118]
[5]	[0.12161]
[6]	[0.19307]
[7]	[0.24821]
[8]	[0.29335]
[9]	[0.33204]
[19]	[0.36641]
[11]	[0.39783]
[12]	[0.42724]
[13]	[0.45526]
[14]	[0.48235]
[15]	[0.50888]
[16]	[0.53516]
[17]	[0.56147]
[18]	[0.58802]
[19]	[0.61504]
[20]	[0.64274]
[21]	[0.67133]
[22]	[0.70095]
[23]	[0.73174]
[24]	[0.76383]
[25]	[0.79746]
[26]	[0.83290]
[27]	[0.87052]
[28]	[0.91113]
[29]	[0.95372]
[30]	[1.00000]

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TABLE(S) CONTINUED ON NEXT PAGE

**TABLE OF CASH VALUES AND REDUCED PAID-UP INSURANCE**

The following values are based on the Rider Cash Value, Reduced Paid-Up Insurance and Basis of Computation provisions of this rider. These cash values and reduced paid-up values assume you pay all premiums annually on or before their due dates. Any changes to these assumptions may cause the actual cash values and reduced paid-up insurance to deviate from those shown below.

<b>End of Contract Year</b>	<b>Cash Value</b>	<b>Reduced Paid-Up Insurance</b>
1[- 4]	\$0.00	[\$0.00]
[5]	[\$65.75]	[\$379.16]
[6]	[\$471.87]	[\$2,608.60]
[7]	[\$898.98]	[\$4,764.83]
[8]	[\$1,348.35]	[\$6,853.81]
[9]	[\$1,821.21]	[\$8,880.05]
[10]	[\$2,319.09]	[\$10,851.07]
[11]	[\$2,843.49]	[\$12,772.27]
[12]	[\$3,396.05]	[\$14,648.88]
[13]	[\$3,978.66]	[\$16,486.39]
[14]	[\$4,592.90]	[\$18,285.29]
[15]	[\$5,240.52]	[\$20,044.83]
[16]	[\$5,923.67]	[\$21,769.39]
[17]	[\$6,644.89]	[\$23,466.91]
[18]	[\$7,407.29]	[\$25,146.96]
[19]	[\$8,213.89]	[\$26,816.49]
[20]	[\$9,068.62]	[\$28,485.43]
[21]	[\$9,975.84]	[\$30,167.65]
[22]	[\$10,940.56]	[\$31,873.45]
[23]	[\$11,967.24]	[\$33,608.29]
[24]	[\$13,060.77]	[\$35,374.91]
[25]	[\$14,226.30]	[\$37,174.48]
[26]	[\$15,471.52]	[\$39,022.20]
[27]	[\$16,805.46]	[\$40,938.00]
[28]	[\$18,240.08]	[\$42,946.13]
[29]	[\$19,798.05]	[\$45,094.98]
[30]	[\$21,463.62]	N/A

If we need to compute these values during a contract year, we will take into account the time since the start of the year and any premiums paid for the year. If you ask us, we will tell you the values for durations other than those shown in this table.

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END OF TABLE

**CONTRACT DATA****Insured**

[JOHN DOE] [Male], [Issue Age 35]

**Rating Class**

[Nonsmoker]

**Basic Contract Information**

Policy Number [XX XXX XXX]  
 Contract Date [November 2, 2009]  
 Term Period [60] years  
 Premium Period [60] years (premiums for the Basic Amount are level for [30] years, then increase annually for [30] years.)  
 Beneficiary [Class 1 MARY DOE, wife]  
 [Class 2 ROBERT DOE, son]

**Life Insurance on the Insured**

Basic Amount [\$100,000.00]

**Other Benefit(s) on the Insured** (see appropriate form for details)

[Rider TB 165 (30) – Rider for Return of Premium.]

**Schedule of Premiums**

Total Initial Premium [on Contract Date] for the following modes:

Annual	Semi-annual	Quarterly	Monthly
[\$776.04]	[\$388.02]	[\$194.01]	[\$64.63]

Contract premiums are due on the contract date and every [12] months after that date. The [annual] premium is [\$776.04] and changes as shown below.

Premium Change Date(s)	[Total Annual] Contract Premiums
[NOV 2, 2039]	[\$4,463.00]
[NOV 2, 2040]	[\$4,890.00]
[NOV 2, 2041]	[\$5,335.00]
[NOV 2, 2042]	[\$5,805.00]
[NOV 2, 2043]	[\$6,333.00]

CONTRACT DATA CONTINUED ON NEXT PAGE

**CONTRACT DATA CONTINUED**

Premium Change Date(s)	[Total Annual] Contract Premiums
[NOV 2, 2044]	[\$6,949.00]
[NOV 2, 2045]	[\$7,697.00]
[NOV 2, 2046]	[\$8,572.00]
[NOV 2, 2047]	[\$9,493.00]
[NOV 2, 2048]	[\$10,483.00]
[NOV 2, 2049]	[\$11,561.00]
[NOV 2, 2050]	[\$12,777.00]
[NOV 2, 2051]	[\$14,190.00]
[NOV 2, 2052]	[\$15,832.00]
[NOV 2, 2053]	[\$17,672.00]
[NOV 2, 2054]	[\$19,723.00]
[NOV 2, 2055]	[\$21,953.00]
[NOV 2, 2056]	[\$24,316.00]
[NOV 2, 2057]	[\$26,895.00]
[NOV 2, 2058]	[\$29,763.00]
[NOV 2, 2059]	[\$32,953.00]
[NOV 2, 2060]	[\$36,462.00]
[NOV 2, 2061]	[\$40,255.00]
[NOV 2, 2062]	[\$44,286.00]
[NOV 2, 2063]	[\$48,516.00]
[NOV 2, 2064]	[\$52,729.00]
[NOV 2, 2065]	[\$56,876.00]
[NOV 2, 2066]	[\$61,221.00]
[NOV 2, 2067]	[\$65,802.00]
[NOV 2, 2068]	[\$70,628.00]

Each contract premium consists of the premium for the basic amount and the premium(s) for the benefit(s) shown in the section that follows.

---

**Premium(s) for Benefit(s)**

[Premium for Benefit TB 165 (30) (return of premium):]

[Starting on the Contract Date]

[\$602.04] payable until  
[NOV 2, 2039].

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END OF CONTRACT DATA

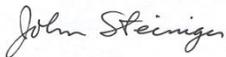


**STATE OF ARKANSAS**  
**READABILITY CERTIFICATION**

**COMPANY NAME:** Pruco Life Insurance Company

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

<b>Form Number</b>	<b>Score</b>
PLTIR-2009	62.4
TB 165 (15)-2009	56.1
TB 165 (20)-2009	56.1
TB 165 (30)-2009	56.1



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Name: John Steiniger  
Title: Assistant Vice President

9/15/2009

---

Date

## Certificate of Compliance with Arkansas Rule and Regulation 19

Insurer: Pruco Life Insurance Company

Form Number(s): PLTIR-2009

I hereby certify that the filing above meets all applicable Arkansas requirements including the requirements of Rule and Regulation 19.



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Signature of Company Officer

John Steiniger

---

Name

Assistant Vice President

---

Title

09/15/2009

---

Date

- The Prudential Insurance Company of America
  - Pruco Life Insurance Company, a subsidiary of  
The Prudential Insurance Company of America
- Corporate Offices, Newark, New Jersey

**Part 1**

Policy number \_\_\_\_\_

Check here if policy change.

**A About the  
Primary  
Proposed  
Insured**

1. Name of primary proposed insured (or current insured person, if policy change)  
\_\_\_\_\_  
*(First name, middle initial, last name)*
2. Social Security number \_\_\_\_\_
3. Sex  female  male
4. Marital status  single  married  widowed  separated  divorced
5. Date of birth \_\_\_\_\_  
*month day year*
6. Age \_\_\_\_\_
7. State of birth (country if not U.S.) \_\_\_\_\_
8. Billing address \_\_\_\_\_  
*(street, city, state, ZIP)*
9. Home address \_\_\_\_\_  
*(if different) (street, city, state, ZIP)*
10. Home telephone number (\_\_\_\_) \_\_\_\_\_
11. Business telephone number (\_\_\_\_) \_\_\_\_\_
12. Current employer \_\_\_\_\_
13. List all existing life insurance coverage.  Check here if none.

Company	Amount	Year issued	Type of insurance	To be replaced?
	\$		<input type="checkbox"/> Individual <input type="checkbox"/> Group	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$		<input type="checkbox"/> Individual <input type="checkbox"/> Group	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$		<input type="checkbox"/> Individual <input type="checkbox"/> Group	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$		<input type="checkbox"/> Individual <input type="checkbox"/> Group	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$		<input type="checkbox"/> Individual <input type="checkbox"/> Group	<input type="checkbox"/> Yes <input type="checkbox"/> No

**B All Other  
Proposed  
Insureds**

Name <i>(first, initial, last)</i>	relationship to primary proposed insured	sex <i>(F/M)</i>	date of birth <i>(M/D/Y)</i>	age	state of birth <i>(country if not U.S.)</i>	total life insurance in all companies
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

*(Include applicant if requesting Applicant's Waiver of Premium [AWP] Benefit)*

**Part 1**

**C Coverage Information**

1. Plan of insurance \_\_\_\_\_  
If applicable to the plan, check one.  Level Death Benefit  Variable Death Benefit
  2. Initial amount of insurance \$ \_\_\_\_\_
  3. Supplementary benefits and riders
    - Waiver of Premium  Accidental Death Benefit \$ \_\_\_\_\_
    - Applicant's Waiver of Premium  Option to Purchase Additional Insurance (OPAI) \$ \_\_\_\_\_
    - Automatic Premium Loan  Option to Purchase Paid-up Life Insurance Additions
    - Acceleration of Death Benefits (Living Needs Benefit) *(include details in section G, **Special Requests**)*
- Other riders and benefits *(indicate amount where applicable)* \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**D Beneficiaries and Ownership**  
*(If trust, provide name of trust, trustee and date of trust)*

	Name	Relationship to primary proposed insured	Age
Primary (Class 1)			
Contingent (Class 2)			

2. Is the policyowner someone other than the primary proposed insured?  Yes  No  
*(If Yes, provide information requested below.)*  
Name \_\_\_\_\_ Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
*(First name, middle initial, last name) month day year*  
Address \_\_\_\_\_  
*(street, city, state, ZIP)*

**E Payment Information**

- 1a. Within the past 90 days, has any proposed insured been hospitalized or been advised by a member of the medical profession that he or she needs hospitalization for any reason other than for normal pregnancy or well-baby care?  Yes  No
- 1b. Within the past 12 months, has any proposed insured received treatment or advice from a member of the medical profession for heart disease, chest pain, stroke or cancer (except skin)?  Yes  No
2. Is a medical examination required on the primary proposed insured?  Yes  No  
second proposed insured?  Yes  No
3. Premium payment mode *(collect full modal premium if prepaid)*
  - Annual  Semiannual  Quarterly  Monthly
  - Electronic Funds Transfer (EFT)  Payroll Budget  Government Allotment
4. Amount of prepayment submitted with this application \$ \_\_\_\_\_ *(include any unscheduled premium payments)*  
 None *(must be None if 1a or 1b is Yes, except for Gibraltar [GIB] products)*
5. Date prepayment collected, \_\_\_\_/\_\_\_\_/\_\_\_\_  
*month day year*

**F Replacement**

For any proposed insured, would this insurance replace or cause a change in any existing insurance or annuity in any company? *(If Yes, enclose all required replacement forms.)*  Yes  No

**G Special Requests**

Part 1

**I** Background on Proposed Insureds

1. Has either the primary proposed insured or second proposed insured (if any) ever used tobacco or other nicotine products such as cigarettes, cigars, pipe, chewing tobacco, snuff, nicotine gum or nicotine patch? *(If Yes, provide date when last used and indicate all types of products.)*  Yes  No
- |                          | <i>Date (mo., yr.)</i> | <i>Product(s)</i> |  |
|--------------------------|------------------------|-------------------|--|
| Primary proposed insured | _____                  | _____             |  |
| Second proposed insured  | _____                  | _____             |  |
2. What are the occupation and duties of the primary proposed insured? \_\_\_\_\_
3. Within the last two years, has any proposed insured done or does he or she plan to do the following:
- a. operate or have any duties aboard an aircraft, glider, balloon or similar device?  Yes  No  
*(If Yes, complete Aviation Questionnaire.)*
- b. participate in hazardous sports, such as auto, motorcycle, snowmobile or powerboat competitions/exhibitions, scuba diving, mountain climbing, parachuting, skydiving or any other such sport or hobby? *(If Yes, complete Avocation Questionnaire.)*  Yes  No
4. Is any proposed insured applying for or requesting reinstatement or policy change(s) of any other life or health insurance policy? *(If Yes, provide insurance company, policy plan and amount.)*  Yes  No
- \_\_\_\_\_
5. Has any proposed insured been convicted of, or currently charged with, the commission of any criminal offense – other than the violation of a motor vehicle law – within the last 10 years?  Yes  No  
*(If Yes, provide details.)* \_\_\_\_\_
6. a. Driver's license number and state of issue of primary proposed insured \_\_\_\_\_
- b. In the last three years, has any proposed insured
- (1) had a driver's license denied, suspended or revoked?  Yes  No
- (2) been convicted of or cited for
- (a) three or more moving violations?  Yes  No
- (b) driving under the influence of alcohol or drugs?  Yes  No
- (3) been involved as a driver in two or more auto accidents?  Yes  No
- (If Yes to any of the above, provide details, including type of violation, accident, or reason for denial, suspension or revocation.)* \_\_\_\_\_
7. Does any proposed insured plan to live or travel outside the United States or Canada within the next 12 months? *(If Yes, list countries and purpose and duration of each trip.)*  Yes  No
- \_\_\_\_\_

**II** Additional Coverage

Complete only if this is an application for additional coverage on a person already covered by a Prudential or Pruco policy with an application date within three months of the date of this application.

To the best of your knowledge, has the health or the mental or physical condition of any person proposed for insurance changed since the answers and statements were given in the application included in policy number \_\_\_\_\_?  Yes  No  
*(If Yes, complete the appropriate Part 2 Medical Information section.)*

**III** Changes

Changes made by the Company (not applicable in New Mexico or West Virginia)

**Part 2 Medical Information**

**K Physician Information**

**Primary proposed insured**

Physician last consulted

Name \_\_\_\_\_

Address \_\_\_\_\_  
(street, city, state, ZIP)

Telephone number (\_\_\_\_) \_\_\_\_\_ Date last seen \_\_\_\_/\_\_\_\_/\_\_\_\_  
month day year

Reason last seen \_\_\_\_\_

Primary physician

Name \_\_\_\_\_

Address \_\_\_\_\_  
(street, city, state, ZIP)

Telephone number (\_\_\_\_) \_\_\_\_\_ Date last seen \_\_\_\_/\_\_\_\_/\_\_\_\_  
month day year

Reason last seen \_\_\_\_\_

**Second proposed insured or applicant for Applicant's Waiver of Premium (AWP)**

Physician last consulted

Name \_\_\_\_\_

Address \_\_\_\_\_  
(street, city, state, ZIP)

Telephone number (\_\_\_\_) \_\_\_\_\_ Date last seen \_\_\_\_/\_\_\_\_/\_\_\_\_  
month day year

Reason last seen \_\_\_\_\_

Primary physician

Name \_\_\_\_\_

Address \_\_\_\_\_  
(street, city, state, ZIP)

Telephone number (\_\_\_\_) \_\_\_\_\_ Date last seen \_\_\_\_/\_\_\_\_/\_\_\_\_  
month day year

Reason last seen \_\_\_\_\_

**L Physical Measurements**

	Height	Weight
Primary proposed insured		
Second proposed insured		
AWP applicant		

**M** Category II 1. Family record

**Changes and Plans other than Gibraltar (GIB)**

	Current age or age at death	Year and cause of death		Current age or age at death	Year and cause of death
Father			Mother		
Brother			Sister		
Brother			Sister		
Brother			Sister		

2. Has anyone proposed for coverage been diagnosed with or treated by a member of the medical profession for
  - a. chest pain or any disorder of the heart or blood vessels?  Yes  No
  - b. high blood pressure?  Yes  No
  - c. cancer, tumor, leukemia, melanoma or lymphoma?  Yes  No
  - d. diabetes or high blood sugar?  Yes  No
  - e. mental or psychiatric illness?  Yes  No
  - f. Acquired Immune Deficiency Syndrome (AIDS) or AIDS-Related Complex (ARC)?  Yes  No
  - g. infection caused by the Human Immunodeficiency Virus (HIV)? **(Not applicable in California. Wisconsin: AIDS virus HIV antibody testing is limited to FDA-licensed enzyme immunoassay and confirmatory HIV antibody tests. Any test performed at an anonymous counseling and testing site or home testing is confidential and need not be revealed on this application.)**  Yes  No
  - h. any sexually transmitted diseases?  Yes  No
  - i. asthma or any disorder of the lungs?  Yes  No
  - j. any disorder of the brain or nervous system?  Yes  No
  - k. hepatitis or any disorder of the liver, stomach or intestines?  Yes  No
  - l. any disorder of the kidney or urinary tract?  Yes  No
  
3. Is anyone proposed for coverage currently taking prescription medication?  Yes  No
  
4. Other than above, has anyone proposed for coverage
  - a. been a patient in a hospital or other medical facility?  Yes  No
  - b. in the last five years, had or been advised to have surgery, medical tests (other than HIV) or diagnostic procedures such as ECGs, stress tests, X-rays, blood tests, urine tests, etc.?  Yes  No
  
5. Has anyone proposed for coverage
  - a. used, or is he or she now using, cocaine, amphetamines, marijuana, heroin or other drugs, except as prescribed by a member of the medical profession?  Yes  No
  - b. had or been advised to have treatment or counseling for alcohol or drug use?  Yes  No
  
6. Does anyone proposed for coverage have any disease, disorder or condition not previously mentioned?  Yes  No
  
7. Has anyone proposed for coverage had life or health insurance declined, postponed or issued with an increased premium? **(Missouri: this question may be answered No if an individual has been declined for coverage.)**  Yes  No
  
8. Is anyone proposed for coverage currently unable to perform his or her normal daily activities or all normal occupational duties on a full-time basis at the customary place of employment?  Yes  No
  
9. Has anyone proposed for coverage requested or received disability or compensation benefits?  Yes  No

(continued on next page)



## Terms and Conditions

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The words "I" and "my" refer to the primary proposed insured and policyowner or applicant, if other than the primary proposed insured. The word "Company" refers to the company checked at the beginning of this application.

Unless I have specified a policy date or special payment plan (e.g., government allotment, payroll budget) in this application, I understand that if the initial premium is not paid with this request for coverage, the policy will become effective when all of the following conditions are met:

- the policy is issued, delivered and I accept it,
- the health of all persons proposed for insurance remains as stated in the application and
- the first premium is paid in full and the check or other form of payment is good and can be collected.

If the Company enters any change in section J, I approve the change by accepting the policy unless the law requires written consent to changes. No Company representative can make or change a policy, or waive any of the Company's rights or requirements.

The Company will pay the beneficiary named in the application (or in the policy if requesting a policy change and no beneficiary has been named in the application) any applicable insurance benefit either at the death of the primary insured or at the death of an insured child after the death of the primary insured if there is no insured spouse.

For policy changes, the existing policyowner and beneficiary designation will be used unless a new policyowner or beneficiary designation is provided in this application.

The policyowner is either the primary proposed insured or the applicant unless a different policyowner is named in the application. This is subject to any provisions for the automatic transfer of ownership stated in the policy.

If joint policyowners are named, in the event of the death of one policyowner, the survivor(s) shall be the policyowner(s), unless otherwise specified.

## Signatures

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I certify, affirm and understand the following:

- To the best of my knowledge and belief, the statements in this application, as well as any forms that the Company designates to be part of the application and that are attached to the policy, are complete, true and correctly recorded.
- Except for failure to pay premium or fraud, the Company will not contest the validity of this policy or change request after it has been in force during the insured's lifetime for two years from the date it takes effect.
- I will inform the Company of any changes in my or any proposed insured's health, mental or physical condition, or of any changes to any answers on this application, prior to or upon delivery of this policy.
- If I have requested the Acceleration of Death Benefits (Living Needs Benefit), I have read the disclosures in the brochure (ORD 87246).
- I have received and read the Terms and Conditions shown above and the Important Notice About Your Application for Insurance.
- I believe this policy meets my insurance needs and financial objectives. For a variable product: I acknowledge receipt of a current prospectus for the policy. I understand that the policy's value and death benefit may vary depending on the policy's investment experience.
- My original signature has been affixed to this application, the original application will be retained by the Company and I will receive a copy identical in form and substance to the original, attached to my policy.

*(continued on next page)*

**Signatures (continued)**

• **Not applicable in Arizona:**

**Any person who knowingly and intentionally gives false or deceptive information when completing an application for insurance or filing a claim, for the purpose of defrauding an insurance company:**

- **Arkansas, Hawaii, Louisiana, New Mexico, Tennessee, Virginia and Washington:** may be subject to fines, denial of insurance benefits, or confinement in prison.
- **Colorado:** penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.
- **District of Columbia:** or any other person has committed a crime. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.
- **All other states:** may have committed fraud, or may have violated state law.

Signed at \_\_\_\_\_ on \_\_\_\_/\_\_\_\_/\_\_\_\_  
(city, state) month day year

*Signature of primary proposed insured, if age 8 or over,  
or of currently insured person, if policy change*

**X** \_\_\_\_\_

*Signature of spouse (applicable in  
South Carolina, if proposed for coverage.)*

**X** \_\_\_\_\_

*Signature of policyowner (if different from the primary proposed  
insured) or of existing policyowner if a policy change. If the  
policyowner is a firm or corporation, give that company's name  
and have an officer sign below.*

**X** \_\_\_\_\_

*Signature and title of officer of firm or corporation*

**X** \_\_\_\_\_

*Signature of applicant, if different from primary proposed insured  
or policyowner*

**X** \_\_\_\_\_

*Signature of beneficiary, if policy change and rights  
are limited*

**X** \_\_\_\_\_

*Signature of witness  
(Licensed Writing Representative must witness.)*

**X** \_\_\_\_\_

**Licensed Writing Representative's Certification**

Do you have any information, other than that stated in this application, which indicates that any proposed insured may replace or change any current insurance or annuity in any company?

Yes  No

*Signature of Writing Representative*

**X** \_\_\_\_\_

**STATEMENT OF VARIABILITY**  
**PLTIR-2009**

Variable and illustrative material in the contract data pages has been bracketed.

1. The insured's information in the specimen policy is for John Doe, male. The Issue Age for the specimen policy is 35. The minimum Issue Age for this policy is 18. The maximum Issue Age will vary depending on the smoking status and level premium period selected by the owner. For the 15-year level premium plan, the maximum issue age is 65 for nonsmokers and 55 for smokers. For the 20-year level premium plan, the maximum issue age is 60 for nonsmokers and 55 for smokers. For the 30-year level premium plan, the maximum issue age is 50 for nonsmokers and 45 for smokers.
2. Policy number will be uniquely assigned and vary for all contracts issued. Contract date can vary for each contract issued.
3. The name of the rating class for the specimen policy is Nonsmoker. The rating class for each individual insured will be determined in underwriting.
4. The term period and premium period is to age 95 and can therefore vary based on the issue age of the insured. The level premium period can be for 15, 20, or 30 years as requested by the owner, followed by increasing premiums for the remaining number of years to age 95.
5. The beneficiary in the specimen policy is Mary Doe, wife and Robert Doe, son. The beneficiary name and class will vary based on the beneficiary(ies) selected by the owner.
6. The Basic Amount of Insurance for the specimen policy is \$100,000. This amount can vary based on the amount selected by the owner. The minimum Basic Amount of insurance is \$100,000. The maximum Basic Amount can vary based on the Company retention limit and any reinsurance.
7. The selected return of premium rider is shown under Other Benefit(s) on the Insured. Rider TB 165(15) is printed for the 15-year level premium plan, Rider TB 165(20) is printed for the 20-year level premium plan, Rider TB 165(30) is printed for the 30-year level premium plan.
8. The contract premium due for the specimen policy is for a male, age 35, nonsmoker rating class for a basic amount of insurance equal to \$100,000, and annual mode. The total initial premium on the contract date is shown for annual, semi-annual, quarterly, and monthly modes based on the insured's age, sex, rating class and basic amount of insurance. The schedule of premiums will show the premium change dates and contract premiums due after the initial level-premium period for the selected mode. The premium change dates will start on the anniversary date following the initial level-premium period and continue to the end of the premium period. The contract premium due can vary based on the insured's age, sex, rating class, and basic amount of insurance, and the selected level-premium period and premium mode.

9. The Table of Rider Surrender Factors is shown in the rider table pages. The rider surrender factors will vary based on the selected level-premium period, rating class, and duration. Rider TB 165(15) is printed for the 15-year level premium plan, Rider TB 165(20) is printed for the 20-year level premium plan, Rider TB 165(30) is printed for the 30-year level premium plan. The name of the rating class for the specimen policy is Nonsmoker. The rating class for each individual insured will be determined in underwriting. Smoker status will be shown as Smoker or Nonsmoker. Rider surrender factors will be shown for the number of contract years corresponding to the selected level-premium period.

10. The Table of Cash Values and Reduced Paid-Up Insurance is shown in the rider table pages. The cash value and reduced paid-up insurance amounts will be shown for the number of contract years corresponding to the selected level-premium period and are based on payment of the scheduled annual premium.

11. Processing Date can also vary for each contract issued, and would be updated for any contract data pages printed in post-issue processing.

## Actuarial Memorandum

### Pruco Life Insurance Company Term Life Policy Form # PLTIR-2009

#### **Description**

This policy provides term life insurance benefits. Premiums are level for 15, 20 or 30 years and then increase annually to age 95. Premiums and benefits are guaranteed for the life of the policy.

There are no cash values.

This is a non-participating policy.

#### **Policy Reserves**

Reserves are calculated using the 2001 CSO mortality table, age last birthday, smoker/non-smoker and an interest rate of 4%. The reserve method is the Commissioner's Reserve Valuation Method using the greater of unitary and segmented reserves as defined in NAIC Model Regulation 830 (Regulation XXX).

#### **Deficiency Reserves**

In the event that gross premiums are less than statutory net premiums, a minimum reserve is calculated. This minimum reserve is calculated using the 2001 CSO mortality table, age last birthday, smoker/non-smoker with 25-year select factors and an interest rate of 4%. The reserve method is the Commissioner's Reserve Valuation Method using the greater of unitary and segmented reserves (Regulation XXX) except that net premiums are replaced with gross premiums when the gross premium is less than the net premium. If the minimum reserves are greater than the basic policy reserves, then deficiency reserves are the difference between the minimum reserves and basic policy reserves.

A sample calculation is attached.

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Joseph E. Brennan, ASA, MAAA  
August 18, 2009

## Actuarial Memorandum

### Pruco Life Insurance Company

Return of Premium Rider, Form #s

TB 165 (15) - 2009

TB 165 (20) - 2009

TB 165 (30) - 2009

#### **Description**

This rider provides an endowment benefit at the end of 15, 20 or 30 years. The rider will pay the accumulated net premiums less any contract debt on the rider maturity date if all due premiums have been paid and the Insured is living on that date. At any time prior to the rider benefit date, the contract can be surrendered for the rider net cash value specified in the contract.

#### **Policy Reserves**

Reserves are calculated using the 2001 CSO mortality table, age last birthday, smoker/non-smoker and an interest rate of 4%. The reserve method is the Commissioner's Reserve Valuation Method using the greater of unitary and segmented reserves as defined in NAIC Model Regulation 830 (Regulation XXX).

This rider contains an Unusual Cash Value Pattern as defined in NAIC Model Regulation 830 (Regulation XXX).

#### **Deficiency Reserves**

In the event that gross premiums are less than statutory net premiums, a minimum reserve is calculated. This minimum reserve is calculated using the 2001 CSO mortality table, age last birthday, smoker/non-smoker with 25-year select factors and an interest rate of 4%. The reserve method is the Commissioner's Reserve Valuation Method using the greater of unitary and segmented reserves (Regulation XXX) except that net premiums are replaced with gross premiums when the gross premium is less than the net premium. If the minimum reserves are greater than the basic policy reserves, then deficiency reserves are the difference between the minimum reserves and basic policy reserves.

A sample calculation is attached.

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Joseph E. Brennan, ASA, MAAA  
August 19, 2009