

SERFF Tracking Number: STFL-127538336 State: Arkansas  
Filing Company: State Farm Life Insurance Company State Tracking Number: 49860  
Company Tracking Number: SFL-AR-08025.3  
TOI: L04I Individual Life - Term Sub-TOI: L04I.500 Other  
Product Name: Return of Premium - Pages 3 & 4  
Project Name/Number: Return of Premium - Pages 3 & 4/SFL-AR-08025.3

## Filing at a Glance

Company: State Farm Life Insurance Company

Product Name: Return of Premium - Pages 3 & 4 SERFF Tr Num: STFL-127538336 State: Arkansas

4

TOI: L04I Individual Life - Term

SERFF Status: Closed-Accepted State Tr Num: 49860

For Informational Purposes

Sub-TOI: L04I.500 Other

Co Tr Num: SFL-AR-08025.3

State Status: Filed-Closed

Filing Type: Form

Reviewer(s): Linda Bird

Authors: Rachel Lighthall, Steve  
Crum, Maureen Macak

Disposition Date: 10/04/2011

Date Submitted: 09/23/2011

Disposition Status: Accepted For  
Informational Purposes

Implementation Date Requested: 02/12/2012

Implementation Date:

State Filing Description:

## General Information

Project Name: Return of Premium - Pages 3 & 4

Project Number: SFL-AR-08025.3

Requested Filing Mode: Informational

Status of Filing in Domicile: Not Filed

Date Approved in Domicile:

Domicile Status Comments: Our state of  
domicile, Illinois, is part of the Interstate  
Compact, and we are currently pending  
approval of a filing containing similar forms.

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Individual Market Type:

Overall Rate Impact:

Filing Status Changed: 10/04/2011

State Status Changed: 09/28/2011

Deemer Date:

Created By: Maureen Macak

Submitted By: Maureen Macak

Corresponding Filing Tracking Number:

Filing Description:

NAIC#: 69108

FEIN #: 37-0533090

RE: INFORMATIONAL FILING

SERFF Tracking Number: STFL-127538336 State: Arkansas  
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Dear Sir or Madam:

Enclosed is the revised actuarial memorandum for policy form 08025, Adjustable Premium Level Term Life Insurance to Age 95 Policy.

Form 08025 was approved by your Department on August 28, 2008, under SERFF tracking number STFL-125630121 and State Filing #38911.

The form number on pages 3 and 4 of policy 08025 have been revised to 08025.3(R20) and 08025.3(R30) to reflect the implementation of this change.

To comply with Ark. Code Ann. 23-79-138 and Bulletins 6-87 and 11-88, enclosed is form 03905-04.1, which is given to each policyholder with the policy.

To comply with Regulation 49, we provide the policyholder with enclosed form 03906-04.1, Limitations and Exclusions Under the Arkansas Life and Health Insurance Guaranty Association Act.

The effective date of this change is February 12, 2012.

## Company and Contact

### Filing Contact Information

Maureen Macak, Tech - Contracts & Compliance  
maureen.macak.ljrd@statefarm.com  
1 State Farm Plaza 309-763-2341 [Phone]  
Bloomington, IL 61710-0001 309-766-8483 [FAX]

### Filing Company Information

State Farm Life Insurance Company CoCode: 69108 State of Domicile: Illinois  
1 State Farm Plaza Group Code: Company Type:  
Bloomington, IL 61710-0001 Group Name: State ID Number:  
(309) 766-4541 ext. [Phone] FEIN Number: 37-0533090

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## Filing Fees

Fee Required? Yes  
Fee Amount: \$100.00  
Retaliatory? Yes

SERFF Tracking Number: STFL-127538336 State: Arkansas  
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Product Name: Return of Premium - Pages 3 & 4  
Project Name/Number: Return of Premium - Pages 3 & 4/SFL-AR-08025.3  
Fee Explanation: 2 Forms @ \$50.00 = \$100.00  
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
State Farm Life Insurance Company	\$100.00	09/23/2011	52047118

SERFF Tracking Number: STFL-127538336 State: Arkansas  
 Filing Company: State Farm Life Insurance Company State Tracking Number: 49860  
 Company Tracking Number: SFL-AR-08025.3  
 TOI: L041 Individual Life - Term Sub-TOI: L041.500 Other  
 Product Name: Return of Premium - Pages 3 & 4  
 Project Name/Number: Return of Premium - Pages 3 & 4/SFL-AR-08025.3

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Linda Bird Informational Purposes		10/04/2011	10/04/2011
Accepted For Linda Bird Informational Purposes		09/28/2011	09/28/2011

### Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Supporting Document	Life & Annuity - Actuarial Memo	Maureen Macak	10/03/2011	10/03/2011

### Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Request to re-open filing	Note To Filer	Linda Bird	10/03/2011	10/03/2011
Request to re-open filing	Note To Reviewer	Maureen Macak	09/30/2011	09/30/2011

*SERFF Tracking Number:* STFL-127538336 *State:* Arkansas  
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*Product Name:* Return of Premium - Pages 3 & 4  
*Project Name/Number:* Return of Premium - Pages 3 & 4/SFL-AR-08025.3

## **Disposition**

Disposition Date: 10/04/2011

Implementation Date:

Status: Accepted For Informational Purposes

Comment: Company has submitted updated Actuarial Memorandum.

Rate data does NOT apply to filing.

SERFF Tracking Number: STFL-127538336 State: Arkansas  
 Filing Company: State Farm Life Insurance Company State Tracking Number: 49860  
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 TOI: L04I Individual Life - Term Sub-TOI: L04I.500 Other  
 Product Name: Return of Premium - Pages 3 & 4  
 Project Name/Number: Return of Premium - Pages 3 & 4/SFL-AR-08025.3

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document (revised)	Life & Annuity - Acturial Memo		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Regulation 19 Certification		Yes
Supporting Document	AR 03906-04.1 & 03905-04.1		Yes
Supporting Document	Certificate of Compliance & Indeterminate Premium Certificate		Yes
Supporting Document	Consent to Submit Rates and/or Cost Basis for Approval		Yes
Form	Policy Identification Pages 3 & 4		Yes
Form	Policy Identification Pages 3 & 4		Yes

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## **Disposition**

Disposition Date: 09/28/2011

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: STFL-127538336 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 (revised)	Life & Annuity - Actuarial Memo		No
Supporting Document	Life & Annuity - Actuarial Memo		No
Supporting Document	Regulation 19 Certification		Yes
Supporting Document	AR 03906-04.1 & 03905-04.1		Yes
Supporting Document	Certificate of Compliance & Indeterminate Premium Certificate		Yes
Supporting Document	Consent to Submit Rates and/or Cost Basis for Approval		Yes
Form	Policy Identification Pages 3 & 4		Yes
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Project Name/Number: Return of Premium - Pages 3 & 4/SFL-AR-08025.3

**Amendment Letter**

Submitted Date: 10/03/2011

**Comments:**

Thank you for re-opening our filing.

Please note that we have submitted a revised copy of Actuarial Memorandum Attachment 1 - ROP 20 - 08025v3 on the Supporting Documentation tab. Below are the following changes to this document:

Cash value in for male, age 46, SP Class, 100 band, duration 19 changed from 96.7% to 96.6%.  
Cash value in for male, age 53, TB Class, 100 band, duration 9 changed from 56.6.0% to 56.5%.  
Cash value in for female age 58, EP Class, 500 band, duration 7 changed from 50.3% to 50.4%.

We look forward to your continued review of this filing. Thank you.

**Changed Items:**

**Supporting Document Schedule Item Changes:**

**Satisfied -Name: Life & Annuity - Acturial Memo**

Comment: Please see revised actuarial memorandum and 4 attachments.

08025 Act Mem - AG45 compliant.pdf

Act Mem Att 1 - ROP 30 - 08025v3.pdf

Act Mem Att 2 - ROP 20 - 08025v3.pdf

Act Mem Att 2 - ROP 30 - 08025v3.pdf

Revised Act Mem Att 1 - ROP 20 - 08025v3 - CW.pdf

SERFF Tracking Number: STFL-127538336 State: Arkansas  
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TOI: L04I Individual Life - Term Sub-TOI: L04I.500 Other  
Product Name: Return of Premium - Pages 3 & 4  
Project Name/Number: Return of Premium - Pages 3 & 4/SFL-AR-08025.3

**Note To Filer**

**Created By:**

Linda Bird on 10/03/2011 10:01 AM

**Last Edited By:**

Linda Bird

**Submitted On:**

10/03/2011 10:01 AM

**Subject:**

Request to re-open filing

**Comments:**

Filing has been re-opened in order for corrections to be made.

*SERFF Tracking Number:* STFL-127538336 *State:* Arkansas  
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**Note To Reviewer**

**Created By:**

Maureen Macak on 09/30/2011 11:28 AM

**Last Edited By:**

Maureen Macak

**Submitted On:**

09/30/2011 11:36 AM

**Subject:**

Request to re-open filing

**Comments:**

By way of this "Note to Reviewer", I am requesting this filing be re-opened to submit the following updated supporting documentation item:

The Actuarial Memorandum Attachment 1 - ROP 20 -08025v3 has had minor revisions.

Respectfully,

Maureen Macak, Tech

L/H Contracts & Compliance Department

SERFF Tracking Number: STFL-127538336 State: Arkansas  
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## Form Schedule

### Lead Form Number: 08025.3

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	08025.3(R20)	Schedule Pages	Policy Identification Pages 3 & 4	Initial			08025.3(R20) Pg 3_4 _NT Bracketed FINAL - 9-21-11.pdf
	08025.3(R30)	Schedule Pages	Policy Identification Pages 3 & 4	Initial			08025.3(R30) Pg 3_4 _NT Bracketed FINAL - 9-21-11.pdf

P O L I C Y I D E N T I F I C A T I O N

Insured [JOHN J DOE] Age [35]  
 [(Male)]  
 Policy Number LF-[0000-0000] Basic Plan Amount \$[100,000]  
 Policy Date [February 12, 2012]  
 Issue Date [February 12, 2012]

S C H E D U L E O F B E N E F I T S

Form	Description	Initial Amount	Benefit Period Ends	Annual Premium	Premiums Payable
08025	Basic Plan: (Adjustable Premium Level Term to Age 95 With Return of Premium Benefit)	\$[100,000]	In [2072]	\$[839.00]*	To [2032]*
	* Subsequent premiums included below.				
	Class of Risk: [Standard Male Non-Tobacco]				
	Initial Premium Guarantee Period: 20 Years				
	Level Premium Period: 20 Years				
	See Adjustment of Basic Plan Premiums provision on page 9 for Basic Plan Premiums after the Initial Premium Guarantee Period.				

S C H E D U L E O F P R E M I U M S

The Basic Plan Premiums are included below. Monthly premiums must be paid under one of the monthly payment plans made available.

Beginning	Annual	Monthly
[February 12, 2012]	\$[839.00]	\$[72.99]
[February 12, 2013]	[839.00]	[72.99]
[February 12, 2014]	[839.00]	[72.99]
[February 12, 2015]	[839.00]	[72.99]
[February 12, 2016]	[839.00]	[72.99]
[February 12, 2017]	[839.00]	[72.99]
[February 12, 2018]	[839.00]	[72.99]
[February 12, 2019]	[839.00]	[72.99]
[February 12, 2020]	[839.00]	[72.99]
[February 12, 2021]	[839.00]	[72.99]
[February 12, 2022]	[839.00]	[72.99]
[February 12, 2023]	[839.00]	[72.99]
[February 12, 2024]	[839.00]	[72.99]
[February 12, 2025]	[839.00]	[72.99]
[February 12, 2026]	[839.00]	[72.99]
[February 12, 2027]	[839.00]	[72.99]
[February 12, 2028]	[839.00]	[72.99]
[February 12, 2029]	[839.00]	[72.99]
[February 12, 2030]	[839.00]	[72.99]
[February 12, 2031]	[839.00]	[72.99]
[February 12, 2032]	[1,796.00]	[156.25]
[February 12, 2033]	[1,994.00]	[173.48]
[February 12, 2034]	[2,186.00]	[190.18]
[February 12, 2035]	[2,378.00]	[206.89]
[February 12, 2036]	[2,603.00]	[226.46]

Continued on Next Page

S C H E D U L E   O F   P R E M I U M S

Continued from Page 3

Beginning	Annual	Monthly
[February 12, 2037]	\$[2,876.00]	\$[250.21]
[February 12, 2038]	[3,209.00]	[279.18]
[February 12, 2039]	[3,596.00]	[312.85]
[February 12, 2040]	[4,019.00]	[349.65]
[February 12, 2041]	[4,460.00]	[388.02]
[February 12, 2042]	[4,919.00]	[427.95]
[February 12, 2043]	[5,384.00]	[468.41]
[February 12, 2044]	[5,870.00]	[510.69]
[February 12, 2045]	[6,383.00]	[555.32]
[February 12, 2046]	[6,959.00]	[605.43]
[February 12, 2047]	[7,631.00]	[663.90]
[February 12, 2048]	[8,447.00]	[734.89]
[February 12, 2049]	[9,401.00]	[817.89]
[February 12, 2050]	[10,406.00]	[905.32]
[February 12, 2051]	[11,486.00]	[999.28]
[February 12, 2052]	[12,662.00]	[1,101.59]
[February 12, 2053]	[13,988.00]	[1,216.96]
[February 12, 2054]	[15,530.00]	[1,351.11]
[February 12, 2055]	[17,321.00]	[1,506.93]
[February 12, 2056]	[19,328.00]	[1,681.54]
[February 12, 2057]	[21,566.00]	[1,876.24]
[February 12, 2058]	[23,999.00]	[2,087.91]
[February 12, 2059]	[26,576.00]	[2,312.11]
[February 12, 2060]	[29,390.00]	[2,556.93]
[February 12, 2061]	[32,519.00]	[2,829.15]
[February 12, 2062]	[35,999.00]	[3,131.91]
[February 12, 2063]	[39,827.00]	[3,464.95]
[February 12, 2064]	[43,964.00]	[3,824.87]
[February 12, 2065]	[48,362.00]	[4,207.49]
[February 12, 2066]	[52,976.00]	[4,608.91]
[February 12, 2067]	[57,572.00]	[5,008.76]
[February 12, 2068]	[62,096.00]	[5,402.35]
[February 12, 2069]	[66,836.00]	[5,814.73]
[February 12, 2070]	[71,834.00]	[6,249.56]
[February 12, 2071]	[77,099.00]	[6,707.61]

If the premium paid is not the annual premium, the total amount of premium due each year is greater than the annual premium. Premiums other than the annual premium are increased to reflect the time value of money. The premiums shown above include a policy fee. The policy fee for the annual premium is \$[50.00] and the policy fee for the monthly premium is \$[4.35].

Initial payment of \$[839.00] will provide coverage to [February 12, 2013].

A N N U A L   D I V I D E N D S

This Policy is eligible for annual dividends; however, we do not expect to pay dividends on this Policy. Dividends are not guaranteed. See the Dividend provision on page 7.

Continued on Next Page

Continued from Page 3

C U M U L A T I V E   P R E M I U M  
P E R C E N T A G E   T A B L E

[Feb. 12],	Percentage
[2012]	[0.0]%
[2013]	[0.0]%
[2014]	[0.0]%
[2015]	[17.5]%
[2016]	[33.0]%
[2017]	[43.0]%
[2018]	[50.2]%
[2019]	[55.9]%
[2020]	[60.7]%
[2021]	[64.8]%
[2022]	[68.5]%
[2023]	[72.0]%
[2024]	[75.3]%
[2025]	[78.4]%
[2026]	[81.5]%
[2027]	[84.6]%
[2028]	[87.6]%
[2029]	[90.6]%
[2030]	[93.7]%
[2031]	[96.9]%
[2032]	[100.0]%

SCHEDULE OF INSURANCE AND VALUES

- Insurance Amount -	----- Guaranteed Values -----		
On Insured	[Feb. 12],	Cash Value* Dollars	Extended Term Ins* Yrs Days
\$[100,000	2012	0	0 0]
[100,000	2013	0	0 0]
[100,000	2014	0	0 0]
[100,000	2015	440.48	3 102]
[100,000	2016	1,107.48	6 345]
[100,000	2017	1,803.85	9 265]
[100,000	2018	2,257.07	12 11]
[100,000	2019	3,283.01	13 263]
[100,000	2020	4,074.18	14 361]
[100,000	2021	4,893.05	15 363]
[100,000	2022	5,747.15	16 282]
[100,000	2023	6,644.88	17 131]
[100,000	2024	7,581.20	17 288]
[100,000	2025	8,551.09	18 34]
[100,000	2026	9,572.99	18 114]
[100,000	2027	10,646.91	18 174]
[100,000	2028	11,759.42	18 210]
[100,000	2029	12,922.28	18 229]
[100,000	2030	14,105.57	18 235]
[100,000	2031	15,446.83	18 229]
[100,000	2032	16,780.00	18 204]

The Cash Value is zero after the last Policy Anniversary shown above.

\*Cash Values and Extended Term Periods shown above on the Policy Anniversary presume payment of the annual premium shown in the Schedule of Premiums on page 3 to the end of the prior Policy Year, no changes to this Policy as shown on page 3, the Cumulative Premium Percentage shown for each Policy Year on page 3, no Policy Loan or accrued Loan Interest, and no Annual Dividends.

The Cash Value shown on the Policy Anniversary after the end of the Level Premium Period is the amount of the Return of Premium Benefit and presumes payment of the annual premium shown in the Schedule of Premiums on page 3 until the end of the Level Premium Period, no Policy Loan or accrued Loan Interest, and no Annual Dividends. The Extended Term Period shown on the Policy Anniversary after the end of the Level Premium Period assumes the Owner sends Us a Request to use the Return of Premium Benefit as a single premium to provide Extended Term Insurance on that Policy Anniversary. The interest rate for single premiums and minimum cash values is 4.0% a year. The mortality table for Extended Term Insurance and minimum cash values is the Commissioners 2001 CSO Standard Ordinary Smoker/Nonsmoker Ultimate Age Last Birthday Mortality Table.

Note: The Cash Value and Return of Premium Benefit will vary based on the actual Cumulative Premium.

P O L I C Y   I D E N T I F I C A T I O N

Insured	[JOHN J DOE]	Age	[35]
	[(Male)]		
Policy Number	LF-[0000-0000]	Basic Plan Amount	[\$[100,000]]
Policy Date	[February 12, 2012]		
Issue Date	[February 12, 2012]		

S C H E D U L E   O F   B E N E F I T S

Form	Description	Initial Amount	Benefit Period Ends	Annual Premium	Premiums Payable
08025	Basic Plan: (Adjustable Premium Level Term to Age 95 With Return of Premium Benefit)	[\$[100,000]]	In [2072]	[\$[851.00]]*	To [2042]*
	* Subsequent premiums included below.				
	Class of Risk: [Standard Male Non-Tobacco]				
	Initial Premium Guarantee Period: 30 Years				
	Level Premium Period: 30 Years				
	See Adjustment of Basic Plan Premiums provision on page 9 for Basic Plan Premiums after the Initial Premium Guarantee Period.				

S C H E D U L E   O F   P R E M I U M S

The Basic Plan Premiums are included below. Monthly premiums must be paid under one of the monthly payment plans made available.

Beginning	Annual	Monthly
[February 12, 2012]	[\$[851.00]]	[\$[74.04]]
[February 12, 2013]	[851.00]	[74.04]
[February 12, 2014]	[851.00]	[74.04]
[February 12, 2015]	[851.00]	[74.04]
[February 12, 2016]	[851.00]	[74.04]
[February 12, 2017]	[851.00]	[74.04]
[February 12, 2018]	[851.00]	[74.04]
[February 12, 2019]	[851.00]	[74.04]
[February 12, 2020]	[851.00]	[74.04]
[February 12, 2021]	[851.00]	[74.04]
[February 12, 2022]	[851.00]	[74.04]
[February 12, 2023]	[851.00]	[74.04]
[February 12, 2024]	[851.00]	[74.04]
[February 12, 2025]	[851.00]	[74.04]
[February 12, 2026]	[851.00]	[74.04]
[February 12, 2027]	[851.00]	[74.04]
[February 12, 2028]	[851.00]	[74.04]
[February 12, 2029]	[851.00]	[74.04]
[February 12, 2030]	[851.00]	[74.04]
[February 12, 2031]	[851.00]	[74.04]
[February 12, 2032]	[851.00]	[74.04]
[February 12, 2033]	[851.00]	[74.04]
[February 12, 2034]	[851.00]	[74.04]
[February 12, 2035]	[851.00]	[74.04]
[February 12, 2036]	[851.00]	[74.04]
[February 12, 2037]	[851.00]	[74.04]

Continued on Next Page

SCHEDULE OF PREMIUMS

Continued from Page 3

Beginning	Annual	Monthly
[February 12, 2038]	\$[851.00]	\$[74.04]
[February 12, 2039]	[851.00]	[74.04]
[February 12, 2040]	[851.00]	[74.04]
[February 12, 2041]	[851.00]	[74.04]
[February 12, 2042]	[4,919.00]	[427.95]
[February 12, 2043]	[5,384.00]	[468.41]
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[February 12, 2053]	[13,988.00]	[1,216.96]
[February 12, 2054]	[15,530.00]	[1,351.11]
[February 12, 2055]	[17,321.00]	[1,506.93]
[February 12, 2056]	[19,328.00]	[1,681.54]
[February 12, 2057]	[21,566.00]	[1,876.24]
[February 12, 2058]	[23,999.00]	[2,087.91]
[February 12, 2059]	[26,576.00]	[2,312.11]
[February 12, 2060]	[29,390.00]	[2,556.93]
[February 12, 2061]	[32,519.00]	[2,829.15]
[February 12, 2062]	[35,999.00]	[3,131.91]
[February 12, 2063]	[39,827.00]	[3,464.95]
[February 12, 2064]	[43,964.00]	[3,824.87]
[February 12, 2065]	[48,362.00]	[4,207.49]
[February 12, 2066]	[52,976.00]	[4,608.91]
[February 12, 2067]	[57,572.00]	[5,008.76]
[February 12, 2068]	[62,096.00]	[5,402.35]
[February 12, 2069]	[66,836.00]	[5,814.73]
[February 12, 2070]	[71,834.00]	[6,249.56]
[February 12, 2071]	[77,099.00]	[6,707.61]

If the premium paid is not the annual premium, the total amount of premium due each year is greater than the annual premium. Premiums other than the annual premium are increased to reflect the time value of money. The premiums shown above include a policy fee. The policy fee for the annual premium is \$[50.00] and the policy fee for the monthly premium is \$[4.35].

Initial payment of \$[851.00] will provide coverage to [February 12, 2013].

ANNUAL DIVIDENDS

This Policy is eligible for annual dividends; however, we do not expect to pay dividends on this Policy. Dividends are not guaranteed. See the Dividend provision on page 7.

Continued on Next Page

C U M U L A T I V E   P R E M I U M  
P E R C E N T A G E   T A B L E

[Feb. 12],	Percentage
[2012]	[0.0]%
[2013]	[0.0]%
[2014]	[0.0]%
[2015]	[3.4]%
[2016]	[16.9]%
[2017]	[25.4]%
[2018]	[31.6]%
[2019]	[36.4]%
[2020]	[40.3]%
[2021]	[43.7]%
[2022]	[46.7]%
[2023]	[49.5]%
[2024]	[52.0]%
[2025]	[54.5]%
[2026]	[56.9]%
[2027]	[59.2]%
[2028]	[61.6]%
[2029]	[63.9]%
[2030]	[66.2]%
[2031]	[68.5]%
[2032]	[70.9]%
[2033]	[73.3]%
[2034]	[75.8]%
[2035]	[78.4]%
[2036]	[81.1]%
[2037]	[83.8]%
[2038]	[86.7]%
[2039]	[89.8]%
[2040]	[93.0]%
[2041]	[96.4]%
[2042]	[100.0]%

SCHEDULE OF INSURANCE AND VALUES

- Insurance Amount -	----- Guaranteed Values -----			
On Insured	[Feb. 12],	Cash Value* Dollars	Extended Term Ins* Yrs Days	
\$[100,000	2012	0.00	0	0]
[100,000	2013	0.00	0	0]
[100,000	2014	0.00	0	0]
[100,000	2015	86.80	0	243]
[100,000	2016	575.28	3	337]
[100,000	2017	1,080.77	6	108]
[100,000	2018	1,613.50	8	87]
[100,000	2019	2,168.35	9	338]
[100,000	2020	2,743.62	11	85]
[100,000	2021	3,346.98	12	77]
[100,000	2022	3,974.17	12	350]
[100,000	2023	4,633.70	13	210]
[100,000	2024	5,310.24	14	15]
[100,000	2025	6,029.34	14	137]
[100,000	2026	6,779.07	14	211]
[100,000	2027	7,556.88	14	248]
[100,000	2028	8,387.46	14	269]
[100,000	2029	9,244.41	14	267]
[100,000	2030	10,140.52	14	253]
[100,000	2031	11,075.77	14	231]
[100,000	2032	12,067.18	14	208]
[100,000	2033	13,099.44	14	178]
[100,000	2034	14,191.28	14	144]
[100,000	2035	15,345.23	14	103]
[100,000	2036	16,563.86	14	53]
[100,000	2037	17,828.45	13	358]
[100,000	2038	19,183.24	13	299]
[100,000	2039	20,633.35	13	244]
[100,000	2040	22,160.04	13	190]
[100,000	2041	23,790.56	13	139]
[100,000	2042	25,530.00	13	90]

The Cash Value is zero after the last Policy Anniversary shown above.

\*Cash Values and Extended Term Periods shown above on the Policy Anniversary presume payment of the annual premium shown in the Schedule of Premiums on page 3 to the end of the prior Policy Year, no changes to this Policy as shown on page 3, the Cumulative Premium Percentage shown for each Policy Year on page 3, no Policy Loan or accrued Loan Interest, and no Annual Dividends.

The Cash Value shown on the Policy Anniversary after the end of the Level Premium Period is the amount of the Return of Premium Benefit and presumes payment of the annual premium shown in the Schedule of Premiums on page 3 until the end of the Level Premium Period, no Policy Loan or accrued Loan Interest, and no Annual Dividends. The Extended Term Period shown on the Policy Anniversary after the end of the Level Premium Period assumes the Owner sends Us a Request to use the Return of Premium Benefit as a single premium to provide Extended Term Insurance on that Policy Anniversary. The interest rate for single premiums and minimum cash values is 4.0% a year. The mortality table Extended Term Insurance and minimum cash values is the Commissioners 2001 CSO Standard Ordinary Smoker/Nonsmoker Ultimate Age Last Birthday Mortality Table.

Note: The Cash Value and Return of Premium Benefit will vary based on the actual Cumulative Premium.

SERFF Tracking Number: STFL-127538336 State: Arkansas  
 Filing Company: State Farm Life Insurance Company State Tracking Number: 49860  
 Company Tracking Number: SFL-AR-08025.3  
 TOI: L041 Individual Life - Term Sub-TOI: L041.500 Other  
 Product Name: Return of Premium - Pages 3 & 4  
 Project Name/Number: Return of Premium - Pages 3 & 4/SFL-AR-08025.3

## Supporting Document Schedules

**Item Status:** **Status Date:**

**Satisfied - Item:** Flesch Certification

**Comments:**

Not applicable to this filing.

**Item Status:** **Status Date:**

**Satisfied - Item:** Application

**Comments:**

Not applicable to this filing.

**Item Status:** **Status Date:**

**Satisfied - Item:** Life & Annuity - Actuarial Memo

**Comments:**

Please see revised actuarial memorandum and 4 attachments.

**Attachments:**

- 08025 Act Mem - AG45 compliant.pdf
- Act Mem Att 1 - ROP 30 - 08025v3.pdf
- Act Mem Att 2 - ROP 20 - 08025v3.pdf
- Act Mem Att 2 - ROP 30 - 08025v3.pdf
- Revised Act Mem Att 1 - ROP 20 - 08025v3 - CW.pdf

**Item Status:** **Status Date:**

**Satisfied - Item:** Regulation 19 Certification

**Comments:**

Please see attached Regulation 19 Certification.

**Attachment:**

ARREG19 - 08025.3 .pdf

SERFF Tracking Number: STFL-127538336 State: Arkansas  
Filing Company: State Farm Life Insurance Company State Tracking Number: 49860  
Company Tracking Number: SFL-AR-08025.3  
TOI: L04I Individual Life - Term Sub-TOI: L04I.500 Other  
Product Name: Return of Premium - Pages 3 & 4  
Project Name/Number: Return of Premium - Pages 3 & 4/SFL-AR-08025.3

**Item Status:**

**Status  
Date:**

**Satisfied - Item:** AR 03906-04.1 & 03905-04.1

**Comments:**

Please see attached forms.

**Attachments:**

AR 03906-04.1.pdf  
Form\_03905-04.1.pdf

**Item Status:**

**Status  
Date:**

**Satisfied - Item:** Certificate of Compliance &  
Indeterminate Premium Certificate

**Comments:**

Please see attached forms.

**Attachment:**

AR 08025.3 Comply Bulletin 11-83.pdf

**Item Status:**

**Status  
Date:**

**Satisfied - Item:** Consent to Submit Rates and/or  
Cost Basis for Approval

**Comments:**

Please see attached form.

**Attachment:**

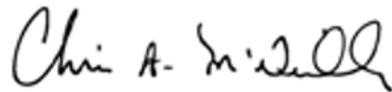
08025 - AR Exhibit A - CONSENT\_INDET\_PREM - from Carl 9-7-11.pdf

**STATE OF ARKANSAS**

**CERTIFICATION**

This is to certify that the forms contained in this submission are in compliance with Arkansas Regulation No. 19:

Form # 08025.3



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Chris A. McNeilly  
Assistant Secretary

September 2, 2011

Date

STATE FARM LIFE INSURANCE COMPANY

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

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

**DISCLAIMER**

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

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

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

Arkansas Life and Health Insurance Guaranty Association  
C/o The Liquidation Division  
1023 West Capitol  
Little Rock, Arkansas 72201

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

**SUMMARY**

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

**Coverage**

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

(Please see reverse side.)

## Exclusions from Coverage

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

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

The Guaranty Association also does NOT provide coverage for:

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

## Limits on Amount of Coverage

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

**Dear Policyholder:**

For information or assistance with any insurance problem, be sure to **contact your State Farm agent first.** Your "good neighbor" agent will be happy to help you.

Agent's Name, Address, Phone Number

If additional information or assistance is required, you may contact:

**State Farm Life Insurance Company  
8900 Amberglen Boulevard  
Austin, Texas 78729-1110  
Phone: (512) 918-4000**

If you are still not satisfied with the service you have received, you should feel free to contact:

**Arkansas Insurance Department  
Consumer Services Division  
1200 West Third Street  
Little Rock, Arkansas 72201-1904  
Phone: 1-800-852-5494**

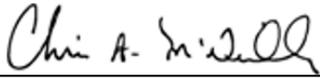
**Policyholder Information Service**

**State Farm Life Insurance Company  
Home Office:  
Bloomington, Illinois 61710-0001**

CERTIFICATE OF COMPLIANCE

State Farm Life Insurance Company certifies that we have reviewed the guidelines in Bulletin No. 11-83 and Form 08025.3 complies with these guidelines. The consent form required by Bulletin No. 11-83 is attached.

State Farm Life Insurance Company  
Company Name



\_\_\_\_\_  
Chris A. McNeilly

Assistant Secretary

\_\_\_\_\_  
Title

Date: September 8, 2011

EXHIBIT A (REVISED)

CONSENT TO SUBMIT RATES  
AND/OR COST BASES FOR APPROVAL

The State Farm Life Insurance Company of  
(Company Name)

Bloomington, Illinois does hereby consent  
(City and State)

and agree

A) that all premium rates and/or cost bases both "maximum" and "current or projected", used in relation to policy form number 08025 must be filed with the Insurance Commissioner for the State of Arkansas ("Commissioner") at least sixty (60) days prior to their proposed effective date. Such rates and/or cost bases shall be deemed effective sixty (60) days after they are filed with the Commissioner, unless the Commissioner shall approve or disapprove such rates and/or cost bases prior to the expiration of sixty (60) days.

or

B) that where the policy is a flexible or indeterminate premium whole life policy which provides for frequent changes in interest rates based on financial market conditions, the company may file a range of rates it will stay within and will notify the Department at least sixty (60) days prior to any change in the range of rates. The company must also document the method used to calculate its premium and range of rates.

State Farm Life Insurance Company  
(Company)

By: Carl Streily  
Carl Streily  
Actuarial Director I

SERFF Tracking Number: STFL-127538336 State: Arkansas  
 Filing Company: State Farm Life Insurance Company State Tracking Number: 49860  
 Company Tracking Number: SFL-AR-08025.3  
 TOI: L041 Individual Life - Term Sub-TOI: L041.500 Other  
 Product Name: Return of Premium - Pages 3 & 4  
 Project Name/Number: Return of Premium - Pages 3 & 4/SFL-AR-08025.3

## Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date:	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
08/31/2011		Supporting Life & Annuity - Acturial Memo Document	10/03/2011	08025 Act Mem - AG45 compliant.pdf Act Mem Att 1 - ROP 20 - 08025v3.pdf (Superseded) Act Mem Att 1 - ROP 30 - 08025v3.pdf Act Mem Att 2 - ROP 20 - 08025v3.pdf Act Mem Att 2 - ROP 30 - 08025v3.pdf