

To calculate the annual premium, multiply the numbers of thousands of face amount by the rate per thousand and then add the **\$50 certificate fee**. To determine the premium on a mode other than annual, first calculate the annual premium and then multiply it by the appropriate modal factor.

Mode	Modal Factor	Male, Standard Non-Tobacco, Age 26, \$25,000 Face Amount • Semi-Annual Payment			
Annual	1.000	Male, Age 26, Rate per Thousand	\$	7.58	
Semi-Annual	0.520	Amount of Insurance (in thousands)	X	25	Annual Premium \$ 239.50
Quarterly	0.265	Annual Base Premium	\$	189.50	Semi-Annual Modal Factor X 0.520
Monthly	0.090	Certificate Fee	+	50.00	Total Semi-Annual Premium \$ 124.54
		Annual Premium	\$	239.50	

### Male (7100)

Per 1k (50k+)				Per 1k (25k-49k)				Per 1k (10k-24k)				Age
Preferred Non Tobacco	Preferred Tobacco	Non Tobacco	Tobacco	Non Tobacco	Tobacco	Non Tobacco	Tobacco	Non Tobacco	Tobacco	Non Tobacco	Tobacco	
3.15	-	3.23	-	3.32	-	3.41	-	0	-	2.99	-	2.92
3.25	-	3.33	-	3.42	-	3.51	-	1	-	3.08	-	3.00
3.35	-	3.43	-	3.52	-	3.62	-	2	-	3.17	-	3.09
3.45	-	3.54	-	3.63	-	3.73	-	3	-	3.27	-	3.18
3.56	-	3.65	-	3.75	-	3.85	-	4	-	3.37	-	3.28
3.67	-	3.77	-	3.87	-	3.97	-	5	-	3.47	-	3.38
3.79	-	3.89	-	3.99	-	4.10	-	6	-	3.58	-	3.49
3.91	-	4.01	-	4.12	-	4.23	-	7	-	3.69	-	3.59
4.04	-	4.14	-	4.26	-	4.37	-	8	-	3.81	-	3.71
4.17	-	4.28	-	4.40	-	4.51	-	9	-	3.93	-	3.83
4.31	-	4.42	-	4.54	-	4.66	-	10	-	4.05	-	3.95
4.46	-	4.57	-	4.70	-	4.82	-	11	-	4.19	-	4.08
4.61	-	4.73	-	4.85	-	4.98	-	12	-	4.32	-	4.21
4.76	-	4.89	-	5.02	-	5.15	-	13	-	4.47	-	4.35
4.92	-	5.05	-	5.18	-	5.32	-	14	-	4.61	-	4.49
5.08	-	5.21	-	5.35	-	5.49	-	15	-	4.76	-	4.64
5.24	6.60	5.37	6.77	5.52	6.95	5.67	7.13	16	6.29	4.91	6.13	4.79
5.40	6.82	5.54	6.99	5.69	7.18	5.84	7.37	17	6.51	5.07	6.34	4.94
5.57	7.05	5.71	7.23	5.86	7.43	6.02	7.62	18	6.74	5.24	6.57	5.10
5.74	7.29	5.89	7.48	6.04	7.68	6.20	7.88	19	6.98	5.41	6.80	5.27
5.92	7.54	6.07	7.74	6.23	7.95	6.40	8.15	20	7.23	5.59	7.05	5.45
6.11	7.81	6.26	8.01	6.43	8.22	6.60	8.44	21	7.50	5.78	7.30	5.63
6.30	8.08	6.46	8.29	6.64	8.51	6.81	8.74	22	7.77	5.98	7.57	5.82
6.51	8.37	6.68	8.58	6.86	8.81	7.04	9.05	23	8.06	6.18	7.86	6.03
6.73	8.67	6.90	8.89	7.08	9.13	7.27	9.37	24	8.36	6.40	8.15	6.24
6.95	8.98	7.13	9.21	7.32	9.46	7.52	9.71	25	8.68	6.62	8.46	6.45
7.20	9.31	7.38	9.55	7.58	9.81	7.78	10.07	26	9.01	6.86	8.78	6.68
7.45	9.66	7.64	9.91	7.85	10.18	8.06	10.45	27	9.36	7.11	9.12	6.92
7.72	10.03	7.92	10.29	8.14	10.57	8.35	10.85	28	9.73	7.36	9.48	7.17
8.01	10.42	8.21	10.69	8.44	10.98	8.66	11.27	29	10.11	7.63	9.86	7.44
8.31	10.83	8.52	11.11	8.75	11.41	8.98	11.71	30	10.52	7.91	10.25	7.71
8.63	11.26	8.85	11.55	9.09	11.86	9.32	12.17	31	10.94	8.20	10.66	7.99
8.95	11.71	9.18	12.01	9.43	12.33	9.68	12.66	32	11.39	8.51	11.10	8.29
9.30	12.18	9.54	12.50	9.79	12.83	10.05	13.17	33	11.85	8.83	11.55	8.60
9.66	12.68	9.90	13.00	10.17	13.36	10.44	13.71	34	12.34	9.16	12.02	8.92
10.03	13.20	10.28	13.54	10.56	13.91	10.84	14.27	35	12.84	9.50	12.51	9.25
10.41	13.75	10.68	14.10	10.97	14.48	11.26	14.86	36	13.37	9.85	13.02	9.60
10.81	14.32	11.09	14.69	11.39	15.08	11.69	15.48	37	13.92	10.22	13.56	9.96
11.23	14.92	11.52	15.30	11.83	15.72	12.14	16.13	38	14.49	10.61	14.12	10.34
11.67	15.55	11.96	15.95	12.29	16.38	12.61	16.81	39	15.09	11.01	14.70	10.73
12.12	16.20	12.44	16.62	12.77	17.07	13.11	17.51	40	15.72	11.44	15.32	11.15
12.61	16.88	12.93	17.32	13.28	17.79	13.63	18.25	41	16.39	11.89	15.97	11.59
13.11	17.60	13.45	18.05	13.81	18.54	14.17	19.03	42	17.09	12.37	16.65	12.05
13.64	18.36	13.99	18.83	14.37	19.34	14.75	19.84	43	17.84	12.87	17.38	12.54
14.20	19.16	14.57	19.65	14.96	20.18	15.36	20.71	44	18.62	13.40	18.15	13.06

### Female (7200)

Per 1k (10k-24k)				Per 1k (25k-49k)				Per 1k (50k+)			
Tobacco	Non Tobacco	Tobacco	Non Tobacco	Tobacco	Non Tobacco	Preferred Tobacco	Preferred Non Tobacco	Tobacco	Non Tobacco	Preferred Tobacco	Preferred Non Tobacco
-	2.99	-	2.92	-	2.84	-	2.77	-	2.84	-	2.77
-	3.08	-	3.00	-	2.92	-	2.85	-	2.92	-	2.85
-	3.17	-	3.09	-	3.01	-	2.93	-	3.01	-	2.93
-	3.27	-	3.18	-	3.10	-	3.02	-	3.10	-	3.02
-	3.37	-	3.28	-	3.19	-	3.11	-	3.19	-	3.11
-	3.47	-	3.38	-	3.29	-	3.21	-	3.29	-	3.21
-	3.58	-	3.49	-	3.39	-	3.31	-	3.39	-	3.31
-	3.69	-	3.59	-	3.50	-	3.41	-	3.50	-	3.41
-	3.81	-	3.71	-	3.61	-	3.52	-	3.61	-	3.52
-	3.93	-	3.83	-	3.73	-	3.63	-	3.73	-	3.63
-	4.05	-	3.95	-	3.85	-	3.75	-	3.85	-	3.75
-	4.19	-	4.08	-	3.97	-	3.87	-	3.97	-	3.87
-	4.32	-	4.21	-	4.10	-	4.00	-	4.10	-	4.00
-	4.47	-	4.35	-	4.24	-	4.13	-	4.24	-	4.13
-	4.61	-	4.49	-	4.38	-	4.27	-	4.38	-	4.27
-	4.76	-	4.64	-	4.52	-	4.40	-	4.52	-	4.40
6.29	4.91	6.13	4.79	5.97	4.66	5.82	4.55	6.29	4.91	6.13	4.79
6.51	5.07	6.34	4.94	6.17	4.81	6.02	4.69	6.51	5.07	6.34	4.94
6.74	5.24	6.57	5.10	6.39	4.97	6.23	4.85	6.74	5.24	6.57	5.10
6.98	5.41	6.80	5.27	6.62	5.13	6.46	5.01	6.98	5.41	6.80	5.27
7.23	5.59	7.05	5.45	6.86	5.31	6.69	5.17	7.23	5.59	7.05	5.45
7.50	5.78	7.30	5.63	7.11	5.48	6.93	5.35	7.50	5.78	7.30	5.63
7.77	5.98	7.57	5.82	7.38	5.67	7.19	5.53	7.77	5.98	7.57	5.82
8.06	6.18	7.86	6.03	7.65	5.87	7.46	5.72	8.06	6.18	7.86	6.03
8.36	6.40	8.15	6.24	7.94	6.07	7.74	5.92	8.36	6.40	8.15	6.24
8.68	6.62	8.46	6.45	8.24	6.29	8.03	6.13	8.68	6.62	8.46	6.45
9.01	6.86	8.78	6.68	8.55	6.51	8.34	6.35	9.01	6.86	8.78	6.68
9.36	7.11	9.12	6.92	8.88	6.74	8.66	6.57	9.36	7.11	9.12	6.92
9.73	7.36	9.48	7.17	9.23	6.99	9.00	6.81	9.73	7.36	9.48	7.17
10.11	7.63	9.86	7.44	9.60	7.24	9.36	7.06	10.11	7.63	9.86	7.44
10.52	7.91	10.25	7.71	9.98	7.51	9.73	7.32	10.52	7.91	10.25	7.71
10.94	8.20	10.66	7.99	10.38	7.78	10.12	7.59	10.94	8.20	10.66	7.99
11.39	8.51	11.10	8.29	10.80	8.07	10.53	7.87	11.39	8.51	11.10	8.29
11.85	8.83	11.55	8.60	11.24	8.37	10.96	8.16	11.85	8.83	11.55	8.60
12.34	9.16	12.02	8.92	11.70	8.69	11.41	8.47	12.34	9.16	12.02	8.92
12.84	9.50	12.51	9.25	12.18	9.01	11.88	8.79	12.84	9.50	12.51	9.25
13.37	9.85	13.02	9.60	12.68	9.35	12.36	9.11	13.37	9.85	13.02	9.60
13.92	10.22	13.56	9.96	13.20	9.70	12.87	9.46	13.92	10.22	13.56	9.96
14.49	10.61	14.12	10.34	13.75	10.06	13.40	9.81	14.49	10.61	14.12	10.34
15.09	11.01	14.70	10.73	14.32	10.45	13.96	10.19	15.09	11.01	14.70	10.73
15.72	11.44	15.32	11.15	14.92	10.85	14.54	10.58	15.72	11.44	15.32	11.15
16.39	11.89	15.97	11.59	15.55	11.28	15.16	11.00	16.39	11.89	15.97	11.59
17.09	12.37	16.65	12.05	16.22	11.73	15.81	11.44	17.09	12.37	16.65	12.05
17.84	12.87	17.38	12.54	16.92	12.21	16.50	11.90	17.84	12.87	17.38	12.54
18.62	13.40	18.15	13.06	17.67	12.71	17.23	12.40	18.62	13.40	18.15	13.06

### SUPPLEMENTAL BENEFITS • Premium Per \$1,000

(ADB) Accidental Death Benefit • (WP) Waiver of Premium

Supplemental Benefits • Premium Per \$1,000									
(ADB) Accidental Death Benefit					(WP) Waiver of Premium				
(GIO) Guaranteed Insurability Option									
ISSUE AGE	ADB Male	ADB Female	WP	GIO	ISSUE AGE	ADB Male	ADB Female	WP	GIO
0	-	-	0.21	0.68	31	0.95	0.90	0.57	1.65
1	-	-	0.21	0.72	32	0.94	0.89	0.60	1.67
2	-	-	0.22	0.75	33	0.93	0.89	0.62	1.68
3	-	-	0.23	0.79	34	0.93	0.89	0.65	1.70
4	-	-	0.23	0.82	35	0.95	0.90	0.68	1.72
5	-	-	0.24	0.85	36	0.99	0.94	0.71	1.74
6	-	-	0.25	0.88	37	1.04	0.99	0.75	1.76
7	-	-	0.26	0.91	38	1.10	1.04	0.79	-
8	-	-	0.27	0.94	39	1.15	1.09	0.84	-
9	-	-	0.28	0.96	40	1.19	1.13	0.89	-
10	0.95	0.90	0.29	0.99	41	1.20	1.14		

To calculate the annual premium, multiply the numbers of thousands of face amount by the rate per thousand and then add the \$50 certificate fee. To determine the premium on a mode other than annual, first calculate the annual premium and then multiply it by the appropriate modal factor.

Mode	Modal Factor	Male, Standard Non-Tobacco, Age 26, \$25,000 Face Amount • Semi-Annual Payment			
Annual	1.000	Male, Age 26, Rate per Thousand		\$ 7.58	
Semi-Annual	0.520	Amount of Insurance (in thousands)		X	25
Quarterly	0.265	Annual Base Premium		\$	189.50
Monthly	0.090	Certificate Fee		+	50.00
		Annual Premium		\$	239.50
		Annual Premium		X	0.520
		Semi-Annual Modal Factor		\$ 124.54	
		Total Semi-Annual Premium		\$	124.54

Male (7100)

Female (7200)

Per 1k (50k+)				Per 1k (25k-49k)		Per 1k (10k-24k)		Age
Preferred Non Tobacco	Preferred Tobacco	Non Tobacco	Tobacco	Non Tobacco	Tobacco	Non Tobacco	Tobacco	
14.80	20.00	15.18	20.52	15.59	21.07	16.00	21.62	
221.37	234.39	227.05	240.40	233.19	246.90	239.32	253.40	

Per 1k (10k-24k)		Per 1k (25k-49k)		Per 1k (50k+)				Age
Tobacco	Non Tobacco	Tobacco	Non Tobacco	Tobacco	Non Tobacco	Preferred Tobacco	Preferred Non Tobacco	
19.46	13.96	18.96	13.60	18.46	13.25	18.00	12.92	
238.19	201.66	232.09	196.49	225.98	191.32	220.33	186.53	

SUPPLEMENTAL BENEFITS • Premium Per \$1,000 (ADB) Accidental Death Benefit • (WP) Waiver of Premium (GIO) Guaranteed Insurability Option

ISSUE AGE	ADB		WP	GIO	ISSUE AGE	ADB		WP	GIO
	Male	Female				Male	Female		
0	-	-	0.21	0.68	31	0.95	0.90	0.57	1.65
30	0.95	0.90	0.55	1.62	-	-	-	-	-

JPB (Juvenile Payor Benefit)

INSURED AGE	Payor Age						Example Premium Calc
	20-29	30-34	35-39	40-44	45-49	50-55	
0	0.09	0.11	0.15	0.22	0.31	0.47	<p>How would I calculate the Semi-Annual premium with ADB on a certificate with \$25,000 initial coverage for a prospect who is a 26 year old male.</p> <p>\$0.95 x 25,000 = \$23.75</p> <p>\$23.75 x 0.52 = \$12.35</p> <p>Base Premium \$120.22</p> <p>Semi-Annual Premium \$133.12</p> <p>For other premium modes, multiply the calculated Annual Premium by the factor below:</p> <p>Semi-Annual x 0.520</p> <p>Quarterly x 0.265</p> <p>Monthly x 0.09</p>
1	0.08	0.10	0.14	0.20	0.28	0.45	
2	0.08	0.10	0.13	0.19	0.27	0.42	
3	0.07	0.09	0.12	0.17	0.25	0.39	
4	0.07	0.09	0.12	0.16	0.24	0.37	
5	0.07	0.09	0.11	0.15	0.23	0.35	
6	0.07	0.08	0.10	0.14	0.21	0.33	
7	0.05	0.07	0.10	0.13	0.20	0.31	
8	0.05	0.07	0.09	0.12	0.17	0.28	
9	0.05	0.07	0.09	0.11	0.16	0.26	
10	0.04	0.05	0.08	0.11	0.15	0.24	
11	0.04	0.05	0.07	0.10	0.14	0.22	
12	0.04	0.05	0.07	0.09	0.13	0.21	
13	0.04	0.04	0.05	0.08	0.11	0.19	
14	0.03	0.04	0.05	0.08	0.10	0.16	
15	0.03	0.04	0.04	0.07	0.09	0.15	