

LifeScape®
Term 350 Plus Life Insurance - 10-Year Term
Annual Premium per \$1,000 Benefit



For all states except the following: MT										
Male										
Non-Tobacco										
Issue Age	Preferred+	Preferred	Standard	Waiver		Issue Age	Preferred+	Preferred	Standard	Waiver
18-20	0.32	0.41	0.65	0.05		48	1.40	1.45	2.30	0.32
21	0.32	0.41	0.65	0.05		49	1.53	1.59	2.52	0.37
22	0.32	0.41	0.65	0.05		50	1.67	1.74	2.76	0.43
23	0.32	0.41	0.65	0.05		51	1.81	1.90	3.02	0.50
24	0.32	0.41	0.65	0.05		52	1.95	2.06	3.29	0.58
25	0.32	0.41	0.65	0.05		53	2.11	2.23	3.59	0.67
26	0.32	0.41	0.65	0.05		54	2.30	2.44	3.91	0.78
27	0.32	0.41	0.65	0.05		55	2.54	2.68	4.25	0.92
28	0.32	0.41	0.65	0.05		56	2.82	2.95	4.61	
29	0.32	0.41	0.65	0.06		57	3.14	3.25	4.99	
30	0.32	0.41	0.65	0.06		58	3.49	3.58	5.40	
31	0.33	0.42	0.67	0.06		59	3.89	3.96	5.84	
32	0.33	0.43	0.69	0.07		60	4.35	4.40	6.33	
33	0.34	0.44	0.72	0.07		61	4.85	4.89	6.83	
34	0.36	0.46	0.76	0.07		62	5.38	5.41	7.34	
35	0.38	0.49	0.81	0.08		63	5.97	6.00	7.90	
36	0.41	0.53	0.87	0.09		64	6.64	6.66	8.58	
37	0.45	0.57	0.93	0.09		65	7.42	7.44	9.43	
38	0.50	0.62	1.00	0.10		66	7.90	7.92	10.08	
39	0.56	0.67	1.08	0.11		67	8.08	8.10	10.50	
40	0.62	0.73	1.17	0.12		68	8.54	8.57	11.23	
41	0.69	0.79	1.26	0.13		69	9.89	9.92	12.83	
42	0.78	0.86	1.36	0.15		70	12.74	12.77	15.84	
43	0.87	0.93	1.47	0.16		71	16.18	16.21	19.61	
44	0.97	1.01	1.59	0.18		72	19.81	19.85	23.78	
45	1.07	1.10	1.74	0.21		73	24.99	25.03	29.32	
46	1.18	1.21	1.91	0.24		74	33.05	33.08	37.22	
47	1.29	1.32	2.09	0.28						

To calculate the modal premium, multiply the number of units (benefit amount divided by \$1,000) by the unit rate listed above, add the policy fee of \$70, multiply by the mode factor (semi-annual, 0.510; quarterly, 0.264; monthly, 0.087) and round to the nearest \$.01.

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LifeScape®
Term 350 Plus Life Insurance - 10-Year Term
Annual Premium per \$1,000 Benefit



For all states except the following: MT										
Female										
Non-Tobacco										
Issue Age	Preferred+	Preferred	Standard	Waiver		Issue Age	Preferred+	Preferred	Standard	Waiver
18-20	0.14	0.17	0.29	0.05		48	1.06	1.06	1.65	0.22
21	0.14	0.17	0.29	0.05		49	1.16	1.17	1.82	0.26
22	0.14	0.17	0.29	0.05		50	1.27	1.28	2.00	0.30
23	0.14	0.17	0.29	0.05		51	1.38	1.39	2.20	0.35
24	0.15	0.17	0.30	0.05		52	1.49	1.51	2.41	0.40
25	0.15	0.18	0.31	0.05		53	1.62	1.63	2.63	0.47
26	0.16	0.19	0.32	0.05		54	1.77	1.78	2.87	0.54
27	0.16	0.20	0.34	0.05		55	1.95	1.97	3.12	0.64
28	0.17	0.21	0.36	0.05		56	2.16	2.18	3.37	
29	0.18	0.22	0.38	0.05		57	2.40	2.42	3.62	
30	0.19	0.24	0.41	0.05		58	2.67	2.69	3.89	
31	0.20	0.26	0.44	0.05		59	2.98	3.00	4.19	
32	0.22	0.27	0.47	0.05		60	3.33	3.35	4.53	
33	0.23	0.29	0.51	0.05		61	3.72	3.74	4.88	
34	0.25	0.31	0.55	0.06		62	4.14	4.17	5.23	
35	0.28	0.34	0.59	0.06		63	4.61	4.65	5.62	
36	0.31	0.37	0.64	0.06		64	5.14	5.18	6.11	
37	0.35	0.41	0.69	0.07		65	5.74	5.79	6.74	
38	0.39	0.44	0.74	0.07		66	6.15	6.20	7.38	
39	0.43	0.49	0.80	0.08		67	6.35	6.42	8.00	
40	0.48	0.53	0.86	0.09		68	6.75	6.83	8.79	
41	0.53	0.58	0.92	0.10		69	7.76	7.84	9.95	
42	0.59	0.62	0.99	0.11		70	9.77	9.85	11.68	
43	0.65	0.67	1.06	0.12		71	12.26	12.34	13.80	
44	0.72	0.73	1.14	0.13		72	14.95	15.04	16.19	
45	0.79	0.80	1.24	0.15		73	18.65	18.74	19.10	
46	0.87	0.88	1.36	0.17		74	24.15	24.22	22.78	
47	0.96	0.97	1.50	0.19						

To calculate the modal premium, multiply the number of units (benefit amount divided by \$1,000) by the unit rate listed above, add the policy fee of \$70, multiply by the mode factor (semi-annual, 0.510; quarterly, 0.264; monthly, 0.087) and round to the nearest \$.01.

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Annual Premium per \$1,000 Benefit



For all states except the following: MT								
Male								
Tobacco								
Issue Age	Preferred	Standard	Waiver		Issue Age	Preferred	Standard	Waiver
18-20	0.98	1.61	0.05		46	3.60	4.89	0.24
21	0.98	1.61	0.05		47	3.92	5.35	0.28
22	0.98	1.61	0.05		48	4.26	5.86	0.32
23	0.98	1.61	0.05		49	4.63	6.42	0.37
24	0.98	1.61	0.05		50	5.04	7.02	0.43
25	0.98	1.61	0.05		51	5.47	7.67	0.50
26	0.98	1.61	0.05		52	5.91	8.38	0.58
27	0.98	1.61	0.05		53	6.39	9.13	0.67
28	0.98	1.61	0.05		54	6.93	9.92	0.78
29	0.98	1.61	0.06		55	7.56	10.73	0.92
30	0.98	1.61	0.06		56	8.26	11.55	
31	1.00	1.68	0.06		57	9.02	12.39	
32	1.03	1.77	0.07		58	9.85	13.26	
33	1.08	1.88	0.07		59	10.78	14.21	
34	1.13	2.00	0.07		60	11.80	15.25	
35	1.22	2.14	0.08		61	12.90	16.33	
36	1.33	2.29	0.09		62	14.07	17.44	
37	1.46	2.45	0.09		63	15.35	18.64	
38	1.61	2.62	0.10		64	16.77	20.04	
39	1.78	2.82	0.11		65	18.37	21.70	
40	1.98	3.04	0.12		66	19.64	23.24	
41	2.20	3.27	0.13		67	20.56	24.60	
42	2.44	3.52	0.15		68	21.89	26.37	
43	2.71	3.79	0.16		69	24.40	29.13	
44	2.99	4.10	0.18		70	28.84	33.48	
45	3.29	4.47	0.21					

To calculate the modal premium, multiply the number of units (benefit amount divided by \$1,000) by the unit rate listed above, add the policy fee of \$70, multiply by the mode factor (semi-annual, 0.510; quarterly, 0.264; monthly, 0.087) and round to the nearest \$.01.

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LifeScape®
Term 350 Plus Life Insurance - 10-Year Term
Annual Premium per \$1,000 Benefit



For all states except the following: MT								
Female								
Tobacco								
Issue Age	Preferred	Standard	Waiver		Issue Age	Preferred	Standard	Waiver
18-20	0.43	0.65	0.05		46	2.45	3.25	0.17
21	0.43	0.65	0.05		47	2.68	3.57	0.19
22	0.43	0.65	0.05		48	2.93	3.93	0.22
23	0.43	0.65	0.05		49	3.21	4.32	0.26
24	0.44	0.67	0.05		50	3.51	4.74	0.30
25	0.46	0.69	0.05		51	3.83	5.20	0.35
26	0.48	0.72	0.05		52	4.17	5.70	0.40
27	0.50	0.77	0.05		53	4.53	6.24	0.47
28	0.53	0.82	0.05		54	4.93	6.79	0.54
29	0.57	0.87	0.05		55	5.38	7.37	0.64
30	0.61	0.94	0.05		56	5.86	7.94	
31	0.66	1.01	0.05		57	6.37	8.52	
32	0.70	1.09	0.05		58	6.92	9.13	
33	0.76	1.18	0.05		59	7.54	9.81	
34	0.82	1.27	0.06		60	8.25	10.57	
35	0.90	1.38	0.06		61	9.03	11.38	
36	0.99	1.50	0.06		62	9.87	12.22	
37	1.09	1.62	0.07		63	10.78	13.15	
38	1.19	1.75	0.07		64	11.80	14.25	
39	1.31	1.90	0.08		65	12.95	15.57	
40	1.44	2.05	0.09		66	14.00	17.03	
41	1.57	2.20	0.10		67	14.94	18.60	
42	1.71	2.35	0.11		68	16.10	20.39	
43	1.87	2.52	0.12		69	17.81	22.53	
44	2.04	2.72	0.13		70	20.41	25.14	
45	2.23	2.96	0.15					

To calculate the modal premium, multiply the number of units (benefit amount divided by \$1,000) by the unit rate listed above, add the policy fee of \$70, multiply by the mode factor (semi-annual, 0.510; quarterly, 0.264; monthly, 0.087) and round to the nearest \$.01.

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LifeScape®
Term 350 Plus Life Insurance - 15-Year Term
Annual Premium per \$1,000 Benefit



For all states except the following: MT								
Male								
Issue Age	Non-Tobacco				Issue Age	Tobacco		
	Preferred+	Preferred	Standard	Waiver		Preferred	Standard	Waiver
18-20	0.34	0.44	0.69	0.05	18-20	1.04	1.58	0.05
21	0.34	0.44	0.69	0.05	21	1.04	1.58	0.05
22	0.34	0.44	0.69	0.05	22	1.04	1.58	0.05
23	0.34	0.44	0.69	0.05	23	1.04	1.58	0.05
24	0.34	0.44	0.69	0.05	24	1.04	1.58	0.05
25	0.34	0.44	0.69	0.05	25	1.04	1.58	0.05
26	0.34	0.45	0.70	0.05	26	1.06	1.62	0.05
27	0.35	0.46	0.71	0.05	27	1.07	1.66	0.05
28	0.36	0.47	0.72	0.05	28	1.10	1.72	0.05
29	0.37	0.48	0.74	0.06	29	1.13	1.80	0.06
30	0.38	0.50	0.77	0.06	30	1.18	1.90	0.06
31	0.39	0.52	0.81	0.06	31	1.23	2.02	0.06
32	0.41	0.54	0.85	0.07	32	1.29	2.16	0.07
33	0.43	0.57	0.90	0.08	33	1.35	2.32	0.08
34	0.45	0.60	0.95	0.08	34	1.44	2.49	0.08
35	0.49	0.64	1.02	0.09	35	1.56	2.68	0.09
36	0.54	0.69	1.10	0.10	36	1.71	2.88	0.10
37	0.59	0.74	1.18	0.11	37	1.87	3.09	0.11
38	0.66	0.80	1.27	0.11	38	2.07	3.31	0.11
39	0.73	0.87	1.37	0.13	39	2.29	3.56	0.13
40	0.82	0.95	1.49	0.14	40	2.54	3.85	0.14
41	0.92	1.04	1.62	0.16	41	2.83	4.16	0.16
42	1.03	1.13	1.75	0.18	42	3.15	4.49	0.18
43	1.15	1.23	1.90	0.20	43	3.50	4.85	0.20
44	1.28	1.34	2.07	0.23	44	3.88	5.26	0.23
45	1.42	1.47	2.26	0.26	45	4.26	5.72	0.26
46	1.56	1.61	2.47	0.30	46	4.65	6.23	0.30
47	1.70	1.75	2.70	0.34	47	5.04	6.79	0.34
48	1.85	1.91	2.96	0.39	48	5.46	7.39	0.39
49	2.01	2.09	3.23	0.45	49	5.91	8.06	0.45
50	2.20	2.29	3.54	0.53	50	6.42	8.79	0.53
51	2.39	2.50	3.87	0.62	51	6.97	9.60	0.62
52	2.59	2.72	4.23	0.71	52	7.54	10.47	0.71
53	2.81	2.96	4.61	0.83	53	8.16	11.41	0.83
54	3.07	3.24	5.02	0.96	54	8.86	12.38	0.96
55	3.40	3.57	5.47	1.13	55	9.66	13.39	1.13
56	3.78	3.94	5.94		56	10.54	14.40	
57	4.20	4.33	6.43		57	11.49	15.42	
58	4.67	4.78	6.96		58	12.53	16.49	
59	5.21	5.29	7.55		59	13.69	17.66	
60	5.84	5.90	8.21		60	15.00	18.96	
61	6.54	6.58	8.94		61	16.43	20.39	
62	7.29	7.33	9.72		62	17.97	21.91	
63	8.13	8.16	10.56		63	19.64	23.55	
64	9.08	9.11	11.50		64	21.51	25.33	
65	10.19	10.21	12.53		65	23.59	27.27	

To calculate the modal premium, multiply the number of units (benefit amount divided by \$1,000) by the unit rate listed above, add the policy fee of \$70, multiply by the mode factor (semi-annual, 0.510; quarterly, 0.264; monthly, 0.087) and round to the nearest \$.01.

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LifeScape®
Term 350 Plus Life Insurance - 15-Year Term
Annual Premium per \$1,000 Benefit



For all states except the following: MT								
Female								
Issue Age	Non-Tobacco				Issue Age	Tobacco		
	Preferred+	Preferred	Standard	Waiver		Preferred	Standard	Waiver
18-20	0.17	0.20	0.33	0.05	18-20	0.48	0.71	0.05
21	0.17	0.20	0.33	0.05	21	0.48	0.72	0.05
22	0.18	0.21	0.34	0.05	22	0.50	0.73	0.05
23	0.18	0.22	0.35	0.05	23	0.51	0.76	0.05
24	0.19	0.23	0.36	0.05	24	0.53	0.79	0.05
25	0.20	0.24	0.38	0.05	25	0.56	0.83	0.05
26	0.21	0.25	0.40	0.05	26	0.59	0.88	0.05
27	0.22	0.27	0.43	0.05	27	0.63	0.94	0.05
28	0.24	0.28	0.45	0.05	28	0.67	1.01	0.05
29	0.25	0.30	0.49	0.05	29	0.72	1.08	0.05
30	0.27	0.32	0.52	0.05	30	0.78	1.17	0.05
31	0.29	0.34	0.56	0.05	31	0.84	1.26	0.05
32	0.30	0.36	0.60	0.06	32	0.90	1.37	0.06
33	0.32	0.39	0.64	0.06	33	0.97	1.48	0.06
34	0.34	0.42	0.69	0.07	34	1.06	1.60	0.07
35	0.37	0.45	0.74	0.07	35	1.15	1.73	0.07
36	0.41	0.49	0.80	0.07	36	1.25	1.87	0.07
37	0.45	0.53	0.86	0.08	37	1.37	2.01	0.08
38	0.50	0.57	0.93	0.08	38	1.49	2.17	0.08
39	0.55	0.62	1.00	0.09	39	1.63	2.34	0.09
40	0.62	0.68	1.09	0.10	40	1.80	2.54	0.10
41	0.69	0.75	1.18	0.11	41	1.99	2.76	0.11
42	0.78	0.82	1.28	0.13	42	2.21	3.00	0.13
43	0.87	0.90	1.39	0.14	43	2.44	3.26	0.14
44	0.97	0.98	1.51	0.17	44	2.69	3.55	0.17
45	1.07	1.08	1.65	0.19	45	2.96	3.88	0.19
46	1.18	1.18	1.81	0.22	46	3.23	4.24	0.22
47	1.29	1.29	1.98	0.24	47	3.52	4.63	0.24
48	1.41	1.41	2.16	0.28	48	3.82	5.05	0.28
49	1.54	1.55	2.37	0.32	49	4.15	5.51	0.32
50	1.68	1.69	2.59	0.37	50	4.52	6.01	0.37
51	1.82	1.84	2.83	0.43	51	4.91	6.56	0.43
52	1.97	1.98	3.08	0.50	52	5.32	7.15	0.50
53	2.13	2.15	3.36	0.57	53	5.77	7.78	0.57
54	2.32	2.35	3.65	0.67	54	6.27	8.46	0.67
55	2.57	2.60	3.97	0.78	55	6.84	9.17	0.78
56	2.86	2.89	4.30		56	7.47	9.90	
57	3.18	3.21	4.65		57	8.14	10.65	
58	3.55	3.58	5.02		58	8.88	11.46	
59	3.98	4.00	5.43		59	9.71	12.35	
60	4.47	4.50	5.91		60	10.66	13.36	
61	5.02	5.05	6.44		61	11.71	14.48	
62	5.61	5.65	7.01		62	12.84	15.68	
63	6.27	6.32	7.63		63	14.09	16.98	
64	7.02	7.09	8.32		64	15.48	18.41	
65	7.90	7.98	9.08		65	17.04	19.99	

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Annual Premium per \$1,000 Benefit



For all states except the following: MT								
Male								
Issue Age	Non-Tobacco				Issue Age	Tobacco		
	Preferred+	Preferred	Standard	Waiver		Preferred	Standard	Waiver
18-20	0.35	0.47	0.72	0.05	18-20	1.11	1.69	0.05
21	0.35	0.47	0.72	0.05	21	1.11	1.69	0.05
22	0.35	0.47	0.72	0.05	22	1.11	1.69	0.05
23	0.35	0.47	0.72	0.05	23	1.12	1.69	0.05
24	0.36	0.47	0.73	0.05	24	1.13	1.72	0.05
25	0.37	0.48	0.75	0.05	25	1.16	1.77	0.05
26	0.38	0.49	0.77	0.05	26	1.19	1.83	0.05
27	0.39	0.51	0.80	0.06	27	1.23	1.91	0.06
28	0.41	0.53	0.83	0.06	28	1.28	2.01	0.06
29	0.43	0.56	0.86	0.07	29	1.34	2.13	0.07
30	0.45	0.59	0.91	0.07	30	1.41	2.27	0.07
31	0.47	0.62	0.96	0.07	31	1.49	2.44	0.07
32	0.49	0.65	1.02	0.08	32	1.57	2.63	0.08
33	0.52	0.69	1.09	0.08	33	1.67	2.85	0.08
34	0.56	0.73	1.17	0.09	34	1.80	3.08	0.09
35	0.61	0.79	1.26	0.10	35	1.96	3.33	0.10
36	0.67	0.86	1.36	0.11	36	2.16	3.59	0.11
37	0.75	0.93	1.48	0.13	37	2.38	3.87	0.13
38	0.84	1.02	1.61	0.14	38	2.64	4.17	0.14
39	0.94	1.11	1.75	0.16	39	2.93	4.50	0.16
40	1.05	1.22	1.90	0.18	40	3.25	4.86	0.18
41	1.18	1.33	2.06	0.20	41	3.61	5.24	0.20
42	1.33	1.45	2.23	0.22	42	4.01	5.64	0.22
43	1.48	1.58	2.41	0.25	43	4.43	6.07	0.25
44	1.65	1.73	2.62	0.28	44	4.89	6.56	0.28
45	1.83	1.89	2.86	0.32	45	5.36	7.11	0.32
46	2.01	2.07	3.13	0.37	46	5.84	7.73	0.37
47	2.20	2.26	3.42	0.42	47	6.34	8.40	0.42
48	2.40	2.47	3.74	0.47	48	6.86	9.14	0.47
49	2.62	2.71	4.09	0.55	49	7.43	9.94	0.55
50	2.87	2.97	4.48	0.64	50	8.06	10.81	0.64
51	3.13	3.25	4.89	0.75	51	8.73	11.76	0.75
52	3.39	3.54	5.34	0.86	52	9.44	12.79	0.86
53	3.69	3.86	5.81	0.99	53	10.20	13.88	0.99
54	4.05	4.24	6.33	1.16	54	11.07	15.04	1.16
55	4.49	4.69	6.91	1.36	55	12.06	16.24	1.36
56	5.01	5.20	7.53		56	13.17	17.47	
57	5.59	5.76	8.19		57	14.36	18.73	
58	6.24	6.39	8.90		58	15.68	20.06	
59	6.98	7.10	9.68		59	17.13	21.49	
60	7.84	7.91	10.55		60	18.75	23.06	

To calculate the modal premium, multiply the number of units (benefit amount divided by \$1,000) by the unit rate listed above, add the policy fee of \$70, multiply by the mode factor (semi-annual, 0.510; quarterly, 0.264; monthly, 0.087) and round to the nearest \$.01.

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LifeScape®
Term 350 Plus Life Insurance - 20-Year Term
Annual Premium per \$1,000 Benefit



For all states except the following: MT								
Female								
Issue Age	Non-Tobacco				Issue Age	Tobacco		
	Preferred+	Preferred	Standard	Waiver		Preferred	Standard	Waiver
18-20	0.18	0.22	0.35	0.05	18-20	0.52	0.78	0.05
21	0.19	0.23	0.36	0.05	21	0.54	0.80	0.05
22	0.20	0.23	0.38	0.05	22	0.56	0.83	0.05
23	0.21	0.24	0.39	0.05	23	0.58	0.87	0.05
24	0.22	0.26	0.41	0.05	24	0.62	0.92	0.05
25	0.23	0.27	0.44	0.05	25	0.66	0.98	0.05
26	0.24	0.29	0.47	0.05	26	0.71	1.05	0.05
27	0.26	0.31	0.50	0.05	27	0.76	1.13	0.05
28	0.28	0.33	0.54	0.05	28	0.82	1.21	0.05
29	0.30	0.35	0.58	0.05	29	0.89	1.31	0.05
30	0.32	0.38	0.62	0.05	30	0.96	1.42	0.05
31	0.34	0.41	0.67	0.05	31	1.03	1.54	0.05
32	0.36	0.44	0.72	0.06	32	1.11	1.66	0.06
33	0.39	0.47	0.78	0.07	33	1.20	1.80	0.07
34	0.42	0.50	0.84	0.07	34	1.30	1.95	0.07
35	0.46	0.55	0.91	0.08	35	1.42	2.12	0.08
36	0.51	0.60	0.99	0.09	36	1.56	2.31	0.09
37	0.57	0.66	1.08	0.10	37	1.73	2.51	0.10
38	0.64	0.73	1.17	0.11	38	1.91	2.73	0.11
39	0.72	0.80	1.28	0.12	39	2.11	2.97	0.12
40	0.81	0.88	1.39	0.13	40	2.33	3.24	0.13
41	0.91	0.97	1.51	0.14	41	2.58	3.52	0.14
42	1.02	1.07	1.64	0.16	42	2.85	3.82	0.16
43	1.14	1.17	1.78	0.18	43	3.14	4.14	0.18
44	1.27	1.28	1.93	0.20	44	3.45	4.50	0.20
45	1.40	1.41	2.11	0.23	45	3.78	4.90	0.23
46	1.54	1.54	2.30	0.26	46	4.12	5.33	0.26
47	1.68	1.68	2.51	0.30	47	4.47	5.80	0.30
48	1.83	1.83	2.74	0.34	48	4.84	6.30	0.34
49	1.99	2.00	2.99	0.39	49	5.25	6.86	0.39
50	2.18	2.19	3.27	0.45	50	5.71	7.47	0.45
51	2.37	2.39	3.57	0.52	51	6.20	8.14	0.52
52	2.57	2.59	3.90	0.61	52	6.73	8.85	0.61
53	2.79	2.82	4.25	0.70	53	7.30	9.62	0.70
54	3.07	3.09	4.64	0.82	54	7.94	10.45	0.82
55	3.41	3.44	5.06	0.96	55	8.68	11.34	0.96
56	3.82	3.85	5.51		56	9.50	12.27	
57	4.27	4.30	5.99		57	10.40	13.25	
58	4.78	4.82	6.51		58	11.38	14.30	
59	5.37	5.41	7.08		59	12.46	15.43	
60	6.05	6.09	7.72		60	13.68	16.69	

To calculate the modal premium, multiply the number of units (benefit amount divided by \$1,000) by the unit rate listed above, add the policy fee of \$70, multiply by the mode factor (semi-annual, 0.510; quarterly, 0.264; monthly, 0.087) and round to the nearest \$.01.

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LifeScape®
Term 350 Plus Life Insurance - 30-Year Term
Annual Premium per \$1,000 Benefit



For all states except the following: MT								
Male								
Issue Age	Non-Tobacco				Issue Age	Tobacco		
	Preferred+	Preferred	Standard	Waiver		Preferred	Standard	Waiver
18-20	0.42	0.56	0.85	0.05	18-20	1.35	2.04	0.05
21	0.43	0.57	0.86	0.05	21	1.38	2.07	0.05
22	0.44	0.58	0.88	0.05	22	1.42	2.12	0.05
23	0.46	0.60	0.91	0.05	23	1.48	2.20	0.05
24	0.48	0.63	0.95	0.06	24	1.54	2.30	0.06
25	0.51	0.66	1.00	0.06	25	1.62	2.42	0.06
26	0.54	0.70	1.05	0.06	26	1.71	2.57	0.06
27	0.57	0.74	1.12	0.07	27	1.80	2.73	0.07
28	0.61	0.79	1.19	0.07	28	1.91	2.93	0.07
29	0.65	0.84	1.27	0.08	29	2.04	3.15	0.08
30	0.70	0.90	1.36	0.09	30	2.18	3.40	0.09
31	0.75	0.96	1.46	0.10	31	2.33	3.69	0.10
32	0.80	1.03	1.58	0.11	32	2.49	4.01	0.11
33	0.85	1.11	1.70	0.12	33	2.67	4.35	0.12
34	0.93	1.20	1.84	0.13	34	2.88	4.72	0.13
35	1.02	1.30	2.00	0.15	35	3.14	5.10	0.15
36	1.14	1.42	2.17	0.17	36	3.45	5.49	0.17
37	1.27	1.55	2.35	0.18	37	3.79	5.89	0.18
38	1.42	1.69	2.55	0.20	38	4.18	6.32	0.20
39	1.59	1.85	2.77	0.22	39	4.61	6.78	0.22
40	1.78	2.03	3.01	0.25	40	5.09	7.28	0.25
41	2.00	2.22	3.26	0.28	41	5.61	7.82	0.28
42	2.24	2.42	3.53	0.31	42	6.15	8.40	0.31
43	2.50	2.64	3.82	0.34	43	6.75	9.01	0.34
44	2.78	2.88	4.14	0.39	44	7.42	9.68	0.39
45	3.09	3.17	4.52	0.45	45	8.18	10.40	0.45
46	3.41	3.49	4.94	0.52				
47	3.74	3.83	5.40	0.60				
48	4.10	4.21	5.90	0.70				
49	4.50	4.63	6.45	0.81				
50	4.96	5.11	7.07	0.95				

To calculate the modal premium, multiply the number of units (benefit amount divided by \$1,000) by the unit rate listed above, add the policy fee of \$70, multiply by the mode factor (semi-annual, 0.510; quarterly, 0.264; monthly, 0.087) and round to the nearest \$.01.

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LifeScape®
Term 350 Plus Life Insurance - 30-Year Term
Annual Premium per \$1,000 Benefit



For all states except the following: MT								
Female								
Issue Age	Non-Tobacco				Issue Age	Tobacco		
	Preferred+	Preferred	Standard	Waiver		Preferred	Standard	Waiver
18-20	0.25	0.29	0.47	0.05	18-20	0.72	1.05	0.05
21	0.26	0.30	0.49	0.05	21	0.75	1.09	0.05
22	0.28	0.32	0.51	0.05	22	0.79	1.15	0.05
23	0.29	0.35	0.55	0.05	23	0.84	1.23	0.05
24	0.32	0.37	0.59	0.05	24	0.91	1.32	0.05
25	0.34	0.40	0.63	0.05	25	0.98	1.42	0.05
26	0.37	0.43	0.68	0.05	26	1.06	1.54	0.05
27	0.40	0.47	0.74	0.06	27	1.15	1.67	0.06
28	0.43	0.51	0.80	0.06	28	1.26	1.81	0.06
29	0.47	0.55	0.87	0.06	29	1.37	1.98	0.06
30	0.51	0.60	0.95	0.07	30	1.50	2.16	0.07
31	0.55	0.65	1.04	0.08	31	1.64	2.36	0.08
32	0.60	0.71	1.13	0.08	32	1.78	2.58	0.08
33	0.65	0.78	1.23	0.09	33	1.94	2.81	0.09
34	0.71	0.85	1.34	0.10	34	2.12	3.07	0.10
35	0.79	0.93	1.46	0.11	35	2.32	3.34	0.11
36	0.88	1.02	1.59	0.12	36	2.55	3.63	0.12
37	0.98	1.11	1.73	0.13	37	2.79	3.93	0.13
38	1.09	1.22	1.88	0.14	38	3.06	4.25	0.14
39	1.22	1.33	2.04	0.16	39	3.36	4.60	0.16
40	1.37	1.47	2.22	0.18	40	3.70	4.98	0.18
41	1.54	1.62	2.41	0.20	41	4.07	5.39	0.20
42	1.72	1.78	2.62	0.22	42	4.46	5.83	0.22
43	1.92	1.96	2.84	0.25	43	4.89	6.31	0.25
44	2.13	2.16	3.09	0.29	44	5.37	6.82	0.29
45	2.37	2.38	3.37	0.33	45	5.91	7.39	0.33
46	2.62	2.62	3.69	0.38				
47	2.88	2.88	4.03	0.44				
48	3.15	3.17	4.40	0.51				
49	3.47	3.48	4.82	0.59				
50	3.82	3.84	5.28	0.69				

To calculate the modal premium, multiply the number of units (benefit amount divided by \$1,000) by the unit rate listed above, add the policy fee of \$70, multiply by the mode factor (semi-annual, 0.510; quarterly, 0.264; monthly, 0.087) and round to the nearest \$.01.

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LifeScape®
Term 350 Plus Life Insurance - 10-Year Term
Annual Premium per \$1,000 Benefit



For Montana Only										
Non-Tobacco										
Issue Age	Preferred+	Preferred	Standard	Waiver		Issue Age	Preferred+	Preferred	Standard	Waiver
18-20	0.32	0.41	0.65	0.05		48	1.40	1.45	2.30	0.32
21	0.32	0.41	0.65	0.05		49	1.53	1.59	2.52	0.37
22	0.32	0.41	0.65	0.05		50	1.67	1.74	2.76	0.43
23	0.32	0.41	0.65	0.05		51	1.81	1.90	3.02	0.50
24	0.32	0.41	0.65	0.05		52	1.95	2.06	3.29	0.58
25	0.32	0.41	0.65	0.05		53	2.11	2.23	3.59	0.67
26	0.32	0.41	0.65	0.05		54	2.30	2.44	3.91	0.78
27	0.32	0.41	0.65	0.05		55	2.54	2.68	4.25	0.92
28	0.32	0.41	0.65	0.05		56	2.82	2.95	4.61	
29	0.32	0.41	0.65	0.06		57	3.14	3.25	4.99	
30	0.32	0.41	0.65	0.06		58	3.49	3.58	5.40	
31	0.33	0.42	0.67	0.06		59	3.89	3.96	5.84	
32	0.33	0.43	0.69	0.07		60	4.35	4.40	6.33	
33	0.34	0.44	0.72	0.07		61	4.85	4.89	6.83	
34	0.36	0.46	0.76	0.07		62	5.38	5.41	7.34	
35	0.38	0.49	0.81	0.08		63	5.97	6.00	7.90	
36	0.41	0.53	0.87	0.09		64	6.64	6.66	8.58	
37	0.45	0.57	0.93	0.09		65	7.42	7.44	9.43	
38	0.50	0.62	1.00	0.10		66	7.90	7.92	10.08	
39	0.56	0.67	1.08	0.11		67	8.08	8.10	10.50	
40	0.62	0.73	1.17	0.12		68	8.54	8.57	11.23	
41	0.69	0.79	1.26	0.13		69	9.89	9.92	12.83	
42	0.78	0.86	1.36	0.15		70	12.74	12.77	15.84	
43	0.87	0.93	1.47	0.16		71	16.18	16.21	19.61	
44	0.97	1.01	1.59	0.18		72	19.81	19.85	23.78	
45	1.07	1.10	1.74	0.21		73	24.99	25.03	29.32	
46	1.18	1.21	1.91	0.24		74	33.05	33.08	37.22	
47	1.29	1.32	2.09	0.28						

To calculate the modal premium, multiply the number of units (benefit amount divided by \$1,000) by the unit rate listed above, add the policy fee of \$70, multiply by the mode factor (semi-annual, 0.510; quarterly, 0.264; monthly, 0.087) and round to the nearest \$.01.

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LifeScape®
Term 350 Plus Life Insurance - 10-Year Term
Annual Premium per \$1,000 Benefit



For Montana Only								
Tobacco								
Issue Age	Preferred	Standard	Waiver		Issue Age	Preferred	Standard	Waiver
18-20	0.98	1.61	0.05		46	3.60	4.89	0.24
21	0.98	1.61	0.05		47	3.92	5.35	0.28
22	0.98	1.61	0.05		48	4.26	5.86	0.32
23	0.98	1.61	0.05		49	4.63	6.42	0.37
24	0.98	1.61	0.05		50	5.04	7.02	0.43
25	0.98	1.61	0.05		51	5.47	7.67	0.50
26	0.98	1.61	0.05		52	5.91	8.38	0.58
27	0.98	1.61	0.05		53	6.39	9.13	0.67
28	0.98	1.61	0.05		54	6.93	9.92	0.78
29	0.98	1.61	0.06		55	7.56	10.73	0.92
30	0.98	1.61	0.06		56	8.26	11.55	
31	1.00	1.68	0.06		57	9.02	12.39	
32	1.03	1.77	0.07		58	9.85	13.26	
33	1.08	1.88	0.07		59	10.78	14.21	
34	1.13	2.00	0.07		60	11.80	15.25	
35	1.22	2.14	0.08		61	12.90	16.33	
36	1.33	2.29	0.09		62	14.07	17.44	
37	1.46	2.45	0.09		63	15.35	18.64	
38	1.61	2.62	0.10		64	16.77	20.04	
39	1.78	2.82	0.11		65	18.37	21.70	
40	1.98	3.04	0.12		66	19.64	23.24	
41	2.20	3.27	0.13		67	20.56	24.60	
42	2.44	3.52	0.15		68	21.89	26.37	
43	2.71	3.79	0.16		69	24.40	29.13	
44	2.99	4.10	0.18		70	28.84	33.48	
45	3.29	4.47	0.21					

To calculate the modal premium, multiply the number of units (benefit amount divided by \$1,000) by the unit rate listed above, add the policy fee of \$70, multiply by the mode factor (semi-annual, 0.510; quarterly, 0.264; monthly, 0.087) and round to the nearest \$.01.

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LifeScape®
Term 350 Plus Life Insurance - 15-Year Term
Annual Premium per \$1,000 Benefit



For Montana Only								
Issue Age	Non-Tobacco				Issue Age	Tobacco		
	Preferred+	Preferred	Standard	Waiver		Preferred	Standard	Waiver
18-20	0.34	0.44	0.69	0.05	18-20	1.04	1.58	0.05
21	0.34	0.44	0.69	0.05	21	1.04	1.58	0.05
22	0.34	0.44	0.69	0.05	22	1.04	1.58	0.05
23	0.34	0.44	0.69	0.05	23	1.04	1.58	0.05
24	0.34	0.44	0.69	0.05	24	1.04	1.58	0.05
25	0.34	0.44	0.69	0.05	25	1.04	1.58	0.05
26	0.34	0.45	0.70	0.05	26	1.06	1.62	0.05
27	0.35	0.46	0.71	0.05	27	1.07	1.66	0.05
28	0.36	0.47	0.72	0.05	28	1.10	1.72	0.05
29	0.37	0.48	0.74	0.06	29	1.13	1.80	0.06
30	0.38	0.50	0.77	0.06	30	1.18	1.90	0.06
31	0.39	0.52	0.81	0.06	31	1.23	2.02	0.06
32	0.41	0.54	0.85	0.07	32	1.29	2.16	0.07
33	0.43	0.57	0.90	0.08	33	1.35	2.32	0.08
34	0.45	0.60	0.95	0.08	34	1.44	2.49	0.08
35	0.49	0.64	1.02	0.09	35	1.56	2.68	0.09
36	0.54	0.69	1.10	0.10	36	1.71	2.88	0.10
37	0.59	0.74	1.18	0.11	37	1.87	3.09	0.11
38	0.66	0.80	1.27	0.11	38	2.07	3.31	0.11
39	0.73	0.87	1.37	0.13	39	2.29	3.56	0.13
40	0.82	0.95	1.49	0.14	40	2.54	3.85	0.14
41	0.92	1.04	1.62	0.16	41	2.83	4.16	0.16
42	1.03	1.13	1.75	0.18	42	3.15	4.49	0.18
43	1.15	1.23	1.90	0.20	43	3.50	4.85	0.20
44	1.28	1.34	2.07	0.23	44	3.88	5.26	0.23
45	1.42	1.47	2.26	0.26	45	4.26	5.72	0.26
46	1.56	1.61	2.47	0.30	46	4.65	6.23	0.30
47	1.70	1.75	2.70	0.34	47	5.04	6.79	0.34
48	1.85	1.91	2.96	0.39	48	5.46	7.39	0.39
49	2.01	2.09	3.23	0.45	49	5.91	8.06	0.45
50	2.20	2.29	3.54	0.53	50	6.42	8.79	0.53
51	2.39	2.50	3.87	0.62	51	6.97	9.60	0.62
52	2.59	2.72	4.23	0.71	52	7.54	10.47	0.71
53	2.81	2.96	4.61	0.83	53	8.16	11.41	0.83
54	3.07	3.24	5.02	0.96	54	8.86	12.38	0.96
55	3.40	3.57	5.47	1.13	55	9.66	13.39	1.13
56	3.78	3.94	5.94		56	10.54	14.40	
57	4.20	4.33	6.43		57	11.49	15.42	
58	4.67	4.78	6.96		58	12.53	16.49	
59	5.21	5.29	7.55		59	13.69	17.66	
60	5.84	5.90	8.21		60	15.00	18.96	
61	6.54	6.58	8.94		61	16.43	20.39	
62	7.29	7.33	9.72		62	17.97	21.91	
63	8.13	8.16	10.56		63	19.64	23.55	
64	9.08	9.11	11.50		64	21.51	25.33	
65	10.19	10.21	12.53		65	23.59	27.27	

To calculate the modal premium, multiply the number of units (benefit amount divided by \$1,000) by the unit rate listed above, add the policy fee of \$70, multiply by the mode factor (semi-annual, 0.510; quarterly, 0.264; monthly, 0.087) and round to the nearest \$.01.

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LifeScape®
Term 350 Plus Life Insurance - 20-Year Term
Annual Premium per \$1,000 Benefit



For Montana Only								
Issue Age	Non-Tobacco				Issue Age	Tobacco		
	Preferred+	Preferred	Standard	Waiver		Preferred	Standard	Waiver
18-20	0.35	0.47	0.72	0.05	18-20	1.11	1.69	0.05
21	0.35	0.47	0.72	0.05	21	1.11	1.69	0.05
22	0.35	0.47	0.72	0.05	22	1.11	1.69	0.05
23	0.35	0.47	0.72	0.05	23	1.12	1.69	0.05
24	0.36	0.47	0.73	0.05	24	1.13	1.72	0.05
25	0.37	0.48	0.75	0.05	25	1.16	1.77	0.05
26	0.38	0.49	0.77	0.05	26	1.19	1.83	0.05
27	0.39	0.51	0.80	0.06	27	1.23	1.91	0.06
28	0.41	0.53	0.83	0.06	28	1.28	2.01	0.06
29	0.43	0.56	0.86	0.07	29	1.34	2.13	0.07
30	0.45	0.59	0.91	0.07	30	1.41	2.27	0.07
31	0.47	0.62	0.96	0.07	31	1.49	2.44	0.07
32	0.49	0.65	1.02	0.08	32	1.57	2.63	0.08
33	0.52	0.69	1.09	0.08	33	1.67	2.85	0.08
34	0.56	0.73	1.17	0.09	34	1.80	3.08	0.09
35	0.61	0.79	1.26	0.10	35	1.96	3.33	0.10
36	0.67	0.86	1.36	0.11	36	2.16	3.59	0.11
37	0.75	0.93	1.48	0.13	37	2.38	3.87	0.13
38	0.84	1.02	1.61	0.14	38	2.64	4.17	0.14
39	0.94	1.11	1.75	0.16	39	2.93	4.50	0.16
40	1.05	1.22	1.90	0.18	40	3.25	4.86	0.18
41	1.18	1.33	2.06	0.20	41	3.61	5.24	0.20
42	1.33	1.45	2.23	0.22	42	4.01	5.64	0.22
43	1.48	1.58	2.41	0.25	43	4.43	6.07	0.25
44	1.65	1.73	2.62	0.28	44	4.89	6.56	0.28
45	1.83	1.89	2.86	0.32	45	5.36	7.11	0.32
46	2.01	2.07	3.13	0.37	46	5.84	7.73	0.37
47	2.20	2.26	3.42	0.42	47	6.34	8.40	0.42
48	2.40	2.47	3.74	0.47	48	6.86	9.14	0.47
49	2.62	2.71	4.09	0.55	49	7.43	9.94	0.55
50	2.87	2.97	4.48	0.64	50	8.06	10.81	0.64
51	3.13	3.25	4.89	0.75	51	8.73	11.76	0.75
52	3.39	3.54	5.34	0.86	52	9.44	12.79	0.86
53	3.69	3.86	5.81	0.99	53	10.20	13.88	0.99
54	4.05	4.24	6.33	1.16	54	11.07	15.04	1.16
55	4.49	4.69	6.91	1.36	55	12.06	16.24	1.36
56	5.01	5.20	7.53		56	13.17	17.47	
57	5.59	5.76	8.19		57	14.36	18.73	
58	6.24	6.39	8.90		58	15.68	20.06	
59	6.98	7.10	9.68		59	17.13	21.49	
60	7.84	7.91	10.55		60	18.75	23.06	

To calculate the modal premium, multiply the number of units (benefit amount divided by \$1,000) by the unit rate listed above, add the policy fee of \$70, multiply by the mode factor (semi-annual, 0.510; quarterly, 0.264; monthly, 0.087) and round to the nearest \$.01.

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LifeScape®
Term 350 Plus Life Insurance - 30-Year Term
Annual Premium per \$1,000 Benefit



For Montana Only								
Issue Age	Non-Tobacco				Issue Age	Tobacco		
	Preferred+	Preferred	Standard	Waiver		Preferred	Standard	Waiver
18-20	0.42	0.56	0.85	0.05	18-20	1.35	2.04	0.05
21	0.43	0.57	0.86	0.05	21	1.38	2.07	0.05
22	0.44	0.58	0.88	0.05	22	1.42	2.12	0.05
23	0.46	0.60	0.91	0.05	23	1.48	2.20	0.05
24	0.48	0.63	0.95	0.06	24	1.54	2.30	0.06
25	0.51	0.66	1.00	0.06	25	1.62	2.42	0.06
26	0.54	0.70	1.05	0.06	26	1.71	2.57	0.06
27	0.57	0.74	1.12	0.07	27	1.80	2.73	0.07
28	0.61	0.79	1.19	0.07	28	1.91	2.93	0.07
29	0.65	0.84	1.27	0.08	29	2.04	3.15	0.08
30	0.70	0.90	1.36	0.09	30	2.18	3.40	0.09
31	0.75	0.96	1.46	0.10	31	2.33	3.69	0.10
32	0.80	1.03	1.58	0.11	32	2.49	4.01	0.11
33	0.85	1.11	1.70	0.12	33	2.67	4.35	0.12
34	0.93	1.20	1.84	0.13	34	2.88	4.72	0.13
35	1.02	1.30	2.00	0.15	35	3.14	5.10	0.15
36	1.14	1.42	2.17	0.17	36	3.45	5.49	0.17
37	1.27	1.55	2.35	0.18	37	3.79	5.89	0.18
38	1.42	1.69	2.55	0.20	38	4.18	6.32	0.20
39	1.59	1.85	2.77	0.22	39	4.61	6.78	0.22
40	1.78	2.03	3.01	0.25	40	5.09	7.28	0.25
41	2.00	2.22	3.26	0.28	41	5.61	7.82	0.28
42	2.24	2.42	3.53	0.31	42	6.15	8.40	0.31
43	2.50	2.64	3.82	0.34	43	6.75	9.01	0.34
44	2.78	2.88	4.14	0.39	44	7.42	9.68	0.39
45	3.09	3.17	4.52	0.45	45	8.18	10.40	0.45
46	3.41	3.49	4.94	0.52				
47	3.74	3.83	5.40	0.60				
48	4.10	4.21	5.90	0.70				
49	4.50	4.63	6.45	0.81				
50	4.96	5.11	7.07	0.95				

To calculate the modal premium, multiply the number of units (benefit amount divided by \$1,000) by the unit rate listed above, add the policy fee of \$70, multiply by the mode factor (semi-annual, 0.510; quarterly, 0.264; monthly, 0.087) and round to the nearest \$.01.

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