

THE DIFFERENCE IS IN KNOWING THE DETAILS

A FIELD GUIDE TO UNDERWRITING FOR
*TRANSAMERICA LIFETIME*SM WHOLE LIFE INSURANCE



TRANSAMERICA®

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EXPRESS PROTECT UNDERWRITING

Our new streamlined underwriting process is designed for faster issuing, more consistent application decisions, and seamless functionality. It's called *Express Protect Underwriting*®, and leverages automation to help reduce overall cycle times for you and your clients.

NEW ACCELERATED UNDERWRITING

No one likes surprises when they're writing business. In an ever-changing landscape, our agents need tools that can quickly and efficiently help clients obtain the protection they need.

To help improve the customer and agent experience, we're introducing a new application to help collect more information on your client upfront, reducing the need to request traditional underwriting requirements while significantly increasing applications submitted in good order.

iGO® e-APP (RECOMMENDED)

Our electronic application, the iGO e-App, will provide you with guidance and prompts to assist your clients' application process and will help ensure good order before submission to the home office. Additionally, if your customer requires the completion of a teleinterview, there will be a clear prompt indicating this direction.

Some applications will go straight through, and an *Express Protect Underwriting* decision will be made at point of sale.

PAPER APPLICATION

On paper applications, only Part 1 will be available for completion. All paper applications will require the applicant to complete a teleinterview which will be prompted once the paper application is received and is in good order.

The paper process may take longer as all elements not in good order will need to be resolved before we are able to prompt the teleinterview process.

Nonmedical limits have been expanded.

FLUIDLESS ACCELERATION

Some clients may qualify for fluidless acceleration and accelerated underwriting decision without the need for traditional fluids (blood and urine). Please see the age/face amount parameters to see if your client is a candidate.



AGE AND AMOUNT REQUIREMENTS

TRANSAMERICA LIFETIMESM

■ May be eligible for fluidless acceleration

■ Traditional requirements

| INITIAL AGE AMOUNT REQUIREMENTS ^{5,6,7} | ISSUE AGE | | | | |
|--|--|--|--|--|--|
| | 15 days-17 years ^{4,7} | 18-45 | 46-55 | 56-65 | 66-80 |
| \$25,000-\$499,999 | Medical History Questions Part II ^{1,2} | Medical History Questions Part II ^{1,2} | Medical History Questions Part II ^{1,2} | Medical History Questions Part II ^{1,2} | Teleinterview Part II ³ BCP HOS Vitals |
| \$500,000-\$999,999 | Medical History Questions Part II ^{1,2} | Medical History Questions Part II ^{1,2} | Medical History Questions Part II ^{1,2} | Teleinterview Part II ³ BCP HOS Vitals | Teleinterview Part II ³ BCP HOS Vitals |
| \$1,000,000-\$1,999,999 | N/A | Medical History Questions Part II ^{1,2} | Teleinterview Part II ³ BCP HOS Vitals | Teleinterview Part II ³ BCP HOS Vitals | Teleinterview Part II ³ BCP HOS Vitals |
| \$2,000,000 | N/A | Teleinterview Part II ³ BCP HOS Vitals | Teleinterview Part II ³ BCP HOS Vitals | Teleinterview Part II ³ BCP HOS Vitals | Teleinterview Part II ³ BCP HOS Vitals |

| OTHER UNDERWRITING REQUIREMENTS | ISSUE AGE |
|---------------------------------|-------------------------|
| | 70-80 |
| \$100,000-\$250,000 | MCAS |
| \$250,001-\$500,000 | MCAS |
| \$500,001-\$1,000,000 | MCAS |
| \$1,000,001-\$2,000,000 | App supp financial MCAS |

Transamerica performs post-issue audits on cases put in force to validate our underwriting assessments and models. If we develop information that was not disclosed at the time of the application, we reserve the right to rescind the policy.

See page 11 for underwriting requirements definitions.

¹ May be eligible for fluidless acceleration. Agent to complete with the consumer. Paper applications will require a teleinterview.

² Applicants receiving a fluidless acceleration decision will not be reconsidered for a better rate classification.

³ Vendor conducts Teleinterview Part II with consumer over the phone.

⁴ Juveniles (0-17) are not eligible for International Underwriting.

⁵ International Underwriting not eligible for straight through and fluidless processing. Use FFIUL age/amounts grid.

⁶ Some medical impairments and/or nicotine use will require additional requirements.

⁷ MVR ordered at ages 16 & up.

If Chronic and Critical Illness living benefit riders are selected, the case is not eligible for an immediate, point of sale decision. However, the case could still qualify for fluidless acceleration.

Transamerica reserves the right to request other evidence of insurability as it deems necessary.

For requirements, please see Determining Coverage Amounts — Juveniles on page 16 of this guide.

Requests to reduce face amount received during underwriting will not alter the medical requirements

Rx and Medical Data checks will be ordered on all applications.

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UNDERWRITING TIPS

INSURABLE INTEREST

Insurable interest must exist between the proposed insured(s), policy owner(s), payer(s), and beneficiary.* Underwriting reserves the right to make the final determination on the issuance of any policy(ies).

NONMEDICAL DOES NOT MEAN GUARANTEED ISSUE

Nonmedical means that initial underwriting requirements do not include traditional underwriting requirements such as paramedical exam with labs, although vitals/physical findings and/or labs may be required upon case review at underwriter discretion. All nonmedical applications are subject to a Medical Information Bureau (MIB) report, motor vehicle report, prescription check, medical data check personal history, and medical history (Application Part 2). The best rate class available for nonmedical cases is preferred elite, preferred plus, or preferred rates. For amounts under 100K, standard is the best rate class available. Guaranteed issue, as the name implies, guarantees certain life insurance policies will be issued, regardless of health. Since the insured cannot be declined or turned down, carriers generally offer low death benefit options with higher-than-normal premiums. We do not currently offer any guaranteed issue policies.

AN APPLICATION IS VALID FOR 180 DAYS

Cases will close after 45 days if there are outstanding requirements and no activity on the file. An agent may request an extension of the closure date.

IF THE PROPOSED INSURED IS A JUVENILE, A PARENT/LEGAL GUARDIAN SIGNATURE IS REQUIRED

If the grandparent is the owner of the policy, the parents will still be required to sign the application. If the legal guardian is not a parent, proof of guardianship will be requested. Please note that state statutes take precedence regarding requirements.

A LEGIBLE CASE ID NUMBER MUST BE PRINTED ON ALL CORRESPONDENCE FOR PROPER PROCESSING

APPLICATION AND ALL FORMS (MEDICAL QUESTIONS/TELEINTERVIEW AS WELL) NEED TO BE FILLED OUT COMPLETELY AND ACCURATELY

For the best agent and customer experience, the electronic application through iGO® e-App should be used rather than a paper application.

ALWAYS PROVIDE THE BEST TIMES, TELEPHONE NUMBERS, AND ANY SPECIAL LANGUAGE NEEDS FOR YOUR CLIENT

Providing accurate contact information will assist in timely ordering and collection of underwriting information.

ANY OMISSIONS OR MISSTATEMENTS IN AN APPLICATION COULD CAUSE AN OTHERWISE VALID CLAIM TO BE DENIED UNDER ANY INSURANCE ISSUED FROM THE APPLICATION

* Insurable interest of beneficiary is subject to state statutes.

UNDERWRITING TIPS

LIVING BENEFIT COVERAGE*

Certain medical conditions will impact an individual's eligibility for living benefits coverage, and Transamerica reserves the right to decline living benefit riders or products based on an individual's medical history.

The following are some conditions that may not be eligible for chronic illness and/or critical illness living benefit coverage (this list is not all-inclusive):

- Drug and alcohol abuse
- Cancer (other than nonmelanoma skin cancer)
- Coronary artery disease
- Diabetes with insulin use
- Inability to perform activities of daily living (ADLs)
- Motor neuron disease
- Multiple sclerosis
- Muscular dystrophy
- Parkinson's disease
- Pregnancy – current through three months postpartum
- Stroke or TIA
- Systemic lupus erythematosus

* Underwriting reserves the right to rate the base policy, deny or limit benefits, or offer a different product based on medical information obtained during the underwriting process.

HOW DO I APPROACH DELICATE SUBJECTS?

To help clients obtain the coverage they need, you need to be sure to ask all the necessary questions — even the uncomfortable ones. Remember, incomplete responses will delay the review process, the client's coverage, and your commission payment. Below are some suggestions to help you address these sensitive subjects.

EXPLAIN THAT CORRECT WEIGHT AND OTHER SENSITIVE DETAILS ARE REQUIRED

Before you submit a client as preferred, be sure he or she meets the criteria. Refer to the underwriting criteria and medical impairments information in the following pages of this guide to determine if the applicant is eligible for coverage and at what underwriting class. It may help the client understand how important it is to provide correct details.

ASSURE THE CLIENT THAT ALL INFORMATION ON THE APPLICATION IS CONFIDENTIAL

If the applicant has ever been arrested or has sensitive medical history, he or she may not want to disclose it. Assure all clients in advance that the application is confidential and none of their personal information is at risk.

Where possible, select a condition from the list and/or drop down menu. If you must select "Any Other Disease or Disorder," try to find the condition in the box that will appear and select it, SPELLING IS IMPORTANT. If you cannot find a match, it is OK to type the condition and hit confirm. At this time, a box entitled "Description" will appear.

DOCUMENT THE DETAILS:

Bad example: Misdemeanor

Good example: Public intoxication August 2018, fined \$250 with one night in jail, probation ended August 2020; Trespassing October 2015, fined \$100 with one night in jail, probation ended March 2016.

ASK THE FOLLOWING IMPORTANT QUESTIONS ABOUT MEDICAL AND CRIMINAL ACTIVITIES

To gain a complete picture of an applicant's medical, criminal, or moving violation history, ask the following questions when completing the description box:

1. When was the condition diagnosed or date of criminal activity or moving violation (provide as correct date, month, and year as possible)?
2. What was the cause?
3. How and when was it treated?
4. When were the last symptoms?
5. If currently symptomatic, what are your limitations?
6. What was the charge and sentence?
7. Are you currently on parole or probation?

DOCUMENT THE DETAILS:

Bad example: Heart surgery

Good example: Bypass surgery, 01/31/2011. Last seen six months ago for routine checkup with normal findings. Currently on atorvastatin medication.

FIELD UNDERWRITING

WHAT IS FIELD UNDERWRITING?

In order to provide the most accurate picture of the applicant to the insurer, it is important for an agent to get to know his or her clients in the process of soliciting business. This process, known as field underwriting, is the initial medical and financial screening of prospective buyers of life insurance and is a key responsibility of our agents.

For an agent, good field underwriting builds credibility with your client and boosts your reputation in the community as a knowledgeable life insurance advisor. Often additional requirements are needed due to inconsistent information provided; therefore, the more complete and accurate the information is on the application, the less likely additional requirements, such as an Attending Physician Statement (APS), will be needed. More importantly, it can lead to a better customer experience by setting realistic expectations for a potential rate class, which will be beneficial to everyone involved. When meeting with your client, please be sure to keep in mind the following questions:

- What is their occupation, annual income, and net worth?
- Have they ever been rated or denied for life, long term care, or other insurance in the past and why?
- Do they already own a life insurance policy?
 - If so, what is the face amount and company that issued it? Is it being replaced?
- What is the purpose of the life insurance being applied for?
- Do they have any medical issues?
- Do they travel outside the U.S. or are they a foreign national?
- Do they participate in aviation, scuba, climbing, racing, or other similar activities?
- Any driving violations?

WHY SHOULD I PERFORM FIELD UNDERWRITING?

- Expedite the underwriting process
- Meet client expectations
- May reduce the need for additional underwriting requirements
- Ensure conditional receipt is binding



HERE'S A LITTLE MORE DETAIL ON THE PROCESS

- The applicant completes an application, signs electronically, and the agent signs.
- Transamerica assesses eligibility
 1. If the decision is referred to an underwriter, the message will say:

Great! Your policy number is LFTxxxxxx. Your application is ready to be submitted. Please press the "Submit to Transamerica" button!

2. If the decision is approved as applied, the message will say:*

Congratulations! Your policy number is LFTxxxxxx. Your application is ready to be approved pending application submission and administrative office review. Please press the "Submit to Transamerica" button!

3. If the decision is approved but with a different risk class, the message will say:*

Congratulations! Your policy number is LFTxxxxxx. Your application is ready to be approved with a risk class of Preferred Plus pending application submission and administrative office review. Please press the "Submit to Transamerica" button!



eDelivery is not available.

* Upon receipt of this message the home office reserves the right to further review client eligibility.

Not all applicants will be eligible for Express Protect decisions. Additional Underwriting/requirements may be required. Applicant must be made aware that it is possible to receive a lower premium, higher premium, or decline through a full medical underwriting process.

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UNDERWRITING REQUIREMENTS AND REPORTS DEFINED

All requirements will be ordered through Transamerica and will be administered through Transamerica-approved vendors.

As we move to a new world of an enhanced consumer experience, there will be times when not all the traditional evidence will be necessary in order to determine your customer's insurability. As a result, Transamerica will order all necessary underwriting evidence for your customer, reducing the burden on your time and efforts, as well as insuring we only get the necessary information to understand your customer's risk profile. This change in process will allow us to help expedite the ordering of the most relevant information the first time and will help drive down the time it takes to make a decision.

Transamerica reserves the right to request other evidence of insurability as it deems necessary.

PARAMED PHYSICAL FINDINGS (VITALS)

Paramed physical findings is completed by an approved third-party vendor. It includes a qualified examiner completing proper paperwork/forms, taking vitals (height/weight, blood pressure, pulse), collecting fluids (blood and urine), and administering ECGs.

TELEINTERVIEW

A teleinterview is a guided interview completed over the phone, conducted by an examiner through a third-party vendor. Several base questions will be asked, and related reflexive questions based on your individual client's medical history.

HOME OFFICE SPECIMEN

A home office specimen (HOS) is a urine sample collected during the paramed physical findings visit and is sent to a laboratory for analysis.

BLOOD CHEMISTRY PROFILE

A blood chemistry profile (BCP) is a venous blood draw collected during the paramed physical findings visit and is sent to a laboratory for analysis.

AccessMyLab is a web portal that allows clients to access the results of their blood, urine, and paramed physical findings tests, taken in connection with their life insurance application. When the client completes their labs or paramed physical findings test, they have the ability to opt in to receiving text message notifications. Once their results are ready to be accessed (up to seven days after completion for labs), the client will receive a text message with a link to the AccessMyLab web portal. From there, the client can register to obtain their results using their phone number and date of birth.

transamerica.accessmylab.com

AccessMyLab does not have the ability to call international phone numbers.

Lab report is available for 12 months from the date the sample was received at the laboratory.

RESTING ELECTROCARDIOGRAM

During an electrocardiogram (ECG), small patches are placed on the chest, arms, and legs to record the electrical activity and rhythm of the heart. If normal resting ECG records are available from a test conducted within the last 12 months, test need not be repeated.

All requirements will be administered by Transamerica through Transamerica-approved vendors.

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UNDERWRITING REQUIREMENTS AND REPORTS DEFINED CONTINUED

MINNESOTA COGNITIVE ACUITY SCREEN

The Minnesota Cognitive Acuity Screen (MCAS) is a telephone interview conducted by a registered nurse (RN), who is specifically trained to administer the test. The purpose for this test is to screen for potential early cognitive impairment. Proposed insureds age 70 and older applying for \$100,000 or more in coverage, will be required to complete an MCAS.

It is important your client realize the significance of the interview and concentrate to do as well as they can. Your client should be in an environment that is free of distractions. If they wear a hearing aid, they should have it on during the interview. The telephone interview usually takes between 15-20 minutes.

Family, friends, or agent can be present, but they must be in a separate room during the cognitive interview, not interacting at all with the proposed insured in any way during the course of the interview.

INSPECTION REPORTS (IR, BBIR, EIR)

Provides a holistic view of the proposed insured's public record footprint, including such information as financials, criminal records history, properties owned, and bankruptcies. Inspection reports may be completed as a telephone interview or by online database searches, depending on the amount being applied for.

PERSONAL FINANCIAL STATEMENTS

A Financial Supplement to Application for Life Insurance (also known as a Confidential Financial Questionnaire) will be requested if: the income and net worth of proposed insured is not provided on the application; the company finds the financial information unclear, inconsistent, or additional details are needed; and/or the insurance is being used for business coverage, including Buy-Sell, Loan, and Key Person applications.

FORM 4506T-EZ

Form 4506T-EZ, is an Internal Revenue Service (IRS) form which gives permission for Transamerica to receive a transcript of previously filed tax returns directly from the IRS. This pre-filled form is obtained through your agent portal or through iPipeline® to expedite processing.

MOTOR VEHICLE REPORTS

A motor vehicle report (MVR) is a record of a proposed insured's driving history.

UNDERWRITING REQUIREMENTS AND REPORTS DEFINED CONTINUED

PRESCRIPTION AND MEDICAL DATA CHECK

A prescription and medical data check will be ordered on every application and includes details on prescriptions filled, medical diagnoses, hospital and physician procedures, inpatient and clinic administered medications, and medical equipment information — as well as prescribing physician's information. Your client can request a copy of their report at rxhistories.com.

IDENTITY VERIFICATION

A check to verify the identities of our customers in order to ensure the quality of business, manage identity risk, prevent identity fraud, and comply with obligations under the USA Patriot Act. This check is primarily used for identity verification. In some instances we may request a copy of the individual's Social Security card, driver's license or other state-issued ID, or utility bill to help verify an individual's identity.

ATTENDING PHYSICIAN STATEMENTS

An attending physician statement (APS) is a copy of the proposed insured's medical records obtained from their attending physician or healthcare provider.

APS GUIDELINES ARE AS FOLLOWS:

| FACE AMOUNTS | | | |
|--------------------|--------------------------------|--------------------------------|--------------------------------|
| Age | Up to and including \$500,000 | \$500,001 to \$1 million | \$1,000,001 to \$2 million |
| 15 days–17 years | NOT ROUTINELY (for cause only) | YES | YES |
| 18–55 years | NOT ROUTINELY (for cause only) | NOT ROUTINELY (for cause only) | NOT ROUTINELY (for cause only) |
| 56–70 years | NOT ROUTINELY (for cause only) | NOT ROUTINELY (for cause only) | NOT ROUTINELY (for cause only) |
| 71 years and older | YES | YES | YES |

TRANSAMERICA ORDERS ALL REQUIREMENTS

Please refer to age/amount chart. Be aware that an agent may be charged if they order requirements, as Transamerica handles ordering of age and amount requirements.

UNDERWRITING REQUIREMENTS AND REPORTS DEFINED CONTINUED

TRANSAMERICA'S REQUIREMENT VENDORS

Transamerica will order all requirements from one of the following vendors. Any underwriting evidence obtained for insurance with another carrier will not be accepted.

| VENDOR NAME | USED FOR |
|-------------|---|
| APPS | Teleinterview, paramed physical findings, blood/urine, ECG |
| CRL | Labs |
| ExamOne | APS (attending physician statement) |
| LTCG | Inspection Reports and MCAS (Minnesota Cognitive Acuity Screen) |

| REQUIREMENTS | THROUGH AGE 70 | AGE 71 AND OLDER |
|--|-------------------|--------------------|
| Paramed-Physical Findings | Valid for 1 year | Valid for 6 months |
| Teleinterview | Valid for 90 days | Valid for 90 days |
| Resting Electrocardiogram (ECG)* | Valid for 1 year | Valid for 1 year |
| Inspection Report (IR) | Valid for 1 year | Valid for 1 year |
| Financial Supplement to Application for Life Insurance | Valid for 1 year | Valid for 1 year |
| Home Office Urine Specimen (HOS) | Valid for 1 year | Valid for 6 months |
| Blood Chemistry Profile (BCP) | Valid for 1 year | Valid for 6 months |
| Minnesota Cognitive Acuity Screen (CS) | N/A | Valid for 6 months |

* ECG: If normal resting ECG records are available from a test conducted within the last 12 months, the test need not be repeated.

Transamerica reserves the right to request other evidence of insurability as it deems necessary.

DETERMINING COVERAGE AMOUNTS FOR INDIVIDUALS

While each of your clients have different financial needs, these guidelines are intended to provide a general formula to help calculate suggested maximum amounts of life insurance.

- What does the client do for a living?
- What is their annual income and net worth?
- Do they already own a life insurance policy?
 - If so, what is the face amount and company that issued it? Is it being replaced?
- What is the purpose of the life insurance being applied for?
- Do they have any medical issues that may result in a higher premium?

| PURPOSE | FORMULA | | REQUIREMENTS |
|-----------------------------------|------------------------------|--|--|
| Income Continuation | Ages | Income Factor | <ul style="list-style-type: none"> • Income stated must be reasonable for the profession or occupation stated. • Income source considered will be that of the proposed insured, not the household income or that of the owner. • Earned income includes salary, bonuses, commissions, and deferred compensation and excludes income from investments. |
| | 18-35 36-70 71+ | 40 75 minus current age individual consideration | |
| Non-income earning spouse/partner | Up to \$500,000 | | <ul style="list-style-type: none"> • Review of household income • Review of total line of insurance in force |
| | \$500,001-\$5,000,000 | | All requirements as indicated above for face amounts through \$500,000, plus: <ul style="list-style-type: none"> • Spouse/partner total line of personal coverage in force • Up to equal coverage of income-earning spouse/partner. • Household net worth • Individual consideration for amounts over \$5,000,000 |
| College Student | Up to \$2,000,000 total line | | <ul style="list-style-type: none"> • Annual earned income • Greater of income multiplier or \$2,000,000 |

PREMIUM TO INCOME GUIDELINES

| PURPOSE | FORMULA | | REQUIREMENTS |
|--------------------------|--|-------------------|---|
| Affordability Guidelines | Annual Premium for all policies/Annual Income % should not exceed the percentages below. | | <ul style="list-style-type: none"> There should not be a significant adverse change in financial status or financial flexibility as a result of the purchase of the policy(ies). For incomes less than \$15,000 (USD), details supporting the need and purpose of the insurance may be necessary. Adjustments (upwards) for family size (when known) should be considered to align with U.S. Federal Poverty Guidelines published by the U.S. Department of Health & Human Services. Premium affordability should be demonstrated for the total premiums being paid on all policies, by the payer(s). This includes all policies on the payer(s) life and all policies on the lives of others for which they are paying. |
| | Annual Income | Premium to Income | |
| | ≤ \$30,000 | 15% | |
| | > or = \$30,001 | 20% | |

DETERMINING COVERAGE AMOUNTS FOR JUVENILES

| PURPOSE | FORMULA | | REQUIREMENTS ¹ |
|--|--------------------------|--|--|
| Juvenile | Ages | Face Amount | |
| Total juvenile insurance coverage with all carriers cannot exceed \$2,000,000. | 15 days through 17 years | \$25,000-\$250,000 | <ul style="list-style-type: none"> Parents or guardians must witness the applications and complete the nonmedical declarations. The owner of the policy must be the parent, legal guardian, or grandparent. For legal guardianship where the guardian is not the parent, we require a copy of guardianship papers. The owner and the juvenile must be residing in the U.S. permanently either as a U.S. citizen or a visa type that is not considered temporary or uninsurable based on our international underwriting guidelines. Coverage on all siblings should be similar. |
| | | \$250,001-\$500,000 | All requirements indicated above for face amounts through \$250,000, plus:² <ul style="list-style-type: none"> Equal coverage for parent(s) or legal guardian² |
| | | \$500,001-\$1,000,000 | All requirements indicated above for face amounts through \$500,000, plus: <ul style="list-style-type: none"> Medical records obtained on amounts over \$500,000 Minimum household income must be ≥ \$100,000 |
| | | \$1,000,001-\$2,000,000 | All requirements as indicated above for face amounts through \$1,000,000, plus: <ul style="list-style-type: none"> Parent or legal guardian should have minimum two times the amount of insurance in force being requested on the juvenile. |
| Washington State | 15 days through 17 years | Total line of coverage cannot exceed their U.S. household income. | All requirements as indicated above for the appropriate face amount, plus: <ul style="list-style-type: none"> Juveniles 15 years or older must sign the application. |
| New York State | Under 4½ years | Maximum face amount is greater of \$50,000 or 25% of the amount of insurance in force on the parent/owner. | All requirements as indicated above for the appropriate face amount, plus: <ul style="list-style-type: none"> The parent designated as the owner must have adequate coverage as described. Not all children from the same family will be eligible for the same face amount if they fall within the two different age brackets. Neither accidental death and dismemberment insurance nor credit card insurance should be counted in determining whether the family head has sufficient coverage to qualify the minor for the amount of insurance requested. |
| | 4½ years to 14½ | Maximum face amount is the greater of \$50,000 or 50% of the amount in force on the parent/owner. | |

State specific laws, including NY and WA, take precedence over company guidelines.

¹ All siblings should have similar coverage.

² Group coverage, accidental death, dismemberment insurance, and credit card insurance should not be counted in determining the parent/owner's total coverage.

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DETERMINING COVERAGE AMOUNTS FOR BUSINESS PLANNING

| PURPOSE | FORMULA | | REQUIREMENTS |
|--------------------------------|---|--------------------------|---|
| Estate Planning | Projected future estate tax liability | | <ul style="list-style-type: none"> The purpose of the insurance A current value of the applicant's estate, which includes a personal balance sheet listing all assets and liabilities and an estate analysis Third-party financial verification if total combined face amount in force, and pending, is greater than \$10 million or total line over jumbo limits The estate projection rate and/or number of projected years may be adjusted, up or down, taking into consideration what is reasonable in the current environment |
| | Ages | Maximum Projection Years | |
| | 18-50 | 25 | |
| | 51-60 | 20 | |
| | 61-70 | 15 | |
| | 71-75 | 10 | |
| | 76+ | 5 | |
| Key Person | Ages | Factor x Income | <ul style="list-style-type: none"> The key person's value to the company How the coverage amount was determined Whether the key person has ownership in the company and the percentage of ownership A list of all other key persons, the amount of key person coverage, and percentage ownership for each key person |
| | Under 65 65+ | Up to 10 Up to 5 | |
| Buy-Sell/Business Continuation | % Ownership x Corporate Value | | <ul style="list-style-type: none"> The fair market value of the business and how the amount of insurance was determined A copy of the buy-sell agreement or the details of the buy-sell agreement The proposed insured's ownership percentage, the number of other partners, and their ownership percentage The amount of buy-sell coverage on each partner and the amount and purpose of all in force business coverage <p>All partners must apply for or have in force buy-sell coverage. Corporate balance sheets, income statements and/or business valuation may be requested at Underwriter discretion.</p> |
| Business Loan | An amount up to the outstanding principal of the loan | | <ul style="list-style-type: none"> The business must be the owner of the policy Include the purpose, duration of the loan, collateral pledged, its value and the loan interest rate The term of the loan must be five years or more If creditor is designated beneficiary, it should be stated "as its interest may appear" with balance of proceeds to go to another designated personal beneficiary. A collateral assignment would also be acceptable. |

BLEND ED BODY MASS INDEX (BMI) CHART

ADULT — AGES 16+

| BMI RANGE | AGES 16–59 |
|-----------------|----------------------------------|
| </= 16 | Decline |
| 16.0001–17.0000 | Nontobacco & Tobacco |
| 17.0001–28.0000 | Preferred Elite |
| 28.0001–30.0000 | Preferred Plus/Preferred Tobacco |
| 30.0001–32.0000 | Preferred |
| 32.0001–35.0000 | Nontobacco & Tobacco |
| 35.0001–37.0000 | Table A |
| 37.0001–39.0000 | Table B |
| 39.0001–41.0000 | Table C |
| 41.0001–42.0000 | Table D |
| 42.0001–43.0000 | Table E |
| 43.0001–44.0000 | Table F |
| 44.0001–46.0000 | Table H |
| >46 | Decline |

| BMI RANGE | AGES 60+ |
|-----------------|----------------------------------|
| </= 16 | Decline |
| 16.0001–18.0000 | Individual Consideration |
| 18.0001–28.0000 | Preferred Elite |
| 28.0001–30.0000 | Preferred Plus/Preferred Tobacco |
| 30.0001–32.0000 | Preferred |
| 32.0001–35.0000 | Nontobacco & Tobacco |
| 35.0001–37.0000 | Table A |
| 37.0001–39.0000 | Table B |
| 39.0001–41.0000 | Table C |
| 41.0001–42.0000 | Table D |
| 42.0001–43.0000 | Table E |
| 43.0001–44.0000 | Table F |
| 44.0001–46.0000 | Table H |
| >46 | Decline |

In order to calculate Adult BMI, please [click here](#).

JUVENILE — AGES 2 THROUGH 15*

| AGE | JUVENILE STANDARD |
|-----|-------------------|
| 2 | 13.9–30.0 |
| 3 | 13.9–29.0 |
| 4 | 12.9–29.0 |
| 5 | 12.9–29.0 |
| 6 | 12.9–29.0 |
| 7 | 12.9–30.0 |
| 8 | 12.9–31.0 |
| 9 | 12.9–32.0 |
| 10 | 12.9–33.0 |
| 11 | 13.9–34.0 |
| 12 | 13.9–35.0 |
| 13 | 14.9–36.0 |
| 14 | 14.9–37.0 |
| 15 | 15.9–38.0 |

In order to calculate Juvenile BMI, please [click here](#).

* Ages under two years old generally OK unless premature. Ages over 15 — see adult body mass index charts.

LIFESTYLE AND HEALTH HISTORY

IMPACT ON RISK CLASS

| TRANSAMERICA LIFETIME SM | PREFERRED ELITE | PREFERRED PLUS | PREFERRED | NONTABACCO | PREFERRED TOBACCO | TOBACCO |
|--|---|---|---|---|---|---|
| Tobacco Usage | None in 5 yrs | None in 2 yrs | None in 2 yrs | None in 2 yrs | Tobacco permitted | Tobacco permitted |
| Cholesterol with or without treatment* | 230 | 260 | 300 | ** | 260 | ** |
| Chol /HDL Ratio* | 5.0 for ages <=70 5.5 for ages 71+ | 5.5 for ages <=70 6.0 for ages 71+ | 6.2 for ages <=70 6.7 for ages 71+ | 7.0 for ages <=70 7.5 for ages 71+ | 5.5 for ages <=70 6.0 for ages 71+ | ** |
| Blood pressure with or without treatment* | 135/85 for ages <=70 145/85 for ages 71+ Treatment only allowed ages 50-80 | 145/85 for ages <=70 150/90 for ages 71+ With or without treatment | 148/88 for ages <=70 152/88 for ages 71+ With or without treatment | ** | 145/85 for ages <=70 150/90 for ages 71+ With or without treatment | ** |
| Family history¹ - Includes cardiovascular disease or the following cancers: breast, ovarian, melanoma, prostate, and colon - Some cancers may require evidence of routine surveillance screening | No Death in Parent or Sibling prior to age 60 | No Death in Parent or Sibling prior to age 60 | No more than one Parent or Sibling death prior to age 60 | N/A | No Death in Parent or Sibling prior to age 60 | N/A |
| Personal history | No personal history of heart or vascular disease, diabetes, cancer (except some skin cancers) | No personal history of heart or vascular disease, diabetes, cancer (except some skin cancers) | No personal history of heart or vascular disease, diabetes, cancer (except some skin cancers) | ** | No personal history of heart or vascular disease, diabetes, cancer (except some skin cancers) | ** |
| DUI | None in last 5 yrs | None in last 5 yrs | None in last 5 yrs | ** | None in last 5 yrs | ** |
| MVR - major violations | None in last 12 months, no more than 1 in last three yrs | No more than 1 in last three yrs | No more than 1 in last three yrs | ** | No more than 1 in last three yrs | ** |
| MVR - minor violations | No more than 3 violations in last 3 yrs | No more than 3 violations in last 3 yrs | No more than 3 violations in last 3 yrs | ** | No more than 3 violations in last 3 yrs | ** |
| Private aviation | No aviation | With or without rateable aviation | With or without rateable aviation | With or without rateable aviation | With or without rateable aviation | With or without rateable aviation |
| Avocation | No participation in listed activities ² | No participation in listed activities ² | No participation in listed activities ² | Can be offered with or without rateable avocation | No participation in listed activities ² | Can be offered with or without rateable avocation |
| Alcohol/substance abuse | Never | Never | 10 yrs | 7 yrs | 10 yrs | 7 yrs |

* Fast data sources may impact qualification.

** Individual consideration and may include a rating

¹ Some gender-specific cancers may qualify for preferred rates.

² Avocation: Prohibited activities include aeronautics (e.g., hang gliding, ultralight, soaring, skydiving, ballooning, etc.), power racing competitive vehicles, mountain climbing, rodeos, competitive skiing, or scuba/skin diving at a depth greater than 75 feet.

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LIFESTYLE AND HEALTH HISTORY

IMPACT ON RISK CLASS

| TRANSAMERICA LIFETIME SM | PREFERRED ELITE | PREFERRED PLUS | PREFERRED | NONTOBACCO | PREFERRED TOBACCO | TOBACCO |
|-------------------------------------|---|---|---|---|---|---|
| Travel | No dangerous travel ¹ | No dangerous travel ¹ | No dangerous travel ¹ | No dangerous travel ¹ | No dangerous travel ¹ | No dangerous travel ¹ |
| Citizenship/Residency | U.S. citizens/ green card holders - all others contact UW | U.S. citizens/ green card holders - all others contact UW | U.S. citizens/ green card holders - all others contact UW | U.S. citizens/ green card holders - all others contact UW | U.S. citizens/ green card holders - all others contact UW | U.S. citizens/ green card holders - all others contact UW |
| Military | Active military duty is acceptable provided insured is not serving in a hazardous area or does not have orders to serve in a hazardous area ² | Active military duty is acceptable provided insured is not serving in a hazardous area or does not have orders to serve in a hazardous area ² | Active military duty is acceptable provided insured is not serving in a hazardous area or does not have orders to serve in a hazardous area ² | Active military duty is acceptable provided insured is not serving in a hazardous area or does not have orders to serve in a hazardous area ² | Active military duty is acceptable provided insured is not serving in a hazardous area or does not have orders to serve in a hazardous area ² | Active military duty is acceptable provided insured is not serving in a hazardous area or does not have orders to serve in a hazardous area ² |



¹ Foreign travel: unless otherwise prohibited by statute

² Military: unless otherwise prohibited by statute

MEDICAL IMPAIRMENTS

Rate classes shown are not guaranteed but a range of potential offers of which a declination is possible. Actual offers are subject to underwriting and may vary based on age, date of diagnosis, and severity of condition.

IMPACT ON RISK CLASS | T=Table

| IMPAIRMENT | POTENTIAL MORTALITY ASSESSMENT* | PREFERRED POSSIBLE |
|----------------------------|---|--|
| ADD/ADHD | < age 18 | N |
| | Ages 18 and over | Y |
| AIDS/HIV | Decline | N |
| Alcohol abuse | T2 - decline | N |
| Alcoholism | <3 years - decline | N |
| | 3-5 years - T2 to T6 | N |
| | >5 years - standard to T4 | Yes, with greater than 10 years of sobriety |
| Allergies, hay fever | Standard | Y |
| ALS (Lou Gehrig's disease) | Decline | N |
| Alzheimer's disease | Decline | N |
| Amputations | Limited, traumatic injury - standard, otherwise, see specific cause/disease | Possible in cases of limited, traumatic injury resulting in amputation |
| Anemia, iron deficiency | Fully investigated with no underlying cause identified Mild - standard | N |
| | Moderate - T2 to T5 | N |
| | Severe - decline | N |
| Aneurysm, abdominal | Age <60 - decline | N |
| | No surgery or periodic surveillance - decline | |
| | No surgery, size >5 cm - decline | |
| | No surgery, size <5 cm stable with periodic surveillance - standard to T5 | |
| | Treated with surgery: | |
| | <6 months since surgery - decline | |
| | >6 months since surgery stable with periodic surveillance - T2 to T4 | |
| Aneurysm, cerebral | No surgery, single small aneurysm, nonsmoker, no high blood pressure, stable >5 years - standard | N |
| | <6 months since surgery - decline | |
| | >6 months since surgery, fully recovered - T2 to T6 | |
| | If multiple cerebral aneurysms or significant residuals, possible decline | |
| Angina | See coronary artery disease | |
| Anxiety | Mild - stable, no time lost from work, low dose single medication, no anti-psychotic meds, no alcohol abuse or adverse driving - standard | Y |
| | Moderate - satisfactory response to treatment, outpatient therapy, no more than 1-2 weeks off work - T2 to T4 | N |
| | Severe or disable, suicide attempts, inpatient hospitalization - decline | N |

* Potential morbidity assessments may differ.

MEDICAL IMPAIRMENTS

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IMPACT ON RISK CLASS | T=Table

| IMPAIRMENT | POTENTIAL MORTALITY ASSESSMENT* | PREFERRED POSSIBLE |
|--|---|--|
| Arthritis, osteo | Mild - standard | Y |
| | Moderate - T2 | N |
| | Severe/advanced - T3 to T4 | |
| Arthritis, rheumatoid | Mild (minimal disease activity with no more than mild disability) - standard to T2 | N |
| | Moderate (chronic joint inflammation, evidence of anemia) - T3 to T4 | |
| | Severe (active disease with significant disability) - T5 to T6 | |
| Asthma | Nonsmoker: | |
| | Mild - standard to T2 | Y |
| | Moderate - T3 to T8 | N |
| | Severe - decline | N |
| | Smoker: | |
| | Mild - T2 to T4 | N |
| | Moderate - T8 | N |
| | Severe - decline | N |
| | Children age 5 and under usually decline Children age 6 and up: Mild, diagnosed >1 year - standard to T2, otherwise decline | N |
| Atrial fibrillation | Nonchronic, no underlying heart disease, short durations, <4 episodes per year - standard to T2 | N |
| | Chronic with no underlying heart disease - T2 to T4 | |
| Autism, juvenile | < age 8 | Decline |
| | Age 8 and over | Individual Consideration |
| Aviation, paid | Commercial pilot, passenger, or freight flying within the U.S. or Canada - standard | Y |
| | Corporate pilot - standard | Y |
| | Other, \$2.50 to \$10 flat extra (rating determined by occupation) | N |
| Aviation, private | Student pilot or <75 solo hours - \$3 flat extra | See preferred guidelines |
| | Qualified pilot - standard to \$3 flat extra (rating determined by client age, number of hours flown per year, and total flying experience) | Y |
| Back pain (See also chronic pain) | Mild to moderate - standard | Y |
| | Severe - possible T2 to T4 | N |
| Barrett's esophagus | Standard to decline | N |
| Bell's palsy | Standard | Y - If > 3 months since diagnosis, fully recovered with no complications |

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MEDICAL IMPAIRMENTS

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IMPACT ON RISK CLASS | T=Table

| IMPAIRMENT | POTENTIAL MORTALITY ASSESSMENT* | PREFERRED POSSIBLE |
|------------------------------------|--|---|
| Blindness | Age <16, total blindness - decline | |
| | Age >16 well-adjusted, no complications - standard | Possible, if otherwise considered standard and no impairment of functional capacity |
| BPH (benign prostatic hypertrophy) | Normal PSA, urinalysis, no impairments - standard | Y |
| Breast disorders (not cancer) | Benign mass without atypia per biopsy - standard | Y |
| | Benign mass with atypia per biopsy - standard to decline (determined by client's age, family history, and screening history) | N |
| Broken bone | Standard | Y |
| Bronchiectasis | Nonsmoker: | N |
| | Mild - standard to T2 | |
| | Moderate - T2 to T4 | |
| | Severe - T6 to decline | |
| | Smoker: all cases decline | |
| Bronchitis, acute | Standard | Y |
| Bronchitis, chronic (COPD) | Mild - T2 to T4 | N |
| | Moderate - T4 to T6 | |
| | Severe - T6 to decline | |
| | Current tobacco or oxygen use - decline | |
| Bundle branch block, right | Incomplete - standard | Y |
| | Complete: no cardiovascular risk factors - standard | N |
| | With cardiovascular risk factors - T2 to T3 | N |
| Bundle branch block, left | T3 to decline | N |
| Cardiomyopathy | Dilated or restrictive - decline | N |
| | Hypertrophic: | |
| | Age <35 - decline | |
| | Age 35 & up - T6 to decline | |
| | Peripartum: | |
| | <12 months from onset - decline | |
| | >12 months from onset - T4 to decline | |
| Carpal tunnel syndrome | Standard | Y |
| Cataracts | Standard | Y |

* Potential morbidity assessments may differ.

MEDICAL IMPAIRMENTS

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IMPACT ON RISK CLASS | T=Table

| IMPAIRMENT | POTENTIAL MORTALITY ASSESSMENT* | PREFERRED POSSIBLE |
|--|---|---------------------|
| Cerebral palsy | Age 8 & over - IQ >50, doing well in regular school with physical impairment such as hemiplegia, monoplegia, or ataxia - standard to T4 | N |
| | With epilepsy - T4 to decline | |
| | Others - usually decline | |
| Cerebrovascular accident, stroke (CVA) | <6 months since occurrence - decline | N |
| | >6 months since occurrence with only mild residuals: | |
| | Age 50 & under - decline | |
| | Age >50 - T2 to T5 | |
| | Multiple strokes - decline | |
| Chronic fatigue syndrome | Well controlled and no associated depression - standard | Y |
| Chronic obstructive pulmonary disorder (COPD) | Mild - T2 to T4 | N |
| | Moderate - T4 to T6 | |
| | Severe - T6 to decline | |
| | Current tobacco or oxygen use - decline | |
| Bipolar disorder | Mild - (no loss of work, stable symptoms, low-dose single antidepressant) - T2 to T4 | N |
| | Moderate - (one or more episodes, satisfactory response to treatment, infrequent disabling attacks) - T4 to T6 | |
| | Severe - (recurring episodes, inpatient care, disabled from work) - T8 to decline | |
| Chronic pain | Mild - standard to T3 | N |
| | Moderate - T4 to T8 | |
| | Severe - decline | |
| Cirrhosis (liver) | Decline | N |
| Colitis, ulcerative | <1 year since diagnosis - decline | N |
| | >1 year since diagnosis: | |
| | Mild - standard to T4 | |
| | Moderate - T4 to T6 | |
| | Severe or with complications - decline | |
| Colitis, other than ulcerative | Standard - decline, depending on cause | Y |
| Concussion (head injury) | Mild with no residuals - standard to T2 | Y - if no residuals |
| | With residuals, <6 months - decline | N |
| | With residuals, >6 months - T2 to decline | N |
| | Multiple episodes or severe - T3 to decline | N |

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MEDICAL IMPAIRMENTS

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IMPACT ON RISK CLASS | T=Table

| IMPAIRMENT | POTENTIAL MORTALITY ASSESSMENT* | PREFERRED POSSIBLE |
|---------------------------------------|--|--------------------|
| Congestive heart failure (CHF) | <2 years since diagnosis - decline | N |
| | >2 years since diagnosis - T4 to decline | |
| Convulsions | See Epilepsy | |
| Coronary artery disease | <3 months after bypass surgery - decline | N |
| | <6 months after angioplasty - decline | |
| | Age <40 - decline | |
| | Age 40-45 - T6 to decline | |
| | Age 46-59 - T4 to decline | |
| | Age >60 - T2 to decline May be able to improve offer with credits for favorable factors such as cholesterol and recent negative cardiac testing | |
| Criminal activity | Criminal charges pending, or currently on probation or parole - decline May reconsider one year after end of probation or parole | N |
| | Otherwise, call home office | |
| Bursitis | Standard | Y |
| Cancer (internal organ) | Call home office | N |
| Cancer, skin (not melanoma) | Standard | Y |
| Crohn's disease | Onset prior to age 25 - decline | N |
| | Very mild and limited disease | |
| | <6 months since diagnosis - decline | |
| | >6 months since diagnosis - standard to T4 | |
| | Moderate: | |
| | <2 years since diagnosis - decline | |
| | >2 years since diagnosis - T2 to decline | |
| | Severe: | |
| | <4 years since diagnosis - decline | |
| | >4 years since diagnosis - T6 to decline | |
| Cyst, benign | Standard | Y |
| Cystic fibrosis | Decline | N |
| Depression | Mild - standard (minimal amt of medication, no counseling, no time off work, no psychiatric counseling) | Possible |
| | Moderate - standard to T4 (satisfactory response to treatment, outpatient psychotherapy, no more than 1-2 weeks off work) | N |
| | Severe - T6 to decline (recurring episodes requiring inpatient care, unable to work) | N |
| Dermatitis | Standard | N |

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MEDICAL IMPAIRMENTS

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IMPACT ON RISK CLASS | T=Table

| IMPAIRMENT | POTENTIAL MORTALITY ASSESSMENT* | PREFERRED POSSIBLE |
|-----------------------------------|--|--------------------------------|
| Diabetes | Age <20 - decline | N |
| | Type 1 diabetes, well controlled, no complications, and no tobacco use: | |
| | Age 20-29 - T8 to decline | |
| | Age 30 & up - T6 to T8 | |
| | Type 2 diabetes, well controlled, no complications, and no tobacco use: | |
| | Age 20-29 - T6 to decline | |
| | Age 30-49 - T3 to T6 | |
| | Age 50 & up - standard to T4 | |
| Diverticulitis | Mild attacks, fully recovered - standard to T2 | Y |
| Down syndrome | Decline | N |
| Driving under the influence (DUI) | <1 year since violation, all ages - decline | N |
| | Age 21 and up: | N |
| | 1-2 years - \$2.50-\$3.50 flat extra | N |
| | 2-4 years - standard to \$2.50 flat extra | N |
| | >4 years - standard | Y if > 5 years |
| | Multiple DUIs with 4 years - decline Under age 21 at time of violation - decline for 4 years from violation | N |
| Eczema | Standard | Y |
| Emphysema | Mild - T2 to T4 | N |
| | Moderate - T4 to T6 | |
| | Severe - T6 to decline | |
| | Current tobacco or oxygen use - decline | |
| Endocarditis | Decline if <1 year from diagnosis, then standard to T2 if no residuals | Y |
| Epilepsy, petit mal | <6 months since diagnosis - decline | N |
| | Well controlled, no seizures in last 2 years - standard to T2 | |
| | Moderate control, <7 seizures per year - T2 to T4 | |
| | Poor control, >6 seizures per year or prolonged unconsciousness or requiring multiple hospitalizations - T4 to decline | |
| Epilepsy, grand mal | <6 months since diagnosis - decline | N |
| | Well controlled, no seizures in last 2 years - standard to T2 | Y if last seizure >5 years ago |
| | Moderate control, <7 seizures per year - T3 to T5 | N |
| | Poor control, >6 seizures per year or prolonged unconsciousness or requiring multiple medications - T6 to decline | N |
| Esophageal stricture | Standard to T2 | Y |
| Fibromyalgia, fibrositis | Standard to decline | Y |
| Fistula & fissure, anal | Standard if resolved | Y |

* Potential morbidity assessments may differ.

MEDICAL IMPAIRMENTS

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IMPACT ON RISK CLASS | T=Table

| IMPAIRMENT | POTENTIAL MORTALITY ASSESSMENT* | PREFERRED POSSIBLE |
|---|--|--------------------|
| Fracture, bone or skull (no residuals) | Standard | Y |
| Gall bladder disorders | Standard if asymptomatic | Y |
| Gastric banding, sleeve or bypass surgery | <6 months since surgery - decline | N |
| | >6 months since surgery - rates vary based on weight loss and current weight - contact home office | |
| Gastroenteritis, recovered | Standard | Y |
| Gastroesophageal reflux disease (GERD) | Standard if well controlled | Y |
| Glaucoma | Standard | Y |
| Glomerulonephritis | Acute, in remission - standard to T6 chronic - T6 to decline | N |
| Gout | Standard (chronic, severe cases may require rating) | Y |
| Headache, migraine or tension | Standard to decline | Y |
| | Recent onset, increasing frequency, not investigated - decline | |
| Hearing impairment | Standard | Y |
| Heart attack | See coronary artery disease | |
| Heart bypass surgery | < 3 months from bypass - postpone. Otherwise, see coronary artery disease | |
| Heart valve surgery | <1 year since surgery - decline | N |
| | >1 year since surgery - T2 to decline (Rate dependent on age and valve replaced or repaired) | |
| Heartburn | Standard | Y |
| Hemorrhoids | Standard | Y |
| Hepatitis A | Standard (fully recovered) | Y |
| Hepatitis B | One episode, fully recovered - standard | N |
| | Chronic - standard to decline | |
| Hepatitis C | Standard to decline | N |
| Hernia | Standard | Y |
| Herniated disc | Standard to T2 | Y |
| High blood pressure (Hypertension) | Usually standard (if under control) | Y |
| Histoplasmosis | Present - decline | N |
| | Recovered without residuals > 6 months - standard | |
| | With residual lung impairment - T2 to decline | |
| Hodgkin's disease | T2 to decline | N |

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MEDICAL IMPAIRMENTS

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IMPACT ON RISK CLASS | T=Table

| IMPAIRMENT | POTENTIAL MORTALITY ASSESSMENT* | PREFERRED POSSIBLE |
|---|---|------------------------|
| Huntington's disease | Present - decline | N |
| | Family history, with negative genetic testing - standard | |
| | Family history, without genetic testing - age 55 & under - T4 to decline | |
| | Age >55 - usually standard | |
| Hydronephrosis | Resolved or cause corrected - standard | N |
| | Cause still present - T2 to decline | |
| Hysterectomy | Standard if no cancer history | Y |
| Ileitis | See Crohn's disease | N |
| Indigestion | Standard | Y |
| Kidney failure, dialysis | Decline | N |
| Kidney infection, recovered | Standard | Y |
| Kidney removal | Standard to decline (depending on cause and current renal function) | Y (depending on cause) |
| Kidney stones | Standard (frequent attacks may require rating) | Y |
| Kidney transplant | <1 year since transplant - decline | N |
| | >1 year since transplant - T6 to decline | |
| Leukemia | Call home office. Offer subject to type, date of onset, and date of last treatment. | N |
| Lupus, discoid | Standard to T2 | N |
| Lupus, systemic | <1 year since diagnosis - decline | N |
| | 1 year and up from diagnosis - T2 to decline | N |
| Lymphoma | Call home office. Offer subject to type, date of onset, and date of last treatment. | N |
| Malaria | Single episode - standard | Y - if fully recovered |
| | Multiple episodes - standard to T2 | N |
| Melanoma | Standard to decline | N |
| Marijuana use | Medicinal - based on underlying impairment | Y |
| | Recreational - based on frequency and method of use | Y |
| Meniere's disease | Standard | Y |
| Meningioma | Standard to \$10 flat extra | N |
| Meningitis | <6 months since recovery - decline | N |
| | >6 months since recovery, no residuals - standard | Y |
| Mental retardation and/or intellectual disability | Age 13 or less - decline | N |
| | Age >13: | |
| | IQ 70 or higher, able to care for self - standard | |
| | IQ below 70 - T6 to decline | |

* Potential morbidity assessments may differ.

MEDICAL IMPAIRMENTS

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IMPACT ON RISK CLASS | T=Table

| IMPAIRMENT | POTENTIAL MORTALITY ASSESSMENT* | PREFERRED POSSIBLE |
|--|---|--|
| Mitral insufficiency, Mitral valve prolapse (MVP) | Mild - standard to T2 | Y |
| | Moderate - T4 to T6 | N |
| | Severe - decline | N |
| Mitral stenosis | Mild - T2 to T6 | N |
| | Moderate - T4 to decline | |
| | Severe - decline | |
| Mononucleosis | Standard | Y |
| Mountain climbing | Based on location, scale (YDS or other grading scale), altitude, and equipment used - standard to decline | Subject to details. Minor trail climbing or equivalent may be acceptable within preferred classes. |
| | Please call home office with details for quote | N |
| Multiple sclerosis (MS) | <2 years since diagnosis - decline | N |
| | >2 years since diagnosis: | |
| | Mild - T4 to T6 | |
| | Moderate - T6 to T8 | |
| | Severe or primary progressive type - decline | |
| Muscular dystrophy | Becker - T8 to decline | N |
| | Facioscapulohumeral - T2 to decline | |
| | Oculomuscular dystrophy - standard to decline | |
| | Other types - decline | |
| Myasthenia gravis | Ocular: | N |
| | <3 years since diagnosis - decline | |
| | >3 years since diagnosis - standard | |
| | Generalized: | |
| | <3 years since diagnosis - decline | |
| | 3-5 years since diagnosis - T4 | |
| | >5 years since diagnosis - T2 | |
| | With thymectomy >1 year, in remission - standard | |
| Myocarditis | >3 months since full recovery, no treatment - T2 to decline | N |
| Nephrectomy | Standard to decline (depending on cause and renal function) | Possible depending on the circumstances |
| Neurosis, anxiety | See Anxiety | |
| Non-Hodgkin's lymphoma | Call home office. Offer subject to type, date of onset, and date of last treatment. | N |
| Occupations with special hazards | Examples of occupations with special hazards: aviation, military, building and construction, mining and quarrying, and professional athletes, may be considered for coverage with possible flat extra. This is not an inclusive list; contact the home office if you have a question about an occupation. | Possible if occupation is considered standard, otherwise no preferred |

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MEDICAL IMPAIRMENTS

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IMPACT ON RISK CLASS | T=Table

| IMPAIRMENT | POTENTIAL MORTALITY ASSESSMENT* | PREFERRED POSSIBLE |
|---|---|--------------------|
| Operating while intoxicated (OWI) | See DUI | |
| Osteoarthritis | See Arthritis, osteo | |
| Pacemaker | T2 to decline (Rating determined by the age of the client, years since pacemaker implanted and reason for the pacemaker.) | N |
| Pancreatitis | Acute: <6 months since attack - decline | N |
| | Single episode - standard to T2 | |
| | Multiple episodes - T4 | |
| | Chronic or relapsing - decline | |
| Paralysis, spinal cord injury | Paraparesis or quadriparesis (incomplete paralysis, not confined to wheelchair, >1 year since injury) - T2 to T8 | N |
| | Complete paraplegia: | |
| | <2 years since injury - decline | |
| | >2 years since injury - T4 to T8 | |
| | Complete quadriplegia - decline | |
| Parkinson's disease | T3 to decline | N |
| Pericarditis | Single episode (idiopathic or viral) fully recovered: | N |
| | <3 months - decline | |
| | >3 months - standard to T3 | |
| | Constrictive: | |
| | Unoperated or <12 months since surgery - decline | |
| | >12 months since surgery - T2 | |
| | Persistent or recurrent episodes - T4 to decline | |
| Peripheral vascular disease (PVD) | Nonsmoker: | N |
| | No surgery - T2 to T6 | |
| | With surgery - T4 to T6 | |
| | Smoker or severe disease - decline | |
| Phlebitis, thrombosis, blood clot | Single episode, fully recovered - standard | Y |
| | Multiple episodes - standard to T4 | N |
| Pilonidal cyst | Standard | Y |
| Pituitary adenoma | Standard to decline | N |
| Pleurisy | Standard to T2 | Y |
| Pneumoconiosis | T2 to decline | N |
| Pneumonia, full recovery | Standard | Y |
| Pregnancy, no current or history of complications | Standard | Y |
| Prostatitis, with normal PSA | Standard | Y |

* Potential morbidity assessments may differ.

MEDICAL IMPAIRMENTS

Rate classes shown are not guaranteed but a range of potential offers of which a declination is possible. Actual offers are subject to underwriting and may vary based on age, date of diagnosis, and severity of condition.

IMPACT ON RISK CLASS | T=Table

| IMPAIRMENT | POTENTIAL MORTALITY ASSESSMENT* | PREFERRED POSSIBLE |
|---|--|--------------------|
| Psychosis | 0-2 years since last episode - decline | N |
| | 2-5 years since last episode - T4 to decline | |
| | 5-10 years since last episode - standard to T6 | |
| | >10 years since last episode - standard to T4 | |
| Pyelonephritis, acute | 1 episode, recovered - standard | Y |
| | 2-3 episodes standard to \$5 | N |
| | >3 episodes T6 to decline after episodes | N |
| Pyelonephritis, chronic | T6 to decline | N |
| Racing, motor vehicle | Amateur - standard | N |
| | Professional or semiprofessional - \$2.50 to decline (rate depends on number of races, speed, type of vehicle, etc.) | |
| Raynaud's disease | Standard to T4 | Y (if not rated) |
| Rheumatic fever, no heart complications | Mild, no heart murmur or heart valve damage - standard | Y |
| | Otherwise - rate determined by residuals | N |
| Rheumatoid arthritis | See Arthritis, rheumatoid | |
| Sarcoidosis | Standard to decline | N |
| Sebaceous cyst | Standard | Y |
| Sciatica | Standard to T2 | Y |
| Schizophrenia | 0-2 years since last episode - decline | N |
| | 2-5 years since last episode - T4 to decline | |
| | 5-10 years since last episode - standard to T6 | |
| | >5-10 years since last episode - standard to T4 | |
| Scuba diving, recreational, lakes, rivers, coastal waters | 100 ft or less - standard | Y if 75 ft or less |
| | 101-150 ft - \$2.50 flat extra | N |
| | >150 ft - \$5 flat extra to decline | N |
| Seizures | See Epilepsy | |
| Sinusitis | Standard | Y |
| Sky diving | \$2.50-\$5 flat extra | N |
| Sleep apnea | Mild - standard | N |
| | Moderate - standard to T3 | |
| | Severe - T2 to decline | |
| Stroke | <6 months since occurrence - decline | N |
| | >6 months since occurrence with only mild residuals: | |
| | Age 50 and under - decline | |
| | Age >50 -T2 to T5 | |
| | Multiple strokes - decline | |

* Potential morbidity assessments may differ.

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MEDICAL IMPAIRMENTS

Rate classes shown are not guaranteed, but a range of potential offers of which a declination is possible. Actual offers are subject to underwriting and may vary based on age, date of diagnosis, and severity of condition.

IMPACT ON RISK CLASS | T=Table

| IMPAIRMENT | POTENTIAL MORTALITY ASSESSMENT* | PREFERRED POSSIBLE |
|--|---|--------------------|
| Suicide attempt | <1 year since attempt - decline | N |
| | 1-5 years since attempt - \$5 flat extra to decline | |
| | >5 years since attempt - standard to decline | |
| Thyroid disorder | Usually standard | Y |
| Transurethral resection of prostate (TURP) | No history of cancer: standard | Y |
| Transient ischemic attack (TIA) | <6 months since occurrence - decline | N |
| | >6 months: | |
| | Single occurrence - standard to T3 | |
| | Multiple occurrences - T2 to T5 | |
| Tuberculosis | If fully recovered, usually standard | Y |
| Tumors, benign | Usually standard | Y |
| Tumors, malignant | Call home office | N |
| Ulcerative colitis | See Colitis, ulcerative | |
| Ulcer, stomach | Single episode, fully recovered - standard | Y |
| | Multiple episodes - standard to T4 | N |
| Upper respiratory tract infection, cold | Standard | Y |
| Varicocele, hydrocele, cystocele | Standard | Y |
| Urinary bladder infection, acute | Standard | Y |
| Varicose veins | Standard to T3 | Y |

* Potential morbidity assessments may differ.

SUBSTANDARD TABLE RATINGS

Substandard ratings may be attributable to health, occupation, or avocation characteristics that result in higher than average mortality risks.

Our competitive underwriting allows us to offer substandard table ratings using the following guide:

| TABLE RATING GUIDE |
|--------------------|
| Standard = 100% |
| 1/A = 125% |
| 2/B = 150% |
| 3/C = 175% |
| 4/D = 200% |
| 5/E = 225% |
| 6/F = 250% |
| 8/H = 300% |

ADDITIONAL RATE CLASS INFORMATION

Tobacco user is defined as using any tobacco products (cigarettes, cigars, chewing tobacco, nicotine patch/lozenge/gum, e-cigarettes, vapes (with or without nicotine), etc.) within the past 24 months. For tobacco user information see the preferred criteria grid. To qualify for best class, one would need to be five years out from last use of tobacco products.

Please refer to product materials for age and risk class availability.

ADDITIONAL RIDER INFORMATION

ACCIDENTAL DEATH BENEFIT RIDER (ADR)

Provides an additional death benefit if the primary insured dies as a result of an accident, or if the death occurs within 180 days of accidental bodily injury

| ISSUE AGES: | ISSUE LIMITS: |
|-------------|--|
| 15-55 years | <ul style="list-style-type: none">- Not available if base is higher than Table D- Not available if any flat extra is added to base policy- Total benefit in force cannot exceed \$300,000 with all Transamerica policies |

CHILDREN'S BENEFIT RIDER

Pays level death benefit upon death of any children of the insured. Rider is not rated.

| ISSUE AGES: | ISSUE LIMITS: |
|---|---|
| 15 days to 18 years old (actual age of child) 18-80 years old insured | <ul style="list-style-type: none">- Children with a risk profile greater than Table B will not be accepted for coverage |

CHRONIC ILLNESS RIDER

If the insured becomes chronically ill, you may elect to receive a portion of the death benefit that can be accelerated in advance of death. The insured must have the inability to perform at least two of the six activities of daily living for a period of 90 consecutive days, or have a severe cognitive impairment.

| ISSUE AGES: | ISSUE LIMITS: |
|--|---|
| Varies by risk class, product, and issue state | <ul style="list-style-type: none">- Not available if base is higher than Table D- Not available if base is rated higher than \$2.50 flat extra- The sum of all living benefit coverages under all Transamerica policies cannot exceed \$1,500,000- The maximum benefit payable under the Chronic Illness Rider is equal to the lesser of 90% of the available death benefit or \$1,500,000- Electable at issue, not automatically attached to the base product- Underwriting reserves the right to deny coverage under the Chronic Illness Rider on individuals with certain pre-existing conditions, impairments, or diseases- Not available if base policy face amount is below \$100,000 |

CRITICAL ILLNESS RIDER

If the insured suffered a critical health condition (state specific) while the policy and rider are in effect, you may elect to receive an accelerated death payment subject to certain provisions.

| ISSUE AGES: | ISSUE LIMITS: |
|---|--|
| May vary by risk, product, and issue date | <ul style="list-style-type: none">- Not available if base is higher than Table D- Not available if base is rated higher than \$2.50 flat extra- The per life sum of all living benefit coverages under all Transamerica policies cannot exceed \$1,500,000- The per life maximum benefit payable under the Critical Illness Rider on <i>Transamerica Lifetime</i>SM is equal to the lesser of 90% of the available death benefit or \$500,000- Electable at issue, not automatically attached to the base product- Underwriting reserves the right to deny coverage under the Critical Illness Rider on individuals with certain pre-existing conditions, impairments, or diseases- Not available if base policy face amount is below \$100,000- Not available in New York |

DISABILITY WAIVER OF PREMIUM RIDER

Provides premium into the policy if the base insured becomes totally disabled and remains totally disabled for at least six months. A retroactive payment will be made for the number of months following the date of total disability for up to one year.

| ISSUE AGES: | ISSUE LIMITS: |
|-------------|---|
| 18-55 years | <ul style="list-style-type: none">- Not available if base is rated higher than Table D- Flat extras are not allowed- \$5,000,000 maximum aggregate face amount across all Transamerica policies- Not available in Guam, Virgin Islands, or Puerto Rico |

ADDITIONAL RIDER INFORMATION

GUARANTEED INSURABILITY RIDER

This benefit provides the opportunity to buy a new policy or increase a specified amount at a certain defined age and/or events with no underwriting.

| ISSUE AGES: | ISSUE LIMITS: |
|--|--|
| 0-37 years old; issue age must be at least 15 days old | <ul style="list-style-type: none">- Not available if base is rated- Not available in Guam, Virgin Islands, or Puerto Rico |

TERM INSURANCE RIDER

An affordable way to provide additional coverage to the primary insured. This term coverage will help fill a temporary need of additional life insurance above the current face amount of the base policy. The term rider amount cannot exceed 3X base face amount.

| | BAND 1 | BAND2 |
|---------|--------------|----------------------|
| 10-YEAR | 18-80 (NT/T) | 18-80 (NT/T) |
| 20-YEAR | 18-65 (NT/T) | 18-70 (NT) 18-65 (T) |
| 30-YEAR | 18-50 (NT) | 18-58 (NT) |
| | 18-45 (T) | 18-53 (T) |

TERMINAL ILLNESS ACCELERATED DEATH BENEFIT RIDER

While the policy is in force and conditions are met, we will pay an Accelerated Death Benefit (Terminal Illness only) upon request (life expectancy less than 12 months), minus the loan balance, minus an administrative charge, and minus any amount necessary to provide insurance to the date of the Accelerated Death Benefit payment if we make the payment during a grace period.

This benefit is automatically attached to all new issues. Rider is not rated.

INCOME PROTECTION OPTION

The owner can choose to have the death benefit paid out in any combination of an initial lump sum, monthly payments, and a final lump sum (after the monthly payments). If the policy's death benefit at the time of death is greater than the Total Face Amount, the excess will be paid as a sum in addition to any initial lump sum payment amount. If the death benefit is less than the Total Face Amount, all designated payment amounts will be proportionately reduced.



FIELD UNDERWRITING AND THE CONDITIONAL RECEIPT

Every time you submit an application, you take a very important step in helping your clients protect their family and their dreams. The Conditional Receipt is an important part of this process.

WHAT IS THE CONDITIONAL RECEIPT?

The Conditional Receipt is “interim” coverage provided to life insurance applicants when the full modal premium is paid at the time of the application. Provided certain conditions are met, the Conditional Receipt provides death benefit protection for the proposed primary insured up to the amount stated in the dollar limits of conditional coverage section of the receipt or the face amount applied for, whichever is less. The Conditional Receipt is not valid on foreign nationals.

CONDITIONS AND REQUIREMENTS

The following must be met for the conditional receipt to be in effect:

- Proposed primary insured is found insurable, at any rating, under the company’s rules for insurance on the product applied for and at the face amount and tobacco classification applied for;
- All statements and answers given in the application are true and complete;
- Full initial modal premium is received at our administrative office within the lifetime of the proposed primary insured (if the form of payment is by check or draft, it must be honored for payment);
- All medical exams, tests, screenings, and questionnaires required by the company are completed and received at our administrative office.

If the proposed primary insured passes away while conditional coverage is in effect, coverage will be denied if the death is caused by suicide or a self-inflicted injury.

There is no conditional coverage for riders or any additional benefits. Conditional coverage only applies to the proposed primary insured. There is no conditional coverage on any other persons proposed for coverage in the application.

AN APPLICATION HAS BEEN COMPLETED. NOW WHAT?

KEEP YOUR CLIENT INFORMED

Let the client know that additional evidence may be needed to complete the process.

Examples may include:

- Paramed-physical findings
- Blood draw and urine specimen
- An ECG

QUESTIONNAIRES

Additional questionnaires may be required when further information is needed on avocation or aviation matters that could impact an underwriting classification.

These include:

- **Aviation Questionnaire** – complete if there is any participation in aviation as pilot or crew member
- **Sports and Hazardous Activities Questionnaire** – various impairment specific questionnaires

These questionnaires may be found in the forms section of the agent portal. A complete list of questionnaires available may be found on FormsPipe.

* Questionnaires vary by jurisdiction and may not be available in all states.

WHAT IF THE CLIENT IS NOT A U.S. CITIZEN?

A client who is not a U.S. citizen may still qualify for life insurance coverage if they meet certain special requirements and comply with all relevant items (which may vary based on their status) listed below:

- The client must have significant business and/or financial ties in the United States;
- The client must present either a(n): Social Security Number (SSN); Individual Tax Identification Number (ITIN/TIN); appropriate version of IRS Form W8 for those without an SSN or TIN; or (for the ITIN Program) IRS ITIN letter issued as a result of a W-7 Application;
- The client must be legally and physically present in the United States at the time of application;
- Visa holders: indicate the specific visa type (e.g., H1, F1, etc.) or exact immigration status (e.g., refugee, asylum, etc.) on the application and submit a copy of the valid visa;^{1,2}
- Employment Authorization Card ("EAC") holders: compare the category code, located in the center of the EAC to determine if the candidate is eligible to apply for insurance and submit a copy of the valid EAC;
- Immigration documents pending expiration within 60 days of the application date may affect insurability or delay processing while we confirm renewal;
- Fully-expired visas must show proof of renewal or extension (I-797, I-797A, or other confirmation document from USCIS that is acceptable to Underwriting);
- EB-5 visa holders transitioning to a green card status may be asked for additional documentation to confirm that process;
- A copy of all required documentation will be asked for in iGO at the time of application. For paper applications, use the image upload tool on the agent portals to submit copies of images, and indicate this in the agent comments section;
- Only US residents are eligible to apply for the Living Benefit Riders (Chronic Illness, Critical Illness) and/or Long Term Care Rider;
- A separate international underwriting guide is available for information on submitting nonresident foreign national and U.S. expatriate business. All international risk guidelines are subject to change without prior notice.
- Permanent Resident Card (green card holders): Copy of front and back of the card may be requested at underwriter discretion.

For further details please refer to our Resident Foreign Nationals Travel Guidelines flyer, HNW Nonresident FN UW Guidelines (111955), and Foreign National Individual Taxpayer identification number guidelines (117754R1).

DOCUMENTATION NEEDED

Visa or EAC are required. Proof of entry (passport stamp or I-94 document) or other supporting documents may be required at Underwriter discretion.

¹ Not all visa types or immigration statuses are eligible. Note also that the Matricula Consular document is not recognized to be valid as a visa by the U.S. government.

² List "Permanent Resident" on the application if the client is a valid green card holder residing in the U.S.

ELIGIBILITY BY EMPLOYEE AUTHORIZATION CARD CATEGORY CODE

| CODE | DESCRIPTION | ELIGIBILITY | | | |
|----------|--|----------------------------|------------------------|-----------------------|--|
| | | LIFE | CRITICAL ILLNESS RIDER | CHRONIC ILLNESS RIDER | JUVENILES [INCLUDES PARENT/OWNER STATUS] |
| (a)(2) | Lawful temporary resident - Special Agricultural Workers | Up to best class | Yes | Yes | Yes |
| (a)(3) | Refugee | Up to best class | Yes | Yes | Yes |
| (a)(4) | Paroled refugee | Up to best class | Yes | Yes | Yes |
| (a)(5) | Asylee | Up to best class | Yes | Yes | Yes |
| (a)(6) | Fiancé(e) (K-1 or K-2 nonimmigrant) | Up to best class | Yes | Yes | Yes |
| (a)(7) | N-8 or N-9 | Based on country of origin | Yes | Yes | No |
| (a)(8) | Citizen of Micronesia, Marshall Islands, or Palau | Up to best class | Yes | Yes | Yes |
| (a)(9) | K-3 or K-4 | Up to best class | Yes | Yes | Yes |
| (a)(10)* | Withholding of deportation or removal granted | Decline | No | No | No |
| (a)(11)* | Deferred Enforced Departure | Decline | No | No | No |
| (a)(12) | Temporary Protected Status granted | Based on country of origin | Yes | Yes | No |
| (a)(13) | Family Unity Program (Section 301 of the Immigration Act of 1990) | Up to best class | Yes | Yes | Yes |
| (a)(14) | LIFE Legalization (Section 1504 of the Legal Immigrant Family Equity (LIFE) Act Amendments) | Up to best class | Yes | Yes | Yes |
| (a)(15) | V visa nonimmigrant | Based on country of origin | Yes | Yes | No |
| (a)(16) | T-1 nonimmigrant | Decline | No | No | No |
| (a)(17) | Spouse of an E nonimmigrant | Up to best class | Yes | Yes | Yes |
| (a)(18) | Spouse of an L nonimmigrant | Up to best class | Yes | Yes | Yes |
| (a)(19) | U-1 nonimmigrant | Decline | No | No | No |
| (a)(20) | U-2, U-3, U-4, or U-5 nonimmigrant | Decline | No | No | No |
| (c)(1) | Spouse/dependent of A-1 or A-2 visa nonimmigrant | Decline | No | No | No |
| (c)(2) | Spouse/dependent of Coordination Council for North American Affairs (E-1)/Taipei Economic and Cultural Representative Office (TECRO) | Up to best class | Yes | Yes | Yes |
| (c)(3) | F-1 student, pre-completion Optional Practical Training | Up to best class | Yes | Yes | Yes |
| (c)(4) | Spouse/dependent of G-1, G-3, or G-4 | Based on country of origin | Yes | Yes | No |
| (c)(5) | J-2 spouse or child of J-1 exchange visitor | Based on country of origin | Yes | Yes | No |
| (c)(6) | M-1 student, Practical Training | Up to best class | Yes | Yes | Yes |
| (c)(7) | Dependent of NATO-1 through NATO-6 | Based on country of origin | Yes | Yes | No |
| (c)(8) | Asylum application pending filed | Decline | No | No | No |

* May be eligible for life coverage through ITIN program

Continued >

The purpose of this document is to outline risks that are considered uninsurable based on immigration status. It is not possible to include every scenario and the contents of this document are subject to change without notice. This is not an offer guaranteeing any predetermined rate for any applicant.

ELIGIBILITY BY EMPLOYEE AUTHORIZATION CARD CATEGORY CODE

> Continued from previous page

| CODE | DESCRIPTION | ELIGIBILITY | | | |
|----------|--|----------------------------|------------------------|-----------------------|--|
| | | LIFE | CRITICAL ILLNESS RIDER | CHRONIC ILLNESS RIDER | JUVENILES [INCLUDES PARENT/OWNER STATUS] |
| (c)(9) | Pending adjustment of status under Section 245 of the Act | Up to best class | Yes | Yes | Yes |
| (c)(10)* | Suspension of deportation applicants (filed before April 1, 1997) | Decline | No | No | No |
| (c)(11) | Public interest parolee | Based on country of origin | Yes | Yes | No |
| (c)(12) | Spouse of an E-2 CNMI investor | Up to best class | Yes | Yes | Yes |
| (c)(14)* | Deferred action | Decline | No | No | No |
| (c)(15) | Not in use | N/A | Yes | Yes | Yes |
| (c)(16) | Creation of record (adjustment based on continuous residence since January 1, 1972) | Up to best class | Yes | Yes | Yes |
| (c)(17) | B-1 domestic servant of certain nonimmigrants | Decline | No | No | No |
| (c)(18)* | Order of supervision | Decline | No | No | No |
| (c)(19) | Certain pending TPS applicants whom USCIS has determined are prima facie eligible for TPS and who may then receive an EAD as a "temporary treatment benefit" under 8 C.F.R. 244.10(a). | Based on country of origin | Yes | Yes | No |
| (c)(20) | Section 210 legalization (pending I-700) Special Agricultural Workers | Up to best class | Yes | Yes | Yes |
| (c)(21) | S visa nonimmigrant | Decline | No | No | No |
| (c)(22) | Section 245A legalization (pending I-687) | Up to best class | Yes | Yes | Yes |
| (c)(23) | Irish peace process (Q-2) | Up to best class | Yes | Yes | Yes |
| (c)(24) | LIFE legalization | Up to best class | Yes | Yes | Yes |
| (c)(25) | T-2, T-3, T-4, T-5, or T-6 nonimmigrant | Decline | No | No | No |
| (c)(26) | Spouse of an H-1B nonimmigrant | Up to best class | Yes | Yes | Yes |
| (c)(31) | VAWA self-petitioners with an approved Form I-360 | Up to best class | Yes | Yes | Yes |
| (c)(33)* | Consideration of Deferred Action for Childhood Arrivals | Decline | No | No | No |
| (c)(35) | Principal beneficiary of an approved employment-based immigrant petition facing compelling circumstances | Up to best class | Yes | Yes | Yes |
| (c)(36) | Spouse or unmarried child of a principal beneficiary of an approved employment-based immigrant petition facing compelling circumstances | Up to best class | Yes | Yes | Yes |

* May be eligible for life coverage through ITIN program

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ELIGIBILITY BY VISA TYPES

| CODE | DESCRIPTION | DOCUMENTATION REQUIRED | ELIGIBILITY | | | |
|-------------|--|---|--|------------------------|-----------------------|--|
| | | | LIFE | CRITICAL ILLNESS RIDER | CHRONIC ILLNESS RIDER | JUVENILES [INCLUDES PARENT/OWNER STATUS] |
| A | Government official | N/A | Decline | No | No | No |
| AS | Asylum | Proof of asylum approval (copy immigration court document or EAD category A5) | Up to best class | Yes | Yes | Yes |
| B | Visitor [B1, B2, B1/B2, BCC] | Copy of visa and proof of U.S. entry | Underwritten according to country of legal residence | No | No | No |
| C | Transit | N/A | Decline | No | No | No |
| D | Crewman | N/A | Decline | No | No | No |
| E | Investor ¹ | Copy of visa | Up to best class | Yes | Yes | Yes |
| E | Employment authorization card | Copy of employee authorization card | Based on category code | See code chart | See code chart | See code chart |
| F | Student/academic | Copy of visa and I-20 from college | Up to best class | Yes | Yes | Yes |
| G | Representative to international organization | Copy of visa and proof of U.S. entry | Underwritten according to country of legal residence | Yes | Yes | No |
| GC | Green card, permanent resident card | Copy of green card | Up to best class | Yes | Yes | Yes |
| H | Work/occupation | Copy of visa | Up to best class | Yes | Yes | Yes |
| I | Media | N/A | Decline | No | No | No |
| J | Cultural exchange | Copy of visa and proof of U.S. entry (Form DS-2019) | Underwritten according to country of legal residence | Yes* | Yes* | No |
| K | Fiancée/fiancé | Copy of visa | Up to best class | Yes | Yes | Yes |
| L | Executive | Copy of visa | Up to best class | Yes | Yes | Yes |
| M | Vocational/non-academic | Copy of visa | Up to best class | Yes | Yes | Yes |
| NATO | Government workers | Copy of visa and proof of U.S. entry | Underwritten according to country of legal residence | Yes | Yes | No |
| O | Science/art extraordinary ability | Copy of visa | Up to best class | Yes | Yes | Yes |

Continued >

* J1 visa holders with plans on leaving the U.S. within a year cannot apply for the Critical Illness Rider and/or Chronic Illness Rider.

¹ Effective November 2019 the EB-5 "Golden Visa" investment minimum will increase from \$500,000 to \$900,000.

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ELIGIBILITY BY VISA TYPES

> Continued from previous page

| CODE | DESCRIPTION | DOCUMENTATION REQUIRED | ELIGIBILITY | | | |
|--------------|---|--|--|------------------------|-----------------------|--|
| | | | LIFE | CRITICAL ILLNESS RIDER | CHRONIC ILLNESS RIDER | JUVENILES [INCLUDES PARENT/OWNER STATUS] |
| P | Science/art extraordinary ability | Copy of visa | Up to best class | Yes | Yes | Yes |
| Q | Science/art extraordinary ability | Copy of visa and proof of U.S. entry | Underwritten according to country of legal residence | Yes | Yes | No |
| R | Religious | Copy of visa and proof of U.S. entry | Underwritten according to country of legal residence | Yes | Yes | No |
| RE | Refugee | Proof of refugee status (I-94) | Up to best class | Yes | Yes | Yes |
| S | Witness/informant | N/A | Decline | No | No | No |
| T | Victims of trafficking | N/A | Decline | No | No | No |
| TN/TD | Trades (NAFTA) | Copy of visa | Up to best class | Yes | Yes | Yes |
| TPS | Temporary protection status | Proof of status (I-94) | Underwritten according to country of legal residence | Yes | Yes | No |
| TWOV | Transit without a visa | N/A | Decline | No | No | No |
| U | Victims of certain criminal activity | Valid current visa and proof of U.S. entry | Underwritten according to country of legal residence | Yes | Yes | No |
| V | Certain second preference beneficiaries | Copy of passport and proof of U.S. entry | Underwritten according to country of legal residence | Yes | Yes | No |
| VWP | Visa Waiver Program | Copy of passport and proof of U.S. entry | Underwritten according to country of legal residence | No | No | No |



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Underwriting requirements are subject to change without notice.

Not available in New York.

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