

Product Overview Issue ages: 50 – 80

Face amounts: \$5,000 - \$25,000

Payment options:

ACH

Credit card: Visa, Mastercard

Direct Express

Highlights:

One page application

- Guaranteed approval
 - No health questions
 - No medical exam
 - Two year graded death benefit
 - Required premium payments stop at or before age 90. See page 2 for details.
 - Chronic Illness Benefit Rider included at no cost*
 - Terminal Illness Benefit Rider included at no cost*
 - * All riders are not available in all states: Chronic Illness and Terminal Illness ABRs not available in CA; Chronic Illness ABR not available in DC.

Modal Factor

Payment Mode	Modal Factor		
Annual	1.000		
Semi-Annual	0.500		
Quarterly	0.250		
Monthly	0.0834		

Calculation Details

Gender	Male
Age	60
Face	\$15,000
Payment mode	Monthly

Guaranteed Issue Whole Life (GIWL) Rate Calculator

Annual Premium Rate per \$1,000*

*Does not include annual \$24 policy fee

Rates good as of 02/05/2021

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ISSUE	FACE AMOUNTS MALE1 FEMALE1									
AGE	47.000	***			40-000	1-000				100.000
	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000
50	64.73	64.73	64.73	64.73	64.73	43.86	43.86	43.86	46.63	46.63
51	65.77	65.77	65.77	65.77	65.77	44.96	44.96	44.96	50.13	50.13
52	66.95	66.95	66.95	69.21	69.21	46.66	46.66	46.66	53.12	53.12
53	67.99	67.99	67.99	73.23	73.23	49.18	49.18	49.18	55.84	55.84
54	69.19	69.19	69.19	76.73	76.73	51.44	51.44	51.44	58.31	58.31
55	71.19	71.19	71.19	79.85	79.85	53.47	53.47	53.47	60.51	60.51
56	73.32	73.32	73.32	82.18	82.18	55.73	55.73	55.73	62.98	62.98
57	75.21	75.21	75.21	84.26	84.26	57.49	57.49	57.49	64.92	64.92
58	76.90	76.90	76.90	86.08	86.08	59.28	59.28	59.28	66.88	66.88
59	78.06	78.06	78.06	87.38	87.38	60.94	60.94	60.94	68.69	68.69
60	79.30	79.30	79.30	88.28	88.28	62.27	62.27	62.27	70.12	70.12
61	84.97	84.97	84.97	94.90	94.90	66.18	66.18	66.18	74.40	74.40
62	90.69	90.69	90.69	101.13	101.13	69.76	69.76	69.76	78.29	78.29
63	96.15	96.15	96.15	107.10	107.10	72.85	72.85	72.85	81.67	81.67
64	101.40	101.40	101.40	112.81	112.81	75.21	75.21	75.21	84.26	84.26
65	106.51	106.51	106.51	118.39	118.39	77.24	77.24	77.24	86.47	86.47
66	111.03	111.03	111.03	123.32	123.32	81.41	81.41	81.41	91.00	91.00
67	114.95	114.95	114.95	127.60	127.60	84.86	84.86	84.86	94.77	94.77
68	118.62	118.62	118.62	131.62	131.62	88.06	88.06	88.06	98.27	98.27
69	121.85	121.85	121.85	135.12	135.12	91.17	91.17	91.17	101.65	101.65
70	124.70	124.70	124.70	138.25	138.25	94.02	94.02	94.02	104.76	104.76
71	136.36	136.36	136.36	150.96	150.96	103.53	103.53	103.53	115.14	115.14
72	147.78	147.78	147.78	163.42	163.42	112.58	112.58	112.58	125.01	125.01
73	158.49	158.49	158.49	175.10	175.10	121.25	121.25	121.25	134.48	134.48
74	168.49	168.49	168.49	186.00	186.00	129.23	129.23	129.23	143.17	143.17
75	177.05	177.05	177.05	195.34	195.34	136.36	136.36	136.36	150.96	150.96
76	207.36	207.36	207.36	228.43	228.43	156.57	156.57	156.57	173.02	173.02
77	236.51	236.51	236.51	247.25	247.25	175.63	175.63	175.63	193.78	193.78
78	243.99	243.99	243.99	247.50	247.50	193.46	193.46	193.46	213.25	213.25
79	244.49	244.49	244.49	247.75	247.75	210.11	210.11	210.11	231.41	231.41
80	244.99	244.99	244.99	248.00	248.00	224.86	224.86	224.86	244.98	244.98

1. On premium chart lookup annual premium rate for male, \$15,000 face amount, age 60. **\$79.30**

2. Multiply by face amount and divide by 1000. **\$1,189.50 = \$79.30 * 15000 / 1000**

3. Round to nearest cent. **\$1,189.50**

4. Add \$24 policy fee. **\$1,213.50**

5. Multiply by appropriate modal factor (in this case monthly). \$101.21 = \$1,151.55 * .0834
6. Round to nearest cent to obtain final modal premium. \$101.21

¹ Unisex rates available in Montana only. Contact: GIWLTeam@aglife.com, with questions.

Maximum Payment Age

Premiums will be required to be paid to the maximum age shown in the below chart. Maximum payment age varies by age, gender and face amount.

	MA	\LE	FEMALE			
ISSUE AGE	Death benefit equal to or below \$15,000	Death benefit equal to or higher than \$15,001	Death benefit equal to or below \$15,000	Death benefit equal to or higher than \$15,001		
	MAXIMUM P	AYMENT AGE	MAXIMUM PAYMENT AGE			
50	80	81	90	90		
51	81	81	90	90		
52	81	81	90	89		
53	82	80	90	89		
54	82	80	90	88		
55	83	80	90	88		
56	83	81	90	88		
57	83	81	90	88		
58	84	81	90	88		
59	84	82	90	88		
60	85	83	90	89		
61	84	82	90	88		
62	84	82	90	88		
63	84	82	90	88		
64	84	82	90	88		
65	84	82	90	88		
66	84	83	90	88		
67	85	83	90	88		
68	85	84	90	89		
69	86	84	90	89		
70	86	85	90	89		
71	86	85	90	89		
72	86	85	90	88		
73	86	85	90	88		
74	86	85	90	88		
75	87	86	90	89		
76	86	85	89	88		
77	86	86	89	88		
78	87	87	89	88		
79	88	88	89	88		
80	89	89	89	89		



Premiums paid may exceed amount of coverage. For an estimate of the year the premiums may exceed the amount of coverage, divide the face amount by the annual premium.

Policies issued by American General Life Insurance Company (AGL), Houston, TX. Policy Forms: ICC20-20532, 20532, 20532-5, and 20532-10. Rider Numbers: ICC15-15200, 15200, 15200-7, 15200-10, 15200-35, ICC15-15201, 15201, 15201-7, 15201-9, 15201-10, and 15201-35. Issuing company AGL is responsible for financial obligations of insurance products and is a member of American International Group, Inc. (AIG). Guarantees are backed by the claims-paying ability of the issuing insurance company. AGL does not solicit business in the state of New York. Products may not be available in all states and product features and rates may vary by state

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