

OCCIDENTAL LIFE INSURANCE COMPANY OF NORTH CAROLINA  
WACO, TEXAS

REQUIRED DISCLOSURE AT TIME OF APPLICATION

**DISCLOSURE—ACCELERATED BENEFIT RIDER**

The accelerated benefit in this life insurance product may provide benefits to pay for long-term care services, but is NOT part of a long-term care or nursing home insurance policy and the amount this product pays you may not be enough to cover your medical, nursing home or other bills. **Unlike conventional life insurance proceeds, accelerated benefits payable under this rider COULD BE TAXABLE IN SOME CIRCUMSTANCES.** We recommend that you contact a tax advisor when making tax-related decisions about electing to receive and use benefits from an accelerated benefit product.

Receipt of accelerated benefits **MAY AFFECT MEDICAID AND SUPPLEMENTAL SECURITY INCOME (SSI) ELIGIBILITY.** The mere fact that you own a policy with an accelerated benefit rider may affect your eligibility for these government programs. In addition, exercising the option to accelerate death benefits and receiving those benefits before you apply for these programs, or while you are receiving government benefits, may affect your initial or continued eligibility. Contact the Medicaid Unit of your local Division of Medical Assistance and the Social Security Administration for more information.

**COVERED CONDITIONS—**

**Heart Attack**—The death of a portion of the heart muscle (myocardium) resulting from a blockage of one or more coronary arteries and resulting in a loss of the normal function of the heart. A Physician must furnish us in writing a diagnosis of the condition. This diagnosis must include documentation supported by clinical, radiological, histological, or laboratory evidence of the condition. The following are excluded: Angina, chest pains associated with restricted blood supply to the heart.

**Coronary Artery Bypass Graft (CABG)**—10% of the accelerated benefit will be paid for the first ever open chest surgery to correct narrowing or blockage of two or more coronary arteries with bypass grafts, either saphenous vein or internal mammary graft. The surgery must have been proven to be necessary by means of coronary angiography. A cardiologist must recommend surgery. The following are excluded: angioplasty, laser relief of an obstruction, and other intra-arterial procedures.

**Stroke**—A cerebral vascular incident caused by hemorrhage, embolism, thrombosis producing measurable neurological deficit persisting for at least 30 days following the occurrence of the stroke. The diagnosis must be supported by new changes on a CT or MRI scan. The following are excluded: neurological symptoms due to transient ischemic attack (TIA) or mini-stroke, migraine, cerebral injury resulting from trauma or hypoxia, vascular disease affecting the eye, optic nerve and vestibular function.

**Cancer**—Only those types of cancer manifested by the presence of a malignant tumor, characterized by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissue. Cancer includes: Leukemia, Malignant Lymphoma, Hodgkin's Disease (except Stage 1 Hodgkin's Disease). Diagnosis of cancer must be established according to the criteria of malignancy established by The American Board of Pathology after a study of the histocytologic architecture or pattern of the suspect tumor, tissue or specimen. The following are excluded: pre-malignant tumors or polyps, cancer in-situ (e.g. cervical dysplasia), transitional carcinoma of urinary bladder Stage 0, prostate cancer Stage A or equivalent TNM Classification (T1, T1a, T1b), colon cancer Dukes Stage A, all tumors in the presence of HIV, hyperkeratoses, basal cell and squamous skin cancers, malignant melanomas of the skin classified Clark Level 2 or less, or has a Breslow thickness measurement 0.75mm or less.

**Kidney Failure**—End stage kidney disease presented as chronic irreversible failure of both kidneys to function. The undergoing of regular renal dialysis or undergoing a renal transplant must evidence this. The following are excluded: single kidney failure, temporary kidney failure.

**Major Organ Transplant Surgery**—The actual undergoing as a recipient (human to human) of a transplant of the heart, lung, liver, pancreas, kidney or bone marrow. The transplant must be medically necessary and based on objective confirmation of organ failure.

**HIV Contracted Performing Occupational Duties as a Medical Professional Healthcare Worker**—A medical professional healthcare worker who in the performance of their occupational duties is exposed to and ultimately acquires positive HIV resulting from an accidental injury. The following are excluded: HIV infection as a result of IV drug use, sexual intercourse.

**Terminal Illness**—The insured must be suffering from a condition, which in the opinion of a physician will lead to death within 24 months or less.

**FACE AMOUNT**—In the Rider, the term "Face Amount" refers to the Face Amount under the Policy to which the Rider is attached.

**PREMIUM CHANGE**—The Company may change the premium for this Rider. The changed premium may be greater than or less than the Rider premium at issue but will not be greater than the maximum premium shown in the Benefit Description Page 3B of the Policy. The premium may not be changed before the end of the first five years and may not be changed more often than once a year thereafter. Notice of a change of premium will be sent to the Owner at least 30 days before the change becomes effective. Upon any Rider premium increase, the Owner has the option to: a) Pay the new Rider premium; or b) Reduce the Rider benefit proportionally. If the Owner does not elect a) above in writing within 60 days after notification of the premium increase, the Company will automatically reduce the benefit of this Rider Proportionally.

**ACCELERATED BENEFIT**—Upon receipt of proof of a qualifying event and written consent of all irrevocable beneficiaries and all assignees, we will pay an accelerated benefit. It will be paid in a single sum. The qualifying event must occur on or after the 30th day following the date of issue of this Rider. A benefit payable for a qualifying event caused by an accident is effective for accidents occurring on or after the date of issue of this Rider. The benefit will be the lesser of: (a) the percent, indicated in the Benefit Description Page of the Policy, of the Face Amount, or (b) \$250,000.

The applicable percentage shall be the lesser of a) or b) above divided by the Face Amount.

Then we will subtract: (a) the applicable percentage of any outstanding loan and loan interest due and unpaid on the date of the qualifying event; and (b) any premium due and unpaid which applies to a period prior to the date a qualifying event occurs.

On the date payment is made, the following will be reduced by the applicable percentage: 1) the Face Amount; 2) the Policy's base premium excluding the Policy fee (if any); 3) the cash value (if any); 4) any policy loans. The premium rate for any riders on the Policy will not be reduced. The accelerated benefit rider and its associated premium will terminate, unless the qualifying event for which payment was made is for Coronary Artery Bypass Graft. Upon payment of 10% of the accelerated benefit due to the occurrence of Coronary Artery Bypass Graft, the rider premium continues unchanged and future acceleration of any other benefit under the Rider will be reduced proportionately.

I have received a copy of this Disclosure Statement.

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

I certify that this Disclosure Statement has been presented to the applicant.

Agent: \_\_\_\_\_ Date: \_\_\_\_\_