TRANSAMERICA LIFE INSURANCE COMPANY

Home Office: [Cedar Rapids, Iowa]

Administrative Office: [1400 Centerview Drive, PO Box 8063, Little Rock, Arkansas 72203-8063]

(Hereinafter called "the Company," "we," "us," or "our")

ACCELERATED DEATH BENEFIT FOR CHRONIC CONDITION RIDER

(Living Benefit Rider)

(Death Benefit, Face Amount, Cash Values and Loan Values, if any, will be reduced if an Accelerated Death Benefit is paid.)

SPECIAL NOTICE

Benefits received under this Rider may be taxable as income. Whether any tax liability is incurred when benefits are paid under this Rider could depend on whether your employer has paid the premium, and how the Internal Revenue Service interprets applicable provisions of the Internal Revenue Code. As with any tax matter, you and any other recipient of this benefit should each consult an independent tax advisor to evaluate any tax impact of this benefit.

Receipt of an Accelerated Death Benefit may adversely affect eligibility for Medicaid or other government benefits or entitlements. Without exercising this option, the mere fact that this Rider is part of your contract will not, in and of itself, affect the eligibility for these government programs. However, exercising this option before you apply for these programs, or while you are receiving government benefits, may affect your continued eligibility. Contact the Medicaid Unit of the local Department of Public Welfare and/or the Social Security Administration Office for more information.

This Rider is attached to and made part of the contract as of the Rider Effective Date. It is issued in consideration of the Application and payment of any required initial premium. All provisions of the contract not in conflict with the provisions of this Rider will apply to this Rider. This Rider has no cash value.

NOTICE TO YOU, THE OWNER

FOR INFORMATION, OR TO MAKE A COMPLAINT, CALL [1-888-763-7474]

This Rider is not long term care insurance and does not provide long term care insurance, nor is it intended to replace long term care insurance coverage. We advise you to review carefully all limitations of this Rider, as well as those of the contract to which it is attached.

DEFINITIONS

In addition to the definitions contained in the contract, the following definitions apply to this Rider.

Activities of Daily Living – For the purposes of this Rider, each of the following activities is considered an Activity of Daily Living:

<u>Bathing</u> - The Insured's ability to wash himself or herself by sponge bath; or in a tub or shower, including the task of getting into and out of the tub or shower.

<u>Continence</u> – The Insured's ability to maintain control of bowel and bladder function; or, when unable to maintain control of bowel or bladder function, the ability to perform associated personal hygiene (including caring for catheter or colostomy bag).

<u>Dressing</u> - The Insured's ability to put on and take off all items of clothing and any necessary braces, fasteners or artificial limbs.

Eating - The Insured's ability to feed himself or herself by getting food into his or her body from a receptacle (such as a plate, cup or table) or by a feeding tube or intravenously.

<u>Toileting</u> – The Insured's ability to get to and from the toilet, to get on and off the toilet, and to perform associated personal hygiene.

Transferring - The Insured's ability to move into or out of a bed, chair or wheelchair.

Chronic Illness -

- 1. The inability, expected to be permanent, to perform, without Substantial Human Assistance, at least two Activities of Daily Living for a period of at least 90 days; **or**
- 2. Severe Cognitive Impairment that is expected to be permanent and that requires Substantial Supervision to protect the Insured from threats to his or her health and safety.

Death Benefit Amount – The amount of the Death Benefit in effect on the date immediately following the date the Insured first satisfies the Eligibility for Benefits provision.

Elimination Period – The number of consecutive days during which the Insured must meet the Eligibility for Benefits requirements listed under the Benefits provision. During the Elimination Period no benefits are payable under this Rider. The Elimination Period starts on the day the Insured's Chronic Illness begins, as stated in a Physician's certification. The Elimination Period for this Rider is shown in the Contract Data Pages. The Elimination Period needs to be satisfied only once during the Insured's lifetime.

Immediate Family Member – Anyone related to an Insured in the following manner: spouse, daughter, son, stepchild, father, mother, stepparent, sister, brother, stepsister, stepbrother, grandchild, grandparent, father-in-law, mother-in-law, or the spouse of any of these. The term "spouse" includes a common law marriage partner, domestic partner, or civil union partner, if legally recognized in the governing jurisdiction.

Medicare – The Health Insurance for the Aged Act, Title XVIII of the Social Security Amendments of 1965 as then constituted or later amended.

Physician -

- 1. A doctor of medicine or osteopathy as set forth in Section 1861(r)(1) of the Social Security Act, as amended, who is legally authorized to practice medicine and surgery within the United States by the jurisdiction in which he or she performs such function or action; and
- 2. Is not an Immediate Family Member.

Severe Cognitive Impairment – A deficiency in any of the following:

- 1. The Insured's short-term or long-term memory;
- 2. Orientation as to person, place and time;
- 3. Deductive or abstract reasoning; or
- 4. Judgment as it relates to safety awareness.

Severe Cognitive Impairment is established by clinical evidence and standardized tests that reliably measure the Insured's loss. Severe Cognitive Impairment requires a deficiency comparable to (and including) Alzheimer's disease and similar forms of irreversible dementia.

Substantial Human Assistance - Actual hands-on assistance by another individual.

Substantial Supervision – Continuous, arms-length supervision, including but not limited to verbal cueing by another individual to protect the Insured from harming himself, herself or others, or from threats to the Insured's health and safety.

Waiting Period – The period of time, immediately after the Rider Effective Date, which must be satisfied before any sickness or condition which causes Chronic Illness first manifests itself. The Waiting Period is shown in the Contract Data Pages. The Waiting Period does not apply to benefits payable for an Insured who has a Chronic Illness due to an Accident. For purposes of this provision, an Accident means a sudden, unexpected, and unintended injury that is independent of any illness or disease and occurs after the Rider Effective Date and while this Rider is in force.

BENEFITS

Eligibility for Benefits – After the Waiting Period has been satisfied, we will pay an Accelerated Death Benefit under this Rider after we receive written proof that the Insured has met <u>all</u> of the following conditions:

- 1. A Physician has certified that the Insured has a Chronic Illness;
- 2. The Insured has satisfied the Elimination Period; and
- 3. The contract to which this Rider is attached is in force.

Accelerated Death Benefit Options

You may choose one of the following options for submitting a claim for an Accelerated Death Benefit under this Rider:

Option 1 – Monthly Accelerated Death Benefit – You may request a monthly Accelerated Death Benefit equal to the applicable percentage of the Death Benefit Amount shown on the Contract Data Pages. This benefit is payable for each month the Insured satisfies the Eligibility for Benefits provision while this Rider is in force. After

submitting satisfactory proof of loss, in order to continue receiving the monthly benefit you must provide, every 90 days, a written certification by a Physician that the Insured continues to have a Chronic Illness.

Option 2 - One-Time Lump Sum Accelerated Death Benefit – In lieu of the monthly Accelerated Death Benefit, you may request a one-time lump sum Accelerated Death Benefit payment equal to the applicable percentage shown on the Contract Data Pages of the Death Benefit Amount. Upon payment of this lump sum benefit, your rights under this Rider will end and this Rider will terminate.

Waiver of Monthly Deductions – We will waive the monthly deductions for each contract month or partial contract month that you receive benefits under this Rider. If you elect the one-time lump sum Accelerated Death Benefit option, this waiver provision will not apply.

EFFECT ON INSURED'S DEATH BENEFIT

If the Owner receives Accelerated Death Benefit payments in accordance with this Rider, we will deduct any amounts paid under this Rider from the Death Benefit. The Beneficiary will receive any remaining amount of the Death Benefit after the Insured dies, provided the contract has not terminated. However, if the entire Death Benefit proceeds are paid under the terms of this Rider prior to the Insured's death, the Contract will terminate and there will be no Death Benefit payable upon the Insured's death.

Each Accelerated Death Benefit payment will reduce the following contract values: Death Benefit; Face Amount; Accumulation Value; Surrender Charge; Guaranteed Cash Value, if applicable; and outstanding Loan balance, if any, as explained below.

The Death Benefit will be reduced by the amount of the Accelerated Death Benefit.

The Face Amount will be reduced by an amount equal to the reduction in Death Benefit multiplied by the ratio of the Face Amount to the Death Benefit in effect immediately before the Accelerated Death Benefit payment is made.

The Accumulation Value will be reduced by an amount equal to the reduction in Death Benefit multiplied by the ratio of the Accumulation Value to the Death Benefit in effect immediately before the Accelerated Death Benefit payment is made.

The Surrender Charge will be reduced by an amount equal to the reduction in Death Benefit multiplied by the ratio of the Surrender Charge to the Death Benefit in effect immediately before the Accelerated Death Benefit payment is made.

The Guaranteed Cash Value, if applicable, will be reduced by an amount equal to the reduction in Death Benefit multiplied by the ratio of the Guaranteed Cash Value to the Death Benefit in effect immediately before the Accelerated Death Benefit payment is made.

The outstanding Loan balance, if any, will be proportionally repaid by an amount equal to the reduction in Death Benefit multiplied by the ratio of the outstanding Loan balance to the Death Benefit in effect immediately before the Accelerated Death Benefit payment is made. The amount of this Loan balance repayment will be deducted from the Accelerated Death Benefit payable to you.

If you elect monthly Accelerated Death Benefit payments under this Rider, the following conditions will apply during the period that such payments are being made.

- 1. You cannot change the Face Amount or the Death Benefit option of the Contract, or add any Riders.
- 2. We will not accept any premium payments.

If monthly Accelerated Death Benefit payments are made, we will provide a monthly report that shows the effect each benefit payment has on the contract values.

EXCLUSIONS AND LIMITATIONS

We will **not** pay Rider benefits if the Insured meets the requirements of the Eligibility for Benefits provision as a result of:

- 1. Any sickness condition that begins before or during the Waiting Period.
- 2. An intentionally self-inflicted injury or attempted suicide.
- 3. War or any act of war, declared or undeclared, or service in the armed forces of any country.

- 4. The Insured's alcohol, drug or other chemical dependence, except if the drug dependency is for a drug prescribed by a Physician in the course of treatment for an injury or sickness.
- 5. The Insured's commission of, or attempt to commit, a felony; or an injury that occurs because of the Insured's involvement in an illegal activity.

We will not pay an Accelerated Death Benefit on any other riders attached to the contract.

CLAIMS

The following Claims Procedures apply to this Rider.

Notice of Claim – Written notice of claim must be given to us at our Administrative Office or to our agent. Such notice should be made within 30 days after a Physician determines the Insured has a Chronic Illness. If it is not reasonably possible to give notice within that time, the claim may not be denied or reduced due to the delay, so long as notice is given as soon as reasonably possible.

Claim Forms – Claim forms should be used for filing proof of loss. We will send such form to the claimant within 15 days of receipt of notice of claim. If we fail to supply the proper claim forms within 15 days, you can give proof in writing, setting forth the nature and extent of the loss within the time stated in the proof of loss provision. You or a personal representative may obtain a claim form by calling our toll-free telephone number listed on the cover page of the contract. Such initial notice and ongoing written proof of loss must be sent within the time limit stated in the following paragraph.

Proof of Loss – Due written proof of loss must be given to us at our Administrative Office. We must receive the initial proof within 90 days after the expiration of the Elimination Period.

Failure to furnish such proof within such time will not invalidate nor reduce any claim if it was not reasonably possible to furnish such proof and it was furnished as soon as reasonably possible. In any event, the proof required must be given no later than one year from the time proof is otherwise required, unless the claimant was legally incapacitated.

If you submit a claim under the Monthly Accelerated Death Benefit option, we will require subsequent proof of loss to be submitted periodically after the Insured satisfies the Eligibility for Benefits provision. This means submitting, every 90 days, certification by a Physician that the Insured continues to have a Chronic Illness.

Physical Examinations – We have the right to have an Insured examined by a Physician of our choice as often as reasonably necessary while a claim is pending. We will pay for such examination.

Time of Payment of Claims – Benefits for a covered loss will be paid as soon as we receive due written Proof of Loss.

Payment of Claims – Benefits are payable to the Owner or a payee designated by the Owner.

Legal Actions - No legal action may be brought to recover under the contract within 60 days after written proof of loss has been provided to us as required nor more than three years from the time written proof of loss is required to be furnished.

GENERAL RIDER PROVISIONS

Consent For Benefit Payment – If there is an assignment of this contract on record or an irrevocable Beneficiary on record, we must obtain the consent of any assignee or irrevocable Beneficiary before any Rider benefit is paid.

Contestability – This Rider will be contestable on the same basis as the contract, during the lifetime of the Insured, for two years from the Rider Effective Date.

Suicide – If the Insured dies by suicide, while sane or insane, within two years from the Rider Effective Date, any premiums refunded under the Suicide Exclusion provision of the contract will be reduced by the amount of Accelerated Death Benefits paid, if any, under this Rider.

RIDER COST

The initial monthly charge and the guaranteed monthly charge for this Rider are shown in the Contract Data Pages. We may use monthly charges lower than the guaranteed monthly charge but will not use charges higher than the guaranteed amount.

RIDER EFFECTIVE DATE

This Rider becomes effective on the same date as the contract unless we inform the Owner in writing of a different date.

TERMINATION

This Rider will terminate on the earliest of the following dates or events:

- 1. The date the contract terminates;
- 2. The date the contract Lapses, subject to the Grace Period;
- 3. The date the Owner requests termination;
- 4. The date the Insured dies;
- 5. The date on which cumulative monthly Accelerated Death Benefit payments equal 100% of the Death Benefit Amount, subject to any rights under an optional Extension of Benefits Rider;
- 6. The date on which we pay a one-time lump sum Accelerated Death Benefit payment in lieu of any monthly Accelerated Death Benefit:
- 7. The date a Nonforfeiture Option under the contract, if any, becomes effective.

This Rider is signed for the Company at our Home Office to take effect on the Rider Effective Date.

[General Counsel and Secretary]

[President]