Effective on or about November 1, 2019, based on changes to the underlying fund portfolio, the following portfolio name will change:

<table>
<thead>
<tr>
<th>CURRENT NAME</th>
<th>NEW NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transamerica BlackRock Equity Smart Beta 40 VP</td>
<td>Transamerica BlackRock iShares Edge 40 VP</td>
</tr>
</tbody>
</table>

Effective on or about November 1, 2019 (the “Merger Date”), based on changes to the underlying fund portfolios, a fund merger will apply to the following portfolios:

<table>
<thead>
<tr>
<th>EXISTING PORTFOLIO NAME</th>
<th>ACQUIRING PORTFOLIO NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transamerica Torray Concentrated Growth VP</td>
<td>Transamerica WMC US Growth VP</td>
</tr>
<tr>
<td>Transamerica Jennison Growth VP</td>
<td>Transamerica Morgan Stanley Capital Growth VP</td>
</tr>
</tbody>
</table>

Effective on or about October 25, 2019 (the “Closure Date”), the Existing Portfolios will be closed to new investments:

“Closed to new investments” means no one can allocate additional amounts (either through policy transfers or additional premiums) to the Existing Portfolio after the Closure Date.

We have been informed that on or about November 1, 2019, the underlying funds referenced above under Existing Portfolio will merge into the Acquiring Portfolio. If you would like to transfer out of the Existing or Acquiring Portfolio prior to or after the merger date, you may transfer your policy value to any of the portfolios listed in your Prospectus.

Please make sure that a transfer request does not violate any allocation guidelines and/or restrictions in place for your policy applicable to allocation instructions for premium payments or other purposes (for example, dollar cost averaging or asset rebalancing). As of the start of business on the Merger Date, you may no longer use automated transfer features such as asset rebalancing or dollar cost averaging with the Existing Portfolio. If you are using an automated transfer feature such as asset rebalancing or dollar cost averaging with the Existing Portfolio and do not want to allocate to the Acquiring Portfolio, you should contact us immediately to make alternate arrangements.

You will not be charged for the transfer made due to the merger. In addition, if you reallocate your policy value to another portfolio due to the merger, you will not be charged for the transfer to another available portfolio if made prior to the merger or within 30 days after the merger date. This reallocation also will not count as a transfer for purposes of any free transfers that you receive each policy year.

* * *

Please Retain this Supplement for Future Reference
An Individual Flexible Premium Variable Life Insurance Policy

This prospectus describes the Transamerica® Freedom Elite Builder II, a flexible premium variable life insurance policy (the “Policy”). You can allocate your Policy’s cash value to the fixed account (which credits a specified guaranteed interest rate) and/or to the WRL Series Life Account, which invests through its subaccounts in portfolios of the Transamerica Series Trust – Initial Class (“Series Trust”), the Fidelity Variable Insurance Products Funds– Service Class 2 (“Fidelity VIP Funds”), the ProFunds, the Access One Trust (“Access Trust”), the AllianceBernstein Variable Products Series Fund, Inc. (“AllianceBernstein”), and the Franklin Templeton Variable Insurance Products Trust (“Franklin Templeton”) (collectively, the “funds”). Please refer to the next page of this prospectus for the list of portfolios available to you under the Policy. Note: If your Policy was applied for before September 22, 2008 and issued in the State of New Jersey before January 1, 2009, then you may not allocate your Policy’s cash value to the fixed account. Note: Sales of this policy were discontinued for new purchasers effective March 29, 2018.

The value of your Policy that is allocated to the subaccounts may fluctuate. You bear the risk that your Policy value may decrease.

If you already own a life insurance policy, it may not be to your advantage to buy additional insurance or to replace your policy with the Policy described in this prospectus. Additionally, it may not be to your advantage to borrow money to purchase the Policy or to take withdrawals from another policy you own to make premium payments under the Policy.

Prospectuses for the underlying portfolios must accompany this prospectus. Certain portfolios may not be available in all states. Please read these documents before investing and save them for future reference.

The Policy is not a bank deposit. The Policy is not insured or guaranteed by the Federal Deposit Insurance Corporation or any other government agency.
Please note the change regarding your fund reports:

We want to let you know that beginning January 1, 2021, we will no longer mail copies of shareholder reports for funds in your portfolio. This change is permitted by regulations adopted by the Securities and Exchange Commission. Instead, the reports will be made available on our website. We’ll let you know by mail each time a report is posted. The notification will have a URL for accessing the report.

If you’ve already elected to receive documents from us electronically, you’re not affected by this change. You’re already receiving an email with a link to the reports so there’s nothing you need to do.

You do have the option of continuing to receive paper copies of all future shareholder reports free of charge. If you’d like this option, give us a call at the number on your account statement.

The Securities and Exchange Commission has not approved or disapproved these securities or passed upon the adequacy of this prospectus. Any representation to the contrary is a criminal offense.
<table>
<thead>
<tr>
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<tbody>
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<td>➢ Transamerica Aegon U.S. Government Securities VP</td>
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<tr>
<td>➢ Transamerica Barrow Hanley Dividend Focused VP</td>
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<td>➢ Transamerica BlackRock Global Allocation VP</td>
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<td>➢ Transamerica BlackRock Global Real Estate Securities VP</td>
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<td>➢ TRANSAmericA GReYSTONE INTERNATIONAL GROWTH</td>
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<td>➢ TRANSAmericA JANUS BALANCED VP</td>
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<td>➢ TRANSAmericA JANUS MID-CAP GROWTH VP</td>
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<td>➢ TRANSAmericA JENNISON GROWTH VP</td>
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<td>➢ TRANSAmericA JPMORGAN ASSET ALLOCATION – GROWTH VP</td>
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<td>➢ TRANSAmericA JPMORGAN ASSET ALLOCATION – MODERATE GROWTH VP</td>
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<tr>
<td>➢ TRANSAmericA JPMORGAN ASSET ALLOCATION – MODERATE VP</td>
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<tr>
<td>➢ TRANSAmericA JPMORGAN CORE BOND VP</td>
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<td>➢ TRANSAmericA JPMORGAN ENHANCED INDEX VP</td>
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<td>➢ TRANSAmericA JPMORGAN INTERNATIONAL MODERATE GROWTH VP</td>
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<td>➢ TRANSAmericA JPMORGAN TACTICAL ALLOCATION VP</td>
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<td>➢ TRANSAmericA MANAGED RISK – BALANCED ETF VP</td>
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<tr>
<td>➢ TRANSAmericA MANAGED RISK – GROWTH ETF VP</td>
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<tr>
<td>➢ TRANSAmericA MORGAN STANLEY CAPITAL GROWTH VP</td>
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<td>➢ TRANSAmericA PIMCO TACTICAL – CONSERVATIVE VP</td>
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<td>➢ AB BALANCED WEALTH STRATEGY PORTFOLIO</td>
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<td>➢ FRANKLIN TEMPLETON Variable Products Trust</td>
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<td>➢ ProFund VP TELECOMMUNICATIONS</td>
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<td>➢ ProFund VP ULTRANASDAQ - 100</td>
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<td>➢ ProFund VP U.S. GOVERNMENT PLUS</td>
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<td>➢ ProFund VP UTILITIES</td>
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POLICY BENEFITS/RISKS SUMMARY

This summary describes the Policy’s important benefits and risks. The sections in this prospectus following this summary discuss the Policy in more detail. Additional discussion is also included in the Statement of Additional Information (“SAI”). For your convenience, we have provided a Glossary at the end of this prospectus that defines certain words and phrases used in this prospectus.

POLICY BENEFITS

THE POLICY IN GENERAL

- The Transamerica® Freedom Elite Builder II is an individual flexible premium variable life insurance policy, which gives you the potential for long-term life insurance coverage with the opportunity for tax-deferred accumulation of cash value.
- The Policy is designed to be long-term in nature in order to provide significant life insurance benefits for you. You should only purchase the Policy if you have the financial ability to keep it in force for a substantial period of time. You should consider the Policy in conjunction with other insurance that you own.
- We offer three (3) bands of coverage under the Policy depending on the initial specified amount of insurance you have selected and any adjustments to the specified amount after issue:
  - Band 1: $50,000 - $249,999
  - Band 2: $250,000 - $499,999
  - Band 3: $500,000 and above
- Certain Policy charges are based on the band of coverage. Generally, the higher the band the lower the charges.
- Your Policy offers supplemental riders, and depending on which riders are selected, certain charges may be deducted from the Policy’s cash value as part of the monthly deductions.
- You will have a free look period once we deliver your Policy. Please see the section of this prospectus entitled “Canceling a Policy” for a description of the free look period.
- You may apply for an increase in the specified amount at any time before the insured’s 86th birthday, and you may decrease the specified amount after your Policy has been in force for three years, but you may not increase and decrease the specified amount in the same Policy year. If approved, the change will take effect on the next Policy Monthiversary. Changes are not allowed after the insured reaches age 95. The amount of your decrease may be limited. For further details, please see “Death Benefits – Increasing/Decreasing the Specified Amount.”
- You can invest your net premium in, and transfer your cash value to, subaccounts. Your cash value will fluctuate with the daily performance of the portfolios in which the subaccounts invest.
- You may place your money in the fixed account where it earns an interest rate declared in advance for a specified period (at least 2% annual interest), or in any of the subaccounts of the WRL Series Life Account (the “Separate Account”) which are described in this prospectus. The fixed account is not available to you if your Policy was applied for before September 22, 2008 and was issued before January 1, 2009 in the State of New Jersey.
- The Policy’s cash value will increase or decrease depending on the investment performance of the subaccounts, the premiums you pay, the fees and charges that we deduct, the interest we credit to the fixed account, and the effects of any Policy transactions (such as transfers, loans and cash withdrawals). Investment returns are not guaranteed.

The Policy is not suitable as a short-term investment or savings vehicle.

- Your Policy has a no lapse guarantee which means that as long as certain requirements are met, your Policy will remain in force and no grace period will begin until the no lapse date shown on your Policy schedule page. This is true even if your net surrender value is too low to pay the monthly deductions as long as, on any Monthiversary, you have paid premiums (minus any cash withdrawals, minus any outstanding loan amount including any accrued loan interest) that equal or exceed the sum of the minimum monthly guarantee premiums in effect for each month from the Policy date up to and including the current month. The no lapse guarantee is discussed in more detail in the section of this prospectus entitled “Policy Lapse and Reinstatement.”
There may be adverse consequences should you decide to surrender your Policy early, such as payment of a surrender charge during the first 10 Policy years and for 10 years from the date of any increase in the specified amount of life insurance coverage that you select.

**FLEXIBILITY**

The Policy is designed to be flexible to meet your specific circumstances and life insurance needs. Within certain limits, you can:

- Choose the timing, amount and frequency of premium payments.
- Change the Death Benefit Option.
- Increase or decrease the amount of life insurance coverage.
- Change the beneficiary.
- Transfer cash value among investment options available under the Policy.
- Take a loan against the Policy.
- Take cash withdrawals or surrender the Policy.

**DEATH BENEFIT**

If the insured dies while the Policy is in force, we will pay a death benefit to the named beneficiary(ies) subject to applicable law and in accordance with the terms of the Policy. The amount of the death benefit generally depends on the specified amount of insurance that you select, the death benefit option that you choose, your Policy’s cash value, and any additional life insurance provided by riders that you purchase. The death benefit proceeds are reduced by any outstanding loan amount, including accrued loan interest, and any charges that are due and unpaid if the insured dies during the grace period.

You may choose one of three Death Benefit Options.

- **Under Option A**, the death benefit is the greatest of:
  - The specified amount; or
  - The minimum death benefit under the Guideline Premium Test or Cash Value Accumulation Test, whichever has been selected; or
  - The amount required for the Policy to qualify as a life insurance policy under Section 7702 of the Internal Revenue Code.

- **Under Option B**, the death benefit is the greatest of:
  - The specified amount plus the Policy’s cash value on the date of the insured's death; or
  - The minimum death benefit under the Guideline Premium Test or Cash Value Accumulation Test, whichever you have selected; or
  - The amount required for the Policy to qualify as a life insurance policy under Section 7702 of the Internal Revenue Code.

- **Under Option C**, the death benefit is the greatest of:
  - The amount payable under Option A; or
  - The specified amount, multiplied by an age-based “factor,” plus the Policy’s cash value on the date of the insured’s death; or
  - The amount required for the Policy to qualify as a life insurance policy under Section 7702 of the Internal Revenue Code.

You may choose between two federal income tax compliance tests for life insurance policies to calculate the minimum death benefit:

- Cash Value Accumulation Test—generally does not limit the amount of premiums you can pay on your Policy.
- Guideline Premium Test—limits the amount of premiums you can pay on your Policy, and the minimum death benefit will generally be smaller than under the Cash Value Accumulation Test.
The test you choose will generally depend on the amount of premiums you want to pay relative to your desired death benefit. **Note: You may not change tests.**

Further information regarding the death benefit options and the federal income tax compliance tests is included in the section below entitled “Death Benefit.” **You should consult your tax advisor when choosing the tax test.**

**CASH VALUE**

Cash value is the sum of the value of your investments in the subaccounts plus the value of the fixed account (including the loan reserve account), on any business day. It is not guaranteed – it depends on the performance of the investment options that you have chosen, the timing and the amount of premium payments you have made, Policy charges deducted, and how much you have withdrawn from the Policy.

You can access your cash value in several ways:

- **Withdrawals** – You can withdraw part of your Policy’s net surrender value once each year after the first Policy year. Withdrawals are described in more detail in the section of this prospectus entitled “Surrenders and Cash Withdrawals – Cash Withdrawals.”
- **Loans** – After the first Policy year, you can take out a loan from the Policy using your Policy’s net surrender value as security. Loans and loan interest rates are described in more detail in the section of this prospectus entitled “Loans.”
- **Surrender** – You can surrender or cash in your Policy for its net surrender value while the insured is alive. Surrenders are described in more detail in the section in this prospectus entitled “Surrenders and Cash Withdrawals – Surrenders.” **You may pay a substantial surrender charge.**

**INVESTMENT OPTIONS**

You can choose to allocate your net premiums and cash value among the subaccounts, each of which invests in a corresponding portfolio of the various underlying funds. Your Policy also offers a fixed account option, which provides a guaranteed minimum rate of interest.

You can transfer your cash value among the fixed account and the subaccounts during the life of your Policy. You can accumulate cash value among the fixed account and the subaccounts without paying any current income tax. We may limit the number of transfers out of the fixed account and, in some cases, may limit your transfer activity to deter disruptive trading and market timing. We may charge a $25 transfer processing fee for each transfer after the first 12 transfers in a Policy year. For more details, please refer to the section entitled "Transfers" in this prospectus.

**Note:** If your Policy was applied for before September 22, 2008, and issued in the State of New Jersey before January 1, 2009, then you may not direct or transfer any premiums or cash value to the fixed account.

**TAX INFORMATION**

We intend the Policy to qualify as a life insurance contract under the Internal Revenue Code so that the death benefit generally should not be taxable income to the beneficiary. If your Policy is not a Modified Endowment Contract (“MEC”) you will generally not be taxed on the gain in the Policy unless you take a cash withdrawal in excess of your basis in the Policy. As well, if your Policy is not a MEC, upon full surrender, any amount by which the proceeds we pay (including amounts we use to discharge any policy loan and unpaid loan interest) exceed your basis in the Policy will be treated as a distribution and subject to federal income tax. If your Policy is a MEC, cash withdrawals, loans, assignments, and pledges are treated when made first as taxable income to you to the extent of gain then in the policy and then as non-taxable recovery of basis. In addition, such gains may be subject to a 10% penalty tax if received before age 59½. Please refer to the section of this prospectus entitled “Federal Income Tax Considerations” for more details.

**RISKS OF YOUR POLICY**

**LONG-TERM FINANCIAL PLANNING**

The Policy is designed to help meet long-term financial objectives by paying a death benefit to family members and/or other named beneficiaries. The Policy is not suitable as a short-term savings vehicle. The Policy may not be the right
kind of policy if you plan to withdraw money or surrender the Policy for short-term needs. A charge may be assessed on withdrawals. **You may pay substantial charges if you surrender your Policy.** See the “Fee Tables” section of this prospectus and refer to your Policy for charges assessed when taking cash withdrawals or surrendering your Policy.

Please discuss your insurance needs and financial objectives with your registered representative.

**RISK OF AN INCREASE IN CURRENT FEES AND EXPENSES**

Certain fees and expenses are currently assessed at less than their guaranteed maximum levels. In the future, these charges may be increased up to the guaranteed (maximum) levels. If fees and expenses are increased, you may need to increase the amount and/or frequency of premiums to keep the Policy in force.

**INVESTMENT RISKS**

If you invest your Policy’s cash value in one or more subaccounts, then you will be subject to the risk that investment performance of the subaccounts will be unfavorable and that your cash value will decrease. Also, we deduct Policy fees and charges from your cash value, which can significantly reduce your cash value. During times of poor investment performance, this deduction will have an even greater impact on your cash value. You could lose everything you invest and your Policy could lapse without value, unless you pay additional premiums. If you allocate premiums to the fixed account, we credit your fixed account value with interest at a rate declared by us. You assume the risk that the interest rate on the fixed account may decrease, although it will never be lower than the guaranteed minimum annual effective rate of 2%.

**RISKS OF MANAGING GENERAL ACCOUNT ASSETS**

The general account assets of Transamerica Premier Life Insurance Company (“TPLIC”; “Transamerica Premier”; the “Company”) are used to support the payment of the death benefit under the Policies. To the extent that Transamerica Premier is required to pay amounts in addition to the Policy’s subaccount value under the death benefit, such amounts will come from general account assets. You should be aware that the general account assets are exposed to the risks normally associated with a portfolio of fixed-income securities, including interest rate, option, liquidity and credit risk, and are also subject to the claims of Transamerica Premier’s general creditors. Transamerica Premier’s financial statements contained in the Statement of Additional Information include a further discussion of risks inherent in the general account investments.

**PREMIUM PAYMENTS**

If you choose the Guideline Premium Test, the federal tax laws limit the premium payments you can make in relation to your Policy’s Death Benefit. We may refuse all or part of a premium payment that you make, or remove all or part of a premium from your Policy and return it to you with earnings under certain circumstances to maintain qualification of the Policy as a life insurance contract for federal income tax purposes. Please refer to the section in this prospectus entitled “Premiums” for more details.

**LAPSE**

Your Policy will stay in force as long as the net surrender value is sufficient to cover your monthly deductions and Policy charges, or as long as the no lapse guarantee is in effect. Insufficient premium payments, poor investment performance, withdrawals, and unpaid loans or loan interest may cause your Policy to lapse – which means you will no longer have insurance coverage. A Policy lapse may have adverse tax consequences. There are costs associated with reinstating a lapsed Policy. For a detailed discussion of your Policy’s Lapse and Reinstatement provisions, please refer to the section of this prospectus entitled “Policy Lapse and Reinstatement.”

**WITHDRAWALS AND LOANS**

Making a withdrawal or taking a loan may:

- Reduce your Policy’s specified amount.
- Reduce the death benefit proceeds paid to your beneficiary.
- Make your Policy more susceptible to lapsing.
- Trigger federal income taxes and possibly a penalty tax.
Cash withdrawals will reduce your cash value. Withdrawals, especially those taken during periods of poor investment performance by the subaccounts, could considerably reduce or eliminate some benefits or guarantees of the Policy. Federal income taxes and a penalty tax may apply to loans, cash withdrawals and surrenders. Please see the section of this prospectus entitled “Federal Income Tax Considerations.”

Be sure to plan carefully before using these Policy benefits. For a detailed description of withdrawals and loans, and any associated risks, please see the sections of this prospectus entitled “Surrenders and Cash Withdrawals – Cash Withdrawals” and/or “Loans.”

**SURRENDERS**

If you surrender your Policy during the first 10 Policy years (or during the 10 year period following an increase in specified amount) you will pay a surrender charge. The surrender charge may be significant. Federal income tax and/or a penalty tax may also apply. Please see the section of this prospectus entitled “Federal Income Tax Considerations.”

**TAX CONSEQUENCES OF WITHDRAWALS, SURRENDERS AND LOANS**

You may be subject to income tax if you take any withdrawals or surrender the Policy, or if your Policy lapses and you have not paid any outstanding Policy indebtedness. If your Policy is a MEC, cash withdrawals, surrenders, assignments, pledges, and loans that you receive or make during the life of the Policy may be taxable and subject to a federal tax penalty equal to 10% of the taxable amount if taken prior to reaching age 59½ or older. Note: If you have not repaid a loan prior to surrender, the loan will be treated as a distribution upon surrender and taxed accordingly. Other tax issues to consider when you own a life insurance policy are described in more detail in the section of this prospectus entitled “Federal Income Tax Considerations.”

*Note: You should consult with your own qualified tax advisor to apply the law to your particular circumstances.*

**PORTFOLIO RISKS**

A comprehensive discussion of the risks of each portfolio may be found in each portfolio’s prospectus within the corresponding fund’s prospectuses. Please refer to these prospectuses for more information.

*There is no assurance that any portfolio will meet its investment objective.*

**FEE TABLES**

The following tables describe the types of fees and expenses that you will pay when buying, owning and surrendering your Policy. *Please Note: We have presented two versions of each table. Section A includes the fee tables for Policies that are applied for on or after September 22, 2008, regardless of when such Policies are issued, and are based on the Commissioners 2001 Standard Ordinary Tobacco and Non-Tobacco Mortality Tables (“2001 C.S.O. Tables”). Section B includes the fee tables for Policies that were applied for before September 22, 2008 and issued before January 1, 2009, and are based on the Commissioners 1980 Standard Ordinary Tobacco and Non-Tobacco Mortality Tables (“1980 C.S.O. Tables”). If the amount of a charge depends on the personal characteristics of the insured or the owner, then the fee table lists the minimum and maximum charges we assess under the Policy, and the fees and charges of a representative insured with the characteristics set forth below. These charges may not be representative of the charges you will pay. *Note: The representative insured has not been updated since the final year the Policy was offered for new sales.*
SECTION A
FEE TABLES FOR POLICIES APPLIED FOR ON OR AFTER SEPTEMBER 22, 2008
(BASED ON THE 2001 C.S.O. TABLES)
FOR POLICIES APPLIED FOR ON OR AFTER SEPTEMBER 22, 2008

The first table describes the types of fees and expenses that you will pay when buying or owning the Policy, paying premiums, making cash withdrawals from the Policy, surrendering the Policy, or transferring Policy cash value among the subaccounts and the fixed account. This page describes the Premium Expense Charges and the Cash Withdrawal Charge for all policies except those issued to residents of Puerto Rico. Please see the next page for the fees and expenses that are applicable for Policies issued to residents of Puerto Rico.

<table>
<thead>
<tr>
<th>Transaction Fees</th>
<th>Amount Deducted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Charge</td>
<td>When Charge is Deducted</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Premium Expense Charge</td>
<td>Upon payment of each premium</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash Withdrawal Charge&lt;sup&gt;2&lt;/sup&gt;</td>
<td>Upon withdrawal</td>
</tr>
</tbody>
</table>

<sup>1</sup>The Company reserves the right at any time to change the current charge, but never to a level that exceeds the guaranteed charge.

<sup>2</sup>When we incur the expense of expedited delivery of your cash withdrawal or complete surrender payment, we currently assess the following additional charges: $20 for overnight delivery ($30 for Saturday delivery); and $50 for wire service. You can obtain further information about these administrative charges by contacting our administrative office.
For Policies Applied for on or after September 22, 2008

For Policies issued to residents of Puerto Rico: This table describes the Premium Expense Charges and Cash Withdrawal Charges that are applicable to your Policy.

<table>
<thead>
<tr>
<th>Charge</th>
<th>When Charge is Deducted</th>
<th>Guaranteed Charge</th>
<th>Current Charge¹</th>
</tr>
</thead>
<tbody>
<tr>
<td>Premium Expense Charge</td>
<td>Upon payment of each premium</td>
<td><strong>For Policies Issued to Residents of Puerto Rico Only:</strong>&lt;br&gt;First 10 Policy years: 12% of premiums paid on Policy with a specified amount up to $249,999; 9.0% on Policy with a specified amount from $250,000 - $499,999; and 6.0% with a specified amount of $500,000 or more.&lt;br&gt;Policy year 11+: 8.5% with a specified amount up to $499,999; and 6.0% with a specified amount of $500,000 or more.</td>
<td><strong>For Policies Issued to Residents of Puerto Rico Only:</strong>&lt;br&gt;First 10 Policy years: 10% of premiums paid on Policy with a specified amount up to $249,999; 7.0% on Policy with a specified amount from $250,000 - $499,999; and 4.0% with a specified amount of $500,000 or more.&lt;br&gt;Policy year 11+: 6.5% with a specified amount up to $499,999; and 4.0% with a specified amount of $500,000 or more.</td>
</tr>
<tr>
<td>Cash Withdrawal Charge²</td>
<td>Upon withdrawal</td>
<td>2.0% of the amount withdrawn, not to exceed $25</td>
<td>2.0% of the amount withdrawn, not to exceed $25</td>
</tr>
</tbody>
</table>
FOR POLICIES APPLIED FOR ON OR AFTER SEPTEMBER 22, 2008

<table>
<thead>
<tr>
<th>Charge</th>
<th>When Charge is Deducted</th>
<th>Guaranteed Charge</th>
<th>Current Charge¹</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Surrender Charge³</strong></td>
<td>Upon full surrender of the Policy during the first 10 Policy years or during the first 10 years from the date of any increase in the specified amount (whether requested or an increase generated by the Inflation Fighter Rider Level Premium)</td>
<td>$ 57.00 per $1,000 of specified amount during the first Policy year</td>
<td>$ 57.00 per $1,000 of specified amount during the first Policy year</td>
</tr>
<tr>
<td><strong>Maximum Charge⁴</strong></td>
<td></td>
<td>$ 57.00 per $1,000 of specified amount during the first Policy year</td>
<td>$ 57.00 per $1,000 of specified amount during the first Policy year</td>
</tr>
<tr>
<td><strong>Minimum Charge⁵</strong></td>
<td></td>
<td>$ 11.58 per $1,000 of specified amount during the first Policy year</td>
<td>$ 11.58 per $1,000 of specified amount during the first Policy year</td>
</tr>
<tr>
<td><strong>Initial charge for a male insured, issue age 30, in the preferred-elite non-tobacco use class</strong></td>
<td></td>
<td>$ 16.95 per $1,000 of specified amount during the first Policy year</td>
<td>$ 16.95 per $1,000 of specified amount during the first Policy year</td>
</tr>
<tr>
<td><strong>Transfer Charge⁶</strong></td>
<td>Upon transfer</td>
<td>$25 for each transfer in excess of 12 per Policy year</td>
<td>$25 for each transfer in excess of 12 per Policy year</td>
</tr>
<tr>
<td><strong>Living Benefit Rider⁷ (an Accelerated Death Benefit)</strong></td>
<td>When rider is exercised</td>
<td>Discount Factor</td>
<td>Discount Factor</td>
</tr>
<tr>
<td><strong>Monthly Policy Charge</strong></td>
<td>Monthly, on the Policy date and on each Monthiversary until the insured reaches attained age 111</td>
<td>$10.00 per month during the first Policy year, and $12.00 thereafter through attained age 110; $0 starting with attained age 111</td>
<td>$10.00 per month through attained age 110; $0 starting with attained age 111</td>
</tr>
</tbody>
</table>

³ The surrender charge will vary based on the issue age, sex and underwriting class of the insured on the Policy date and at the time of any increase in the specified amount. Each increase in specified amount will have its own 10 year surrender charge period starting on the date of the increase. (Note: Only the increase in specified amount is subject to the additional 10 year surrender charge period.) The surrender charge for each increase in specified amount (“layer”) is calculated as the surrender charge per $1,000 of specified amount multiplied by the number of thousands of dollars of specified amount in the layer, multiplied by the surrender charge factor. The surrender charge factor for the Policy and each layer will be 1.00 at issue and will decrease until it reaches zero at the end of the 10th Policy year after the Policy date (or date of any specified amount increase). The surrender charge shown in the table is rounded up. The charges shown in the table may not be typical of the charges you will pay. Please see the example in the “Surrender Charge” section of this prospectus. More detailed information about the surrender charges applicable to you is available from your registered representative.

⁴ This maximum surrender charge is based on an insured with the following characteristics: female, issue age 85, in the standard tobacco use underwriting class. This maximum charge may also apply to insureds with other characteristics.

⁵ This minimum surrender charge is based on an insured with the following characteristics: female, issue age 0, in the juvenile underwriting class. This minimum charge may also apply to insureds with other characteristics.

⁶ The first 12 transfers per Policy year are free.

⁷ We do not assess an administration charge for this rider, however, if the rider is exercised, we do reduce the single sum benefit by a discount factor to compensate us for income lost due to the early payment of the death benefit. The discount factor is based on the current yield on 90-day U.S. Treasury bills or the 2.75% interest rate charged on Policy loans, whichever is greater. For further information about the Living Benefit Rider, including a numerical example showing the calculation of a discounted single sum benefit and the impact of acceleration of a portion of the death benefit available under a Policy on any remaining death benefit and cash value, please see the “Supplemental Benefits (Riders)” section of this prospectus.
The table below describes the types of fees and expenses that you will pay periodically during the time that you own the Policy, not including portfolio fees and expenses.

<table>
<thead>
<tr>
<th>Charge</th>
<th>When Charge is Deducted</th>
<th>Amount Deducted</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cost of Insurance</strong>&lt;sup&gt;9&lt;/sup&gt; (without Extra Ratings)&lt;sup&gt;9&lt;/sup&gt;</td>
<td>Monthly, on the Policy date and on each Monthiversary until the insured reaches attained age 111</td>
<td>Guaranteed Charge</td>
</tr>
<tr>
<td><strong>Maximum Charge</strong>&lt;sup&gt;10&lt;/sup&gt;</td>
<td></td>
<td>$ 49.94 per $1,000 of net amount at risk per month&lt;sup&gt;11&lt;/sup&gt;</td>
</tr>
<tr>
<td><strong>Minimum Charge</strong>&lt;sup&gt;12&lt;/sup&gt;</td>
<td></td>
<td>$ 0.02 per $1,000 of net amount at risk per month&lt;sup&gt;11&lt;/sup&gt;</td>
</tr>
<tr>
<td><strong>Initial Charge for a male insured, issue age 30, in the preferred elite non-tobacco use class, Band 2</strong></td>
<td></td>
<td>$ 0.09 per $1,000 of net amount at risk per month&lt;sup&gt;11&lt;/sup&gt;</td>
</tr>
</tbody>
</table>

<sup>8</sup> Cost of insurance charges are based on a number of factors, including, but not limited to: the insured’s issue age, sex and underwriting class, and the Policy’s specified amount, policy duration, and the amount at risk. Cost of insurance rates generally will increase each year with the age of the insured. Cost of insurance rates are generally lower for each higher band of specified amount. For example, Band 2 (specified amounts $250,000 - $499,999) generally has lower cost of insurance rates than those of Band 1 (specified amounts less than $250,000). The cost of insurance rates shown in the table may not be representative of the charges you will pay. Your Policy’s schedule page will indicate the guaranteed cost of insurance charges applicable to your Policy. You can obtain more detailed information concerning your cost of insurance charges by contacting your registered representative.

<sup>9</sup> We may place an insured in a substandard underwriting class with extra ratings that reflect higher mortality risks and that result in higher cost of insurance rates. If the insured possesses additional mortality risks, then we may add a surcharge to the cost of insurance rates up to a total charge of $83.33 monthly per $1,000 of net amount at risk.

<sup>10</sup>This maximum charge is based on an insured with the following characteristics: male, issue age 35, standard tobacco class, with an initial specified amount of less than $250,000 (Band 1) and in the 76<sup>th</sup> Policy year. This maximum charge may also apply to insureds with other characteristics.

<sup>11</sup>The net amount at risk equals the death benefit on a Monthiversary, minus the cash value on such Monthiversary.

<sup>12</sup>This minimum charge is based on an insured with the following characteristics: female, issue age 5, juvenile class, with an initial specified amount of $500,000 or higher (Band 3) and in the 1st Policy year. This minimum charge may also apply to insureds with other characteristics.
### Periodic Charges Other Than Portfolio Operating Expenses

<table>
<thead>
<tr>
<th>Charge</th>
<th>When Charge is Deducted</th>
<th>Amount Deducted</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Monthly Per Unit Charge</strong>&lt;sup&gt;13&lt;/sup&gt;</td>
<td>Monthly, for up to 10 years on and after the Policy date, and on any increase in specified amount</td>
<td>Guaranteed Charge</td>
</tr>
<tr>
<td>Maximum Charge&lt;sup&gt;14&lt;/sup&gt;</td>
<td>$0.16 per $1,000 of specified amount per month</td>
<td>$0.16 per $1,000 of specified amount per month</td>
</tr>
<tr>
<td>Minimum Charge&lt;sup&gt;15&lt;/sup&gt;</td>
<td>$0.08 per $1,000 of specified amount per month</td>
<td>$0.08 per $1,000 of specified amount per month</td>
</tr>
<tr>
<td><strong>Initial Charge for an insured, issue age 30</strong></td>
<td>$0.10 per $1,000 of specified amount per month</td>
<td>$0.10 per $1,000 of specified amount per month</td>
</tr>
<tr>
<td><strong>Mortality and Expense Risk Charge</strong></td>
<td>Daily</td>
<td>Annual rate of 0.90% of average daily net assets of each subaccount in which you are invested</td>
</tr>
<tr>
<td><strong>Loan Interest Spread</strong>&lt;sup&gt;16&lt;/sup&gt;</td>
<td>On Policy anniversary or earlier, as applicable&lt;sup&gt;17&lt;/sup&gt;</td>
<td>1.0% (effective annual rate)</td>
</tr>
</tbody>
</table>

<sup>13</sup> We deduct the monthly per unit charge on each Monthiversary as part of the monthly deductions for a maximum of 10 years from the Policy date based on the issue age of the insured. We also assess a new monthly per unit charge for a maximum of 10 years following any increase in specified amount (including specified amount increases generated by the Inflation Fighter Rider Level Premium) that are based on the insured’s attained age on the date of the increase.

<sup>14</sup> This maximum charge is based on an insured with the following characteristics: issue age 85. This maximum charge may also apply to insureds with other characteristics.

<sup>15</sup> This minimum charge is based on an insured with the following characteristics: issue age 5. This minimum charge may also apply to insureds with other characteristics.

<sup>16</sup> The Loan Interest Spread is the difference between the amount of interest we charge you for a loan (currently, an effective annual rate of 2.75%, guaranteed not to exceed 3.0%) and the amount of interest we credit to your loan reserve account (an effective annual rate of 2.0% guaranteed). After the 10th Policy year, we will charge preferred loan interest rates on a portion of the loan but only if there is a gain on the Policy. Beginning at attained age 111 all loans, new and existing, will be considered preferred loans. We will apply preferred loan rates on an amount equal to the cash value minus total premiums paid (less any cash withdrawals) and minus any outstanding loan amount, including accrued loan interest. The maximum loan interest spread on preferred loans is 0.25%, and the current spread is 0.0%.

<sup>17</sup> While a Policy loan is outstanding, loan interest is payable in arrears on each Policy anniversary, or, if earlier, on the date of loan repayment, Policy lapse, surrender, Policy termination, or the insured’s death.
### Optional Rider Charges:

<table>
<thead>
<tr>
<th>Charge</th>
<th>When Charge is Deducted</th>
<th>Amount Deducted</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Accidental Death Benefit Rider</strong></td>
<td>Monthly, on the Policy date and on each Monthiversary until the insured reaches attained age 70</td>
<td></td>
</tr>
<tr>
<td><strong>Maximum Charge</strong></td>
<td></td>
<td>$0.18 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td><strong>Minimum Charge</strong></td>
<td></td>
<td>$0.10 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td>Initial charge for a male insured, issue age 30</td>
<td></td>
<td>$0.10 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td><strong>Disability Waiver of Monthly Deductions Rider</strong></td>
<td>Monthly, on the Policy date and on each Monthiversary until the insured reaches attained age 60</td>
<td></td>
</tr>
<tr>
<td><strong>Maximum Charge</strong></td>
<td></td>
<td>$0.39 per $1,000 of base Policy net amount at risk per month</td>
</tr>
<tr>
<td><strong>Minimum Charge</strong></td>
<td></td>
<td>$0.03 per $1,000 of base Policy net amount at risk per month</td>
</tr>
<tr>
<td>Initial charge for a male insured, issue age 30</td>
<td></td>
<td>$0.04 per $1,000 of base Policy net amount at risk per month</td>
</tr>
</tbody>
</table>

**18** Optional Rider cost of insurance charges are based on a number of factors, including, but not limited to: each insured’s issue age, sex and underwriting class, and the Policy year and rider face amount. The cost of insurance rates shown in the table may not be representative of the charges you will pay. Your Policy’s schedule page will indicate the guaranteed cost of insurance charges applicable to your Policy. The rider will indicate the maximum guaranteed rider charges applicable to your Policy. You can obtain more detailed information concerning your cost of insurance charges by contacting your registered representative.

**19** This maximum charge is based on an insured with the following characteristics: male, issue age 50 and in the 20th Policy year. This maximum charge may also apply to insureds with other characteristics.

**20** This minimum charge is based on an insured with the following characteristics: male, issue age 45 and in the first Policy year. This minimum charge may also apply to insureds with other characteristics.

**21** Disability Waiver of Monthly Deductions charges are based on the insured’s issue age and sex, and the net amount at risk. The charges shown are for Base Policy only (i.e., without riders and other benefits). The addition of riders and other benefits would increase these charges. This charge does not vary once it is added to the Policy. The additional cost of insurance rates for the rider shown in the table may not be representative of the charges you will pay. Your Policy’s schedule page will indicate the Disability Waiver of Monthly Deductions Rider charges applicable to your Policy. You can obtain more detailed information concerning your Disability Waiver of Monthly Deductions Rider charges by contacting your registered representative.

**22** This maximum charge is based on an insured with the following characteristics: female, issue age 55. This maximum charge may also apply to insureds with other characteristics.

**23** This minimum charge is based on an insured with the following characteristics: male, issue age 25. This minimum charge may also apply to insureds with other characteristics.
### Periodic Charges Other Than Portfolio Operating Expenses

#### Optional Rider Charges (continued):

<table>
<thead>
<tr>
<th>Charge</th>
<th>When Charge is Deducted</th>
<th>Guaranteed Charge</th>
<th>Current Charge&lt;sup&gt;1&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disability Waiver of Premium Rider&lt;sup&gt;24&lt;/sup&gt;</td>
<td>Monthly, on the Policy date and on each Monthiversary until the insured reaches attained age 60</td>
<td>$1.61 per $10 of monthly rider benefit</td>
<td>$1.61 per $10 of monthly rider benefit</td>
</tr>
<tr>
<td>Maximum Charge&lt;sup&gt;25&lt;/sup&gt;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Minimum Charge&lt;sup&gt;26&lt;/sup&gt;</td>
<td></td>
<td>$0.27 per $10 of monthly rider benefit</td>
<td>$0.27 per $10 of monthly rider benefit</td>
</tr>
<tr>
<td>Initial charge for a male insured, issue age 30</td>
<td></td>
<td>$0.38 per $10 of monthly rider benefit</td>
<td>$0.38 per $10 of monthly rider benefit</td>
</tr>
<tr>
<td>Children’s Insurance Rider&lt;sup&gt;27&lt;/sup&gt;</td>
<td>Monthly, on the Policy date and on each Monthiversary until the last insured child reaches his/her 25&lt;sup&gt;th&lt;/sup&gt; birthday (or until the death of the last child)</td>
<td>$0.60 per $1,000 of rider face amount per month</td>
<td>$0.60 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td>Other Insured Rider&lt;sup&gt;28&lt;/sup&gt; (without Extra Ratings)&lt;sup&gt;9&lt;/sup&gt;</td>
<td>Monthly, on the Policy date and on each Monthiversary until the other insured reaches attained age 100</td>
<td>$30.40 per $1,000 of rider face amount per month</td>
<td>$30.40 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td>Maximum Charge&lt;sup&gt;29&lt;/sup&gt;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Minimum Charge&lt;sup&gt;30&lt;/sup&gt;</td>
<td></td>
<td>$0.02 per $1,000 of rider face amount per month</td>
<td>$0.02 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td>Initial charge for a female insured, issue age 35, in the preferred elite non-tobacco use class</td>
<td></td>
<td>$0.08 per $1,000 of rider face amount per month</td>
<td>$0.08 per $1,000 of rider face amount per month</td>
</tr>
</tbody>
</table>

---

<sup>24</sup> The charge for this rider is a level rate based on the primary insured’s issue age, sex and the amount of monthly income benefit that would be paid in the event of a total disability as defined in the rider.

<sup>25</sup> This maximum charge is based on an insured with the following characteristics: female, issue age 55. This maximum charge may also apply to insureds with other characteristics.

<sup>26</sup> This minimum charge is based on an insured with the following characteristics: male, issue age 15. This minimum charge may also apply to insureds with other characteristics.

<sup>27</sup>The charge for this rider is based on the rider face amount and the cost per $1,000 does not vary.

<sup>28</sup>Rider cost of insurance charges are based on some combination of the insured’s issue age, sex and underwriting class, the Policy year, and the rider face amount. Cost of insurance rates generally will increase each year with the age of the insured. The rider’s cost of insurance rates shown in the table may not be representative of the charges you will pay. The rider will indicate the maximum guaranteed rider charges applicable to your Policy. You can obtain more information about these riders by contacting your registered representative.

<sup>29</sup>This maximum charge is based on an insured with the following characteristics: male, issue age 25, standard tobacco underwriting class and in the 75<sup>th</sup> Policy year. This maximum charge may also apply to insureds with other characteristics.

<sup>30</sup>This minimum charge is based on an insured with the following characteristics: female, issue age 5, juvenile class and in the first Policy year. This minimum charge may also apply to insureds with other characteristics.
### Periodic Charges Other Than Portfolio Operating Expenses

#### Optional Rider Charges (continued):

<table>
<thead>
<tr>
<th>Charge</th>
<th>When Charge is Deducted</th>
<th>Guaranteed Charge</th>
<th>Current Charge¹</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Primary Insured Rider Plus</strong>²⁰ (without Extra Ratings)⁹</td>
<td>Monthly, on the Policy date and on each Monthiversary until the insured reaches attained age 100</td>
<td>$30.40 per $1,000 of rider face amount per month</td>
<td>$30.40 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td><strong>Maximum Charge</strong>²⁰</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Minimum Charge</strong>³¹</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Initial charge for a male insured, issue age 30, in the preferred elite non-tobacco use class</strong></td>
<td></td>
<td>$0.02 per $1,000 of rider face amount per month</td>
<td>$0.01 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td><strong>Inflation Fighter Rider Level Premium</strong>³²</td>
<td>After rider generates annual increases to Policy specified amount</td>
<td>See listings in tables above for:</td>
<td>See listings in tables above for:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Cost of Insurance Monthly Per Unit Charge Surrender Charge</td>
<td>Cost of Insurance Monthly Per Unit Charge Surrender Charge</td>
</tr>
</tbody>
</table>

³¹ This minimum charge is based on an insured with the following characteristics: female, issue age 10, juvenile class and in the first Policy year. This minimum charge may also apply to insureds with other characteristics.

³² Scheduled annual increases in specified amount generated by this rider will create a new layer of cost of insurance charges, monthly per unit charges and surrender charges under the Policy. Each new layer of surrender charges and monthly per unit charges resulting from the scheduled annual increase in specified amount will be based on the amount of increase, the insured’s issue age at time of increase, and the Policy duration from date of increase. Each new layer of cost of insurance charge is based on, among other factors, the insured’s issue age and the duration of the Policy at the time of the increase.
SECTION B

FEE TABLES FOR POLICIES APPLIED FOR BEFORE SEPTEMBER 22, 2008 AND ISSUED
BEFORE JANUARY 1, 2009
(BASED ON THE 1980 C.S.O. TABLES)
FOR POLICIES APPLIED FOR BEFORE SEPTEMBER 22, 2008 AND ISSUED BEFORE JANUARY 1, 2009

The first table describes the types of fees and expenses that you will pay when buying or owning the Policy, paying premiums, making cash withdrawals from the Policy, surrendering the Policy, or transferring Policy cash value among the subaccounts and the fixed account.

<table>
<thead>
<tr>
<th>Transaction Fees</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Charge</strong></td>
</tr>
<tr>
<td><strong>Premium Expense Charge</strong></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td><strong>Cash Withdrawal Charge</strong></td>
</tr>
</tbody>
</table>

1 The Company reserves the right at any time to change the current charge, but never to a level that exceeds the guaranteed charge.
2 When we incur the expense of expedited delivery of your cash withdrawal or complete surrender payment, we currently assess the following additional charges: $20 for overnight delivery ($30 for Saturday delivery), and $50 for wire service. You can obtain further information about these administrative charges by contacting our administrative office.
For Policies Applied for before September 22, 2008 and Issued before January 1, 2009

<table>
<thead>
<tr>
<th>Transaction Fees</th>
<th>Amount Deducted</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Guaranteed Charge</td>
</tr>
<tr>
<td><strong>Surrender Charge&lt;sup&gt;c&lt;/sup&gt;</strong></td>
<td>Upon full surrender of the Policy during the first 10 Policy years or during the first 10 years from the date of any increase in the specified amount (whether requested or an increase generated by the Inflation Fighter Rider Level Premium)</td>
</tr>
<tr>
<td><strong>Maximum Charge&lt;sup&gt;e&lt;/sup&gt;</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Minimum Charge&lt;sup&gt;e&lt;/sup&gt;</strong></td>
<td></td>
</tr>
<tr>
<td>Initial charge for a male insured, issue age 30, in the preferred-elite non-tobacco use class</td>
<td></td>
</tr>
<tr>
<td><strong>Transfer Charge&lt;sup&gt;e&lt;/sup&gt;</strong></td>
<td>Upon transfer</td>
</tr>
<tr>
<td><strong>Living Benefit Rider&lt;sup&gt;d&lt;/sup&gt; (an Accelerated Death Benefit)</strong></td>
<td>When rider is exercised</td>
</tr>
<tr>
<td><strong>Monthly Policy Charge</strong></td>
<td>Monthly, on the Policy date and on each Monthiversary until the insured reaches attained age 100</td>
</tr>
</tbody>
</table>

<sup>a</sup>The surrender charge will vary based on the issue age, sex and underwriting class of the insured on the Policy date and at the time of any increase in the specified amount. Each increase in specified amount will have its own 10 year surrender charge period starting on the date of the increase. (<strong>Note</strong>: Only the increase in specified amount is subject to the additional 10 year surrender charge period.) The surrender charge for each increase in specified amount (“layer”) is calculated as the surrender charge per $1,000 of specified amount multiplied by the number of thousands of dollars of specified amount in the layer, multiplied by the surrender charge factor. The surrender charge factor for the Policy and each layer will be 1.00 at issue and will decrease until it reaches zero at the end of the 10<sup>th</sup> Policy year after the Policy date (or date of any specified amount increase). The surrender charge shown in the table is rounded up. The charges shown in the table may not be typical of the charges you will pay. Please see the example in the “Surrender Charge” section of this prospectus. More detailed information about the surrender charges applicable to you is available from your registered representative.

<sup>c</sup>This maximum surrender charge is based on an insured with the following characteristics: male, issue age 85, in the standard tobacco use underwriting class. This maximum charge may also apply to insureds with other characteristics.

<sup>d</sup>This minimum surrender charge is based on an insured with the following characteristics: female, issue age 4, in the juvenile underwriting class. This minimum charge may also apply to insureds with other characteristics.

<sup>e</sup>The first 12 transfers per Policy year are free.

<sup>f</sup>We do not assess an administrative charge for this rider, however, if the rider is exercised, we do reduce the single sum benefit by a discount factor to compensate us for income lost due to the early payment of the death benefit. The discount factor is based on the current yield on 90-day Treasury bills or the Policy loan interest rate, whichever is greater. For further information about the Living Benefit Rider, including a numerical example showing the calculation of a discounted single sum benefit and the impact of acceleration of a portion of the death benefit available under a Policy on any remaining death benefit and cash value, please see the “Supplemental Benefits (Riders)” section of this prospectus.
The table below describes the fees and expenses that you will pay periodically during the time that you own the Policy, not including portfolio fees and expenses.

<table>
<thead>
<tr>
<th>Charge</th>
<th>When Charge is Deducted</th>
<th>Amount Deducted</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cost of Insurance</strong> (without Extra Ratings)</td>
<td>Monthly, on the Policy date and on each Monthiversary until the insured reaches attained age 100</td>
<td>Guaranteed Charge: $83.33 per $1,000 of net amount at risk per month</td>
</tr>
<tr>
<td><strong>Maximum Charge</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Minimum Charge</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Initial Charge for a male insured, issue age 30, in the preferred elite non-tobacco use class, Band 2</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Cost of insurance charges are based on a number of factors, including, but not limited to: the insured’s issue age, sex and underwriting class, and the Policy’s specified amount, policy duration, and the amount at risk. Cost of insurance rates generally will increase each year with the age of the insured. Cost of insurance rates are generally lower for each higher band of specified amount. For example, Band 2 (specified amounts $250,000 - $499,999) generally has lower cost of insurance rates than those of Band 1 (specified amounts less than $250,000). The cost of insurance rates shown in the table may not be representative of the charges you will pay. Your Policy’s schedule page will indicate the guaranteed cost of insurance charges applicable to your Policy. You can obtain more detailed information concerning your cost of insurance charges by contacting your registered representative.*

*We may place an insured in a substandard underwriting class with extra ratings that reflect higher mortality risks and that result in higher cost of insurance rates. If the insured possesses additional mortality risks, then we may add a surcharge to the cost of insurance rates up to a total charge of $83.33 monthly per $1,000 of net amount at risk.*

*This maximum charge is based on an insured with the following characteristics: male, issue age 35, standard tobacco class, with an initial specified amount of less than $250,000 (Band 1) and in the 65th Policy year. This maximum charge may also apply to insureds with other characteristics.*

*The net amount at risk equals the death benefit on a Monthiversary, minus the cash value on such Monthiversary.*

*This minimum charge is based on an insured with the following characteristics: female, issue age 10, juvenile class and in the first Policy year. This minimum charge may also apply to insureds with other characteristics.*
### Periodic Charges Other Than Portfolio Operating Expenses

<table>
<thead>
<tr>
<th>Charge</th>
<th>When Charge is Deducted</th>
<th>Amount Deducted</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Monthly Per Unit Charge</strong></td>
<td>Monthly, for up to 10 years on and after the Policy date, and on any increase in specified amount</td>
<td><strong>Guaranteed Charge</strong> $0.08 per $1,000 of specified amount per month <strong>Current Charge</strong> $0.08 per $1,000 of specified amount per month</td>
</tr>
<tr>
<td><strong>Maximum Charge</strong></td>
<td></td>
<td><strong>Guaranteed Charge</strong> $0.08 per $1,000 of specified amount per month <strong>Current Charge</strong> $0.08 per $1,000 of specified amount per month</td>
</tr>
<tr>
<td><strong>Minimum Charge</strong></td>
<td></td>
<td><strong>Guaranteed Charge</strong> $0.05 per $1,000 of specified amount per month <strong>Current Charge</strong> $0.05 per $1,000 of specified amount per month</td>
</tr>
<tr>
<td><strong>Initial Charge for an insured, issue age 30</strong></td>
<td></td>
<td><strong>Guaranteed Charge</strong> $0.08 per $1,000 of specified amount per month <strong>Current Charge</strong> $0.08 per $1,000 of specified amount per month</td>
</tr>
<tr>
<td><strong>Mortality and Expense Risk Charge</strong></td>
<td>Daily</td>
<td><strong>Annual rate of 0.90% of average daily net assets of each subaccount in which you are invested</strong> <strong>Annual rate of 0.75% for Policy years 1-10; 0.60% for Policy years 11-15; 0.30% for Policy years 16-20; and 0.00% for Policy years 21+, of average daily net assets of each subaccount in which you are invested</strong></td>
</tr>
<tr>
<td><strong>Loan Interest Spread</strong></td>
<td>On Policy Anniversary or earlier, as applicable**                                                        <strong>1.0% (effective annual rate)</strong> <strong>0.75% (effective annual rate)</strong></td>
<td></td>
</tr>
</tbody>
</table>

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**11** We deduct the monthly per unit charge on each Monthiversary as part of the monthly deductions for a maximum of 10 years from the Policy date based on the insured’s issue age. We also assess a new monthly per unit charge for a maximum of 10 years following any increase in specified amount (including specified amount increases generated by the Inflation Fighter Rider Level Premium) that are based on the insured’s attained age on the date of the increase.

**12** This maximum charge is based on an insured with the following characteristics: issue age 85. This maximum charge may also apply to insureds with other characteristics.

**13** This minimum charge is based on an insured with the following characteristics: issue age 5. This minimum charge may also apply to insureds with other characteristics.

**14** The Loan Interest Spread is the difference between the amount of interest we charge you for a loan (currently, an effective annual rate of 2.75%, guaranteed not to exceed 3.0%) and the amount of interest we credit to your loan reserve account (an effective annual rate of 2.0% guaranteed). After the 10th Policy year, we will charge preferred loan interest rates that are lower on a portion of the loan but only if there is a gain on the Policy. Beginning at attained age 100, all loans, new and existing, will be considered preferred loans. We will apply preferred loan rates on an amount equal to the cash value minus total premiums paid (less any cash withdrawals) and minus any outstanding loan amount (including accrued loan interest). The maximum loan interest spread on preferred loans is 0.25%, and the current spread is 0.0%.

**15** While a Policy loan is outstanding, loan interest is payable in arrears on each Policy anniversary, or, if earlier, on the date of loan repayment, Policy lapse, surrender, Policy termination, or the insured’s death.
## Periodic Charges Other Than Portfolio Operating Expenses

### Optional Rider Charges:

<table>
<thead>
<tr>
<th>Charge</th>
<th>When Charge is Deducted</th>
<th>Amount Deducted</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Accidental Death Benefit Rider</strong></td>
<td>Monthly, on the Policy date and on each Monthiversary until the insured reaches attained age 70</td>
<td>Guaranteed Charge Current Charge</td>
</tr>
<tr>
<td><strong>Maximum Charge</strong></td>
<td></td>
<td>$0.18 per $1,000 of rider face amount per month $0.18 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td><strong>Minimum Charge</strong></td>
<td></td>
<td>$0.10 per $1,000 of rider face amount per month $0.10 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td><strong>Initial charge for a male insured, issue age 30</strong></td>
<td></td>
<td>$0.10 per $1,000 of rider face amount per month $0.10 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td><strong>Disability Waiver of Monthly Deductions Rider</strong></td>
<td>Monthly, on the Policy date and on each Monthiversary until the insured reaches attained age 60</td>
<td>Guaranteed Charge Current Charge</td>
</tr>
<tr>
<td><strong>Maximum Charge</strong></td>
<td></td>
<td>$0.39 per $1,000 of base Policy net amount at risk per month $0.39 per $1,000 of base Policy net amount at risk per month</td>
</tr>
<tr>
<td><strong>Minimum Charge</strong></td>
<td></td>
<td>$0.03 per $1,000 of base Policy net amount at risk per month $0.03 per $1,000 of base Policy net amount at risk per month</td>
</tr>
<tr>
<td><strong>Initial charge for a male insured, issue age 30</strong></td>
<td></td>
<td>$0.04 per $1,000 of base Policy net amount at risk per month $0.04 per $1,000 of base Policy net amount at risk per month</td>
</tr>
</tbody>
</table>

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18 Optional Rider cost of insurance charges are based on a number of factors, including but not limited to: each insured’s issue age, sex and underwriting class, and the Policy year and rider face amount. The cost of insurance rates shown in the table may not be representative of the charges you will pay. Your Policy’s schedule page will indicate the guaranteed cost of insurance charges applicable to your Policy. The rider will indicate the maximum guaranteed rider charges applicable to your Policy. You can obtain more detailed information concerning your cost of insurance charges by contacting your registered representative.

19 This maximum charge is based on an insured with the following characteristics: male, issue age 50 and in the 20th Policy year. This maximum charge may also apply to insureds with other characteristics.

20 This minimum charge is based on an insured with the following characteristics: male, issue age 45 and in the first Policy year. This minimum charge may also apply to insureds with other characteristics.

21 Disability Waiver of Monthly Deductions charges are based on the primary insured’s issue age and sex, and the net amount at risk. The charges shown are for Base Policy only (i.e., without riders and other benefits). The addition of riders and other benefits would increase these charges. This charge does not vary once it is added to the Policy. The additional cost of insurance rates for the rider shown in the table may not be representative of the charges you will pay. Your Policy’s schedule page will indicate the Disability Waiver of Monthly Deductions Rider charges applicable to your Policy. You can obtain more detailed information concerning your Disability Waiver of Monthly Deductions Rider charges by contacting your registered representative.

22 This maximum charge is based on an insured with the following characteristics: female, issue age 55. This maximum charge may also apply to insureds with other characteristics.

23 This minimum charge is based on an insured with the following characteristics: male, issue age 25. This minimum charge may also apply to insureds with other characteristics.
### Periodic Charges Other Than Portfolio Operating Expenses

#### Optional Rider Charges (continued):

<table>
<thead>
<tr>
<th>Charge</th>
<th>When Charge is Deducted</th>
<th>Amount Deducted</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Disability Waiver of Premium Rider</strong>³⁴</td>
<td>Monthly, on the Policy date and on each Monthiversary until the insured reaches attained age 60</td>
<td>Guaranteed Charge</td>
</tr>
<tr>
<td>Maximum Charge²⁵</td>
<td></td>
<td>$1.61 per $10 of monthly rider benefit</td>
</tr>
<tr>
<td>Minimum Charge²⁶</td>
<td></td>
<td>$0.27 per $10 of monthly rider benefit</td>
</tr>
<tr>
<td>Initial charge for a male insured, issue age 30</td>
<td></td>
<td>$0.38 per $10 of monthly rider benefit</td>
</tr>
<tr>
<td><strong>Children’s Insurance Rider</strong>²⁷</td>
<td>Monthly, on the Policy date and on each Monthiversary after the last insured child reaches his/her 25th birthday (or until the death of the last child)</td>
<td>$0.60 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td><strong>Other Insured Rider</strong>²⁸</td>
<td>Monthly, on the Policy date and on each Monthiversary until the other insured reaches attained age 100</td>
<td>$0.60 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td>(without Extra Ratings)²⁹</td>
<td></td>
<td><strong>Maximum Charge</strong>²⁹</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$83.33 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Minimum Charge</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>$0.06 per $1,000 of rider face amount per month³⁰</td>
</tr>
<tr>
<td>Initial charge for a female insured, issue age 35, in the preferred elite non-tobacco use class</td>
<td></td>
<td>$0.13 per $1,000 of rider face amount per month³¹</td>
</tr>
</tbody>
</table>

²⁴ The charge for this rider is a level rate based on the primary insured’s issue age, sex and the amount of monthly income benefit that would be paid in the event of total disability as defined in the rider.
²⁵ This maximum charge is based on an insured with the following characteristics: female, issue age 55. This maximum charge may also apply to insureds with other characteristics.
²⁶ This minimum charge is based on an insured with the following characteristics: male, issue age 15. This minimum charge may also apply to insureds with other characteristics.
²⁷ The charge for this rider is based on the rider face amount and the cost per $1,000 does not vary.
²⁸ Rider cost of insurance charges are based on some combination of the insured’s issue age, sex and underwriting class, the Policy year, and the rider face amount. Cost of insurance rates generally will increase each year with the age of the insured. The rider’s cost of insurance rates shown in the table may not be representative of the charges you will pay. The rider will indicate the maximum guaranteed rider charges applicable to your Policy. You can obtain more information about these riders by contacting your registered representative.
²⁹ This maximum charge is based on an insured with the following characteristics: male, issue age 25, standard tobacco underwriting class and in the 75th Policy year. This maximum charge may also apply to insureds with other characteristics.
³⁰ This minimum charge is based on an insured with the following characteristics: female, issue age 10, juvenile class and in the first Policy year. This minimum charge may also apply to insureds with other characteristics.
³¹ This minimum charge is based on an insured with the following characteristics: female, issue age 27, preferred elite non-tobacco class and in the first Policy year. This minimum charge may also apply to insureds with other characteristics.
FOR POLICIES APPLIED FOR BEFORE SEPTEMBER 22, 2008 AND ISSUED BEFORE JANUARY 1, 2009

### Periodic Charges Other Than Portfolio Operating Expenses

Optional Rider Charges (continued):

<table>
<thead>
<tr>
<th>Charge</th>
<th>When Charge is Deducted</th>
<th>Amount Deducted</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Primary Insured Rider Plus</strong>&lt;sup&gt;28&lt;/sup&gt; (without Extra Ratings)&lt;sup&gt;29&lt;/sup&gt;</td>
<td>Monthly, on the Policy date and on each Monthiversary until the insured reaches attained age 100</td>
<td>Guaranteed Charge: $83.33 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Current Charge: $42.42 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td><strong>Maximum Charge</strong>&lt;sup&gt;29&lt;/sup&gt;</td>
<td></td>
<td>$0.06 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td><strong>Minimum Charge</strong>&lt;sup&gt;32&lt;/sup&gt;</td>
<td></td>
<td>$0.01 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td><strong>Initial charge for a male insured, issue age 30, in the preferred elite non-tobacco use class</strong></td>
<td></td>
<td>$0.12 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$0.02 per $1,000 of rider face amount per month</td>
</tr>
<tr>
<td><strong>Inflation Fighter Rider Level Premium</strong>&lt;sup&gt;33&lt;/sup&gt;</td>
<td>After rider generates annual increases to Policy specified amount</td>
<td>See listings in tables above for:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Cost of Insurance</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Monthly Per Unit Charge</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Surrender Charge</td>
</tr>
<tr>
<td></td>
<td></td>
<td>See listings in tables above for:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Cost of Insurance</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Monthly Per Unit Charge</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Surrender Charge</td>
</tr>
</tbody>
</table>

---

<sup>28</sup>This minimum charge is based on an insured with the following characteristics: female, issue age 10, juvenile class and in the first Policy year. This minimum charge may also apply to insureds with other characteristics.

<sup>29</sup>Scheduled annual increases in specified amount generated by this rider will create a new layer of cost of insurance charges, monthly per unit charges and surrender charges under the Policy. Each new layer of surrender charges and monthly per unit charges resulting from the scheduled annual increase in specified amount will be based on the amount of increase, the insured’s issue age at time of increase, and the Policy duration from date of increase. Each new layer of cost of insurance charge is based on, among other factors, the issue age of the insured and the duration of the Policy at the time of the increase.
For information concerning compensation paid for the sale of the Policy, please see “Sale of the Policies.”

**RANGE OF EXPENSES FOR THE PORTFOLIOS** 1, 2

The next table shows the lowest and highest total operating expenses charged by the portfolios during the fiscal year ended December 31, 2018. Expenses of the portfolios may be higher or lower in the future. More detail concerning each portfolio’s fees and expenses is contained in the prospectus for each portfolio.

<table>
<thead>
<tr>
<th>Total Annual Portfolio Operating Expenses (total of all expenses that are deducted from portfolio assets, including management fees, 12b-1 fees, and other expenses)</th>
<th>Lowest</th>
<th>Highest</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.29%</td>
<td>4.53%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Net Annual Portfolio Operating Expenses (total of all expenses that are deducted from portfolio assets, including management fees, 12b-1 fees, and other expenses, after contractual waiver of fees and expenses) 3</th>
<th>Lowest</th>
<th>Highest</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.29%</td>
<td>1.69%</td>
<td></td>
</tr>
</tbody>
</table>

1 The portfolio expenses used to prepare this table were provided to Transamerica Premier by the funds. The expenses shown are those incurred for the year ended December 31, 2018. Current or future expenses may be greater or less than those shown.

2 The table showing the range of expenses for the portfolios takes into account the expenses of several Transamerica Series Trust asset allocation portfolios that are each a “fund of funds.” A “fund of funds” portfolio typically allocates its assets, within predetermined percentage ranges, among certain other Fund portfolios and affiliated Fund portfolios (each such portfolio an “Acquired Fund”). Each “fund of funds” has its own set of operating expenses, as does each of the portfolios in which it invests. In determining the range of portfolio expenses, Transamerica Premier took into account the information received from those funds on the combined actual expenses for each “fund of funds” and for the portfolios in which it invests. The combined expense information includes the Acquired Fund (i.e., the underlying fund’s) fees and expenses for the Transamerica Series Trust asset allocation portfolios. See the prospectuses for the Transamerica Series Trust for a presentation of all applicable Acquired Fund fees and expenses.

3 The range of Net Annual Portfolio Operating Expenses takes into account contractual arrangements for 9 portfolios that require a portfolio’s investment adviser to reimburse or waive portfolio expenses until April 30, 2020.

**TRANSAMERICA PREMIER, THE SEPARATE ACCOUNT, THE FIXED ACCOUNT AND THE PORTFOLIOS**

**TRANSAMERICA PREMIER**

Transamerica Premier Life Insurance Company, located at 570 Carillon Parkway, St. Petersburg, Florida 33716-1294, is the insurance company issuing the Policy. We are obligated to pay all benefits under the Policy.

**FINANCIAL CONDITION OF THE COMPANY**

The benefits under the Policy are paid by Transamerica Premier from its general account assets and/or your cash value held in the Company’s separate account. It is important that you understand that payment of the benefits is not assured and depends upon certain factors discussed below.

**Assets in the Separate Account.** You assume all of the investment risk for your cash value that is allocated to the subaccounts of the separate account. Your cash value in those subaccounts constitutes a portion of the assets of the separate account. These assets are segregated and insulated from our general account, and may not be charged with liabilities arising from any other business that we may conduct. See "The Separate Account."

**Assets in the General Account.** You also may be permitted to make allocations to the fixed account, which is supported by the assets in our general account. See "The Fixed Account." Any guarantees under the Policy that exceed your cash value, such as those associated with the Policy’s death benefit, are paid from our general account (and not the separate account). Therefore, any amounts that we may be obligated to pay under the Policy in excess of subaccount value are subject to our financial strength and claims-paying ability and our long-term ability to make such payments. The assets of the separate account, however, are also available to cover the liabilities of our general account, but only to the extent that the separate account assets exceed the separate account liabilities arising under the Policies supported by it.

We issue other types of insurance policies and financial products as well, and we also pay our obligations under these products from our assets in the general account.
Our Financial Condition. As an insurance company, we are required by state insurance regulation to hold a specified amount of reserves in order to meet all the contractual obligations of our general account to our policyowners. We monitor our reserves so that we hold sufficient amounts to cover actual or expected policy and claims payments. In addition, we hedge our investments in our general account, and may require purchasers of certain of the variable insurance products that we offer to allocate premium payments and cash value in accordance with specified investment requirements. However, it is important to note that there is no guarantee that we will always be able to meet our claims-paying obligations, and that there are risks to purchasing any insurance product.

State insurance regulators also require insurance companies to maintain a minimum amount of capital, which acts as a cushion in the event that the insurer suffers a financial impairment, based on the inherent risks in the insurer’s operations. These risks include those associated with losses that we may incur as the result of defaults on the payment of interest or principal on our general account assets, which include bonds, mortgages, general real estate investments, and stocks, as well as the loss in market value of these investments. We may also experience liquidity risk if our general account assets cannot be readily converted into cash to meet obligations to our policyowners or to provide the collateral necessary to finance our business operations.

How to Obtain More Information. We encourage both existing and prospective policyowners to read and understand our financial statements. We prepare our financial statements on a statutory basis. Our financial statements, which are presented in conformity with accounting practices prescribed or permitted by the Iowa Department of Insurance - as well as the financial statements of the separate account—are located in the Statement of Additional Information (SAI). The SAI is available at no charge by writing to our mailing address - Transamerica Premier Life Insurance Company, 4333 Edgewood Rd. NE, Cedar Rapids, Iowa 52499-0001 or by calling us at (800) 851-9777, or by visiting our website www.premier.transamerica.com. In addition, the SAI is available on the SEC’s website at www.sec.gov. Our financial strength ratings, which reflect the opinions of leading independent rating agencies of Transamerica Premier's ability to meet its obligations to its policy owners, are available on our website and the websites of these nationally recognized statistical ratings organizations--A.M. Best Company (www.ambest.com), Moody's Investors Service (www.moodys.com), S&P Global (www.standardandpoors.com), and Fitch Ratings (www.fitchratings.com).

The Separate Account

WRL Series Life Account was a separate account of WRL, established under Ohio law. Effective on October 1, 2014, WRL Series Life Account was re-domesticated under the laws of the State of Iowa and reestablished under TPLIC. We own the assets in the separate account and we may use assets in the separate account to support other variable life insurance policies we issue. The separate account is registered with the Securities and Exchange Commission (“SEC”) as a unit investment trust under the Investment Company Act of 1940, as amended (the “1940 Act”).

The separate account is divided into subaccounts, each of which invests in shares of a specific portfolio of a fund. These subaccounts buy and sell portfolio shares at net asset value without any sales charge. Any dividends and distributions from a portfolio are reinvested at net asset value in shares of that portfolio.

Income, gains, and losses credited to, or charged against, a subaccount of the separate account reflect the subaccount’s own investment experience and not the investment experience of our other assets. The separate account’s assets may not be used to pay any of our liabilities other than those arising from the Policies and other variable life insurance policies we issue. If the separate account’s assets exceed the required reserves and other liabilities, we may transfer the excess to our general account.

Changes to the Separate Account. As permitted by applicable law, we reserve the right to make certain changes to the structure and operation of the separate account, which may include:

- Remove, combine, or add subaccounts and make the combined or new subaccounts available for allocation of net premiums.
- Combine the separate account or any subaccounts with one or more different separate accounts or subaccounts.
- Close certain subaccounts to allocations of new net premiums by current or new policyowners at any time in our discretion.
- Transfer assets of the separate account or any subaccount, which we determine to be associated with the class of policies to which the Policy belongs, to another separate account or subaccount.
- Operate the separate account as a management company under the 1940 Act, or as any other form of investment company permitted by law.
- Establish additional separate accounts or subaccounts to invest in new portfolios of the funds.
- Manage the separate account at the direction of a committee.
- Endorse the Policy, as permitted by law, to reflect changes to the separate account and subaccounts as may be required by applicable law.
- Change the investment objective of a subaccount.
● Substitute, add, or delete fund portfolios in which subaccounts currently invest net premiums, to include portfolios of newly designated funds. (Fund portfolios will not be added, deleted or substituted without prior approval of the SEC to the extent required by the 1940 Act or other applicable laws.)

● Fund additional classes of variable life insurance policies through the separate account.

● Restrict or eliminate any voting privileges of owners or other persons who have voting privileges in connection with the operation of the separate account.

Some, but not all, of these future changes may be the result of changes in applicable laws or interpretation of the laws. We will not make any such changes without receiving any necessary approval of the SEC and applicable state insurance departments. We will notify you of any changes. We reserve the right to make other structural and operational changes affecting the separate account.

In addition, the portfolios that sell their shares to the subaccounts may discontinue offering their shares to the subaccounts.

THE FIXED ACCOUNT

The fixed account is part of Transamerica Premier’s general account. We use general account assets to support our insurance and annuity obligations other than those funded by the separate accounts. Subject to applicable law, Transamerica Premier has sole discretion over the investment of the fixed account’s assets. Transamerica Premier bears the full investment risk for all amounts contributed to the fixed account. Please see the section above entitled “Risks of Managing General Account Assets.” Transamerica Premier guarantees that the amounts allocated to the fixed account will be credited interest daily at an annual net effective interest rate of at least 2.0%. We will determine any interest rate credited in excess of the guaranteed rate at our sole discretion. We have no formula for determining fixed account interest rates in excess of the guaranteed rate or any duration for such rates.

Money you place in the fixed account will begin earning interest credited daily and compounded annually at the current interest rate in effect at the time it is allocated. Unless otherwise required by state law, we may restrict your allocations and transfers to the fixed account if the fixed account value, excluding the loan reserve, following the allocation or transfer would exceed $250,000. (This restriction does not apply to any transfers to the fixed account necessary in the exercise of conversion rights.) We may declare current interest rates from time to time. We may declare more than one interest rate for different money based upon the date of allocation or transfer to the fixed account. When we declare a current interest rate higher than the guaranteed rate on amounts allocated to the fixed account, we guarantee the higher rate on those amounts for at least one year (the “guarantee period”) unless those amounts are transferred to the loan reserve. At the end of the guarantee period we may declare a new current interest rate on those amounts and any accrued interest thereon. We will guarantee this new current interest rate for another guarantee period. We credit interest greater than 2.0% during any guarantee period at our sole discretion. You assume the risk that the interest rate on the fixed account may decrease, although it will never be lower than a guaranteed minimum annual effective rate of 2%.

We allocate amounts from the fixed account for cash withdrawals, transfers to the subaccounts, or monthly deductions charges on a first in, first out basis (“FIFO”) for the purpose of crediting interest.

New Jersey: The fixed account is not available to you if your Policy was applied for in the State of New Jersey before September 22, 2008 and issued before January 1, 2009. You may not direct or transfer any premiums or cash value to the fixed account. The fixed account is available to you only in connection with Policy loans.

The fixed account has not been registered with the Securities and Exchange Commission and the staff of the Securities and Exchange Commission has not reviewed the disclosure in this prospectus relating to the fixed account. Disclosures regarding the fixed account, however, may be subject to certain generally applicable provisions of the federal securities laws relating to the accuracy and completeness of statements made in this prospectus.

THE PORTFOLIOS

The separate account invests in shares of the portfolios of a fund. Each portfolio is an investment division of a fund, which is an open-end investment management company registered with the SEC. Such registration does not involve supervision of the management or investment practices or policies of the portfolios by the SEC.

Each portfolio's assets are held separate from the assets of the other portfolios, and each portfolio has investment objectives and policies that are different from those of the other portfolios. Thus, each portfolio operates as a separate investment fund, and the income or loss of one portfolio has no effect on the investment performance of any other portfolio. Pending any required approval by a state insurance regulatory authority, certain subaccounts and corresponding portfolios may not be available to residents of some states.

Each portfolio’s investment objective(s) and policies are summarized below. There is no assurance that a portfolio will achieve its stated objective(s). Certain portfolios may have investment objectives and policies similar to other portfolios that are managed by the same investment adviser or sub-adviser. The investment results of the portfolios, however, may be higher or lower than those of such other portfolios. We do not guarantee or make any representation that the investment results of the portfolios will be comparable to any other portfolio, even those with the same investment adviser or manager.
Certain portfolios invest substantially all of their assets in portfolios of other funds. (See the chart below listing portfolios available under the Policy.) As a result, you will pay fees and expenses at both portfolio levels. This will reduce your investment return. These arrangements are referred to as fund of funds or master-feeder funds. Funds of funds or master-feeder structures may have higher expenses than portfolios that invest directly in debt or equity securities.

As described in more detail in the underlying portfolio prospectuses, certain underlying portfolios employ a managed volatility strategy that is intended to reduce the underlying portfolio’s overall volatility and downside risk, and to help us manage the risks associated with providing certain guarantees under the Policies. During rising markets, the hedging strategies employed to manage volatility could result in your Policy value rising less than would have been the case if you had been invested in an underlying portfolio with substantially similar investment objectives, securities, policies and strategies that does not utilize a volatility management strategy. In addition, the cost of these hedging strategies may have a negative impact on performance. On the other hand, investing in underlying portfolios with a managed volatility strategy may be helpful in a declining market with higher market volatility because the hedging strategy will reduce your equity exposure in such circumstances. In such cases, your Policy value may decline less than would have been the case if you had not invested in underlying portfolios with a managed volatility strategy. There is no guarantee that a managed volatility strategy can achieve or maintain the underlying portfolio’s optimal risk targets, and the underlying portfolio may not perform as expected. Portfolios that employ a managed volatility strategy are identified by an “*” preceding the name of the portfolio in the first column of the chart below.

Certain portfolios may employ hedging strategies to provide for downside protection during sharp downward movements in equity markets. (See chart below listing portfolios available under the Policy.) The cost of these hedging strategies could limit the upside participation of the portfolio in rising equity markets relative to other portfolios. You should consult with your registered representative to determine which combination of investment choices is appropriate for you.

The ProFunds and Access Trust portfolios permit frequent transfers. Frequent transfers may increase portfolio turnover. A high level of portfolio turnover may negatively impact performance by increasing transaction costs. In addition, large movements of assets into and out of a ProFunds or Access Trust portfolio may negatively affect a portfolio’s ability to achieve its investment objective or maintain a consistent level of operating expenses. See “Disruptive Trading and Market Timing.” Some ProFunds or Access Trust portfolios may use investment techniques not associated with most mutual fund portfolios. Investors in the ProFunds or Access Trust portfolios will bear additional investment risks. See the ProFunds or Access Trust prospectus for a description of the investment risks associated with investing in the ProFunds or Access Trust portfolios.

You can find more detailed information about the portfolios, including a description of risks, in the fund prospectuses. You may obtain a free copy of the fund prospectuses by contacting us at our administrative office at 1-800-851-9777 or visiting our website at www.premier.transamerica.com. You should read the fund prospectuses carefully.

Note: If you received a summary prospectus for a portfolio listed below, please follow the directions on the first page of the summary prospectus to obtain a copy of the full fund prospectus.
<table>
<thead>
<tr>
<th>Portfolio</th>
<th>Investment Adviser/Sub-Adviser</th>
<th>Investment Objective</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transamerica Aegon High Yield Bond VP&lt;sup&gt;1&lt;/sup&gt;</td>
<td>Transamerica Asset Management, Inc. Aegon USA Investment Management, LLC</td>
<td>Seeks a high level of current income by investing in high-yield debt securities.</td>
</tr>
<tr>
<td>Transamerica Aegon U.S. Government Securities VP</td>
<td>Transamerica Asset Management, Inc. Aegon USA Investment Management, LLC</td>
<td>Seeks to provide as high a level of total return as is consistent with prudent investment strategies.</td>
</tr>
<tr>
<td>Transamerica Barrow Hanley Dividend Focused VP</td>
<td>Transamerica Asset Management, Inc. Barrow, Hanley, Mewhinney &amp; Strauss, LLC</td>
<td>Seeks total return gained from the combination of dividend yield, growth of dividends and capital appreciation.</td>
</tr>
<tr>
<td>Transamerica BlackRock Global Allocation VP</td>
<td>Transamerica Asset Management, Inc. BlackRock Investment Management, LLC</td>
<td>Seeks high total investment return. Total investment return is the combination of capital appreciation and investment income.</td>
</tr>
<tr>
<td>Transamerica BlackRock Global Real Estate Securities VP&lt;sup&gt;2&lt;/sup&gt;</td>
<td>Transamerica Asset Management, Inc. BlackRock Investment Management, LLC</td>
<td>Seeks long-term total return from investments primarily in equity securities of real estate companies.</td>
</tr>
<tr>
<td>Transamerica BlackRock Government Money Market VP&lt;sup&gt;3,4&lt;/sup&gt;</td>
<td>Transamerica Asset Management, Inc. BlackRock Investment Management, LLC</td>
<td>Seeks as high a level of current income as is consistent with preservation of capital and liquidity.</td>
</tr>
<tr>
<td>Transamerica BlackRock Smart Beta 40 VP&lt;sup&gt;5&lt;/sup&gt;</td>
<td>Transamerica Asset Management, Inc. BlackRock Investment Management, LLC</td>
<td>Seeks capital appreciation and current income.</td>
</tr>
</tbody>
</table>

<sup>1</sup>Under normal market conditions, this portfolio invests at least 80% of its net assets in credit default swaps and other financial instruments that in combination have economic characteristics similar to the high yield debt (“junk bonds”) market and/or in high yield debt securities.

<sup>2</sup>Formerly Transamerica Clarion Global Real Estate Securities VP.

<sup>3</sup>Formerly Transamerica Aegon Government Money Market VP.

<sup>4</sup>There can be no assurance that a government money market fund will be able to maintain a stable net asset value per share. During extended periods of low interest rates, and partly as a result of insurance charges, the yield on a government money market fund may become extremely low and possibly negative. You could lose money by investing in a government money market fund.

<sup>5</sup>Formerly Transamerica AB Dynamic Allocation VP.

<sup>6</sup>This portfolio utilizes both a tactical asset allocation strategy and a strategic asset allocation strategy to seek to achieve its objective by investing in underlying funds that consist of ETFs and money market mutual funds. Please see the portfolio’s prospectus for a complete description of the portfolio’s investment strategies and the risks of investing in the portfolio.
<table>
<thead>
<tr>
<th>Portfolio</th>
<th>Investment Adviser/Sub-Adviser</th>
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</thead>
</table>
| Transamerica Jennison Growth VP               | Transamerica Asset Management, Inc.  
Jennison Associates, LLC.                                                                     | Seeks long-term growth of capital.                                                    |
| *Transamerica JPMorgan Asset Allocation – Conservative VP7 | Transamerica Asset Management, Inc.  
J.P. Morgan Investment Management Inc.                                                       | Seeks current income and preservation of capital.                                      |
| *Transamerica JPMorgan Asset Allocation – Growth VP7 | Transamerica Asset Management, Inc.  
J.P. Morgan Investment Management Inc.                                                       | Seeks long-term capital appreciation.                                                 |
| *Transamerica JPMorgan Asset Allocation – Moderate Growth VP7 | Transamerica Asset Management, Inc.  
J.P. Morgan Investment Management Inc.                                                       | Seeks capital appreciation with current income as a secondary objective.               |
| *Transamerica JPMorgan Asset Allocation – Moderate VP7 | Transamerica Asset Management, Inc.  
J.P. Morgan Investment Management Inc.                                                       | Seeks capital appreciation and current income.                                         |
| Transamerica JPMorgan Core Bond VP            | Transamerica Asset Management, Inc.  
JPMorgan Investment Management Inc.                                                            | Seeks capital appreciation with current income as a secondary objective.               |
| Transamerica JPMorgan Enhanced Index VP       | Transamerica Asset Management, Inc.  
J. P. Morgan Investment Management Inc.                                                         | Seeks to earn a total return modestly in excess of the total return performance of the S&P 500® (including the reinvestment of dividends) while maintaining a volatility of return similar to the S&P 500®. |
| *Transamerica JPMorgan International Moderate Growth VP7 | Transamerica Asset Management, Inc.  
J.P. Morgan Investment Management Inc.                                                       | Seeks capital appreciation with current income as a secondary objective.               |
| Transamerica JPMorgan Tactical Allocation VP   | Transamerica Asset Management, Inc.  
J. P. Morgan Investment Management Inc.                                                         | Seeks current income and preservation of capital.                                      |
| Transamerica Managed Risk – Balanced ETF VP   | Transamerica Asset Management, Inc.  
Milliman Financial Risk Management LLC                                                             | Seeks to balance capital appreciation and income.                                    |
| Transamerica Managed Risk – Growth ETF VP     | Transamerica Asset Management, Inc.  
Milliman Financial Risk Management LLC                                                             | Seeks capital appreciation as a primary objective and income as a secondary objective. |

7Each of these asset allocation portfolios is a fund of funds and invests in a combination of underlying portfolios of Transamerica Series Trust and Transamerica Funds. Please see each portfolio’s prospectus for a description of the investment strategy and the risks associated with investing in the portfolio.
<table>
<thead>
<tr>
<th>Portfolio</th>
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</tr>
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</table>
| Transamerica Morgan Stanley Capital Growth VP | Transamerica Asset Management, Inc.  
Morgan Stanley Investment Management Inc. | Seeks to maximize long-term growth.                                                      |
| Transamerica Multi-Managed Balanced VP      | Transamerica Asset Management, Inc.  
Aegon USA Investment Management, LLC  
J. P. Morgan Investment Management Inc. | Seeks to provide a high total investment return through investments in a broadly diversified portfolio of stocks, bonds and money market instruments. |
| *Transamerica PIMCO Tactical-Balanced VP   | Transamerica Asset Management, Inc.  
Pacific Investment Management Company LLC | Seeks a combination of capital appreciation and income.                                  |
| *Transamerica PIMCO Tactical-Conservative VP | Transamerica Asset Management, Inc.  
Pacific Investment Management Company LLC | Seeks a combination of capital appreciation and income.                                  |
| *Transamerica PIMCO Tactical-Growth VP     | Transamerica Asset Management, Inc.  
Pacific Investment Management Company LLC | Seeks a combination of capital appreciation and income.                                  |
| Transamerica PIMCO Total Return VP         | Transamerica Asset Management, Inc.  
Pacific Investment Management Company LLC | Seeks maximum total return consistent with preservation of capital and prudent investment management. |
| *Transamerica QS Investors Active Asset Allocation – Conservative VP* | Transamerica Asset Management, Inc.  
QS Investors, LLC | Seeks current income and preservation of capital.                                        |
| *Transamerica QS Investors Active Asset Allocation – Moderate Growth VP* | Transamerica Asset Management, Inc.  
QS Investors, LLC | Seeks capital appreciation with current income as a secondary objective.                 |
| *Transamerica QS Investors Active Asset Allocation – Moderate VP* | Transamerica Asset Management, Inc.  
QS Investors, LLC | Seeks capital appreciation and current income.                                           |
| Transamerica Small/Mid Cap Value VP        | Transamerica Asset Management, Inc.  
Systematic Financial Management L.P.; Thompson, Siegel & Walmsley, LLC | Seeks to maximize total return.                                                        |
| Transamerica T. Rowe Price Small Cap VP    | Transamerica Asset Management, Inc.  
T. Rowe Price Associates, Inc. | Seeks long-term growth of capital by investing primarily in common stocks of small growth companies. |
| Transamerica Torray Concentrated Growth VP | Transamerica Asset Management, Inc.  
Torray LLC | Seeks to achieve long-term growth of capital.                                             |

*This portfolio invests in a combination of underlying Exchange Traded Funds (“ETFs”). Please see the portfolio’s prospectus for a description of the investment strategy and the risks associated with investing in the portfolio.*
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**FIDELITY FUNDS**

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<tbody>
<tr>
<td>Fidelity VIP Index 500 Portfolio</td>
<td>Fidelity Management &amp; Research Company FMR Co., Inc.; Geode Capital Management, LLC</td>
<td>Seeks investment results that correspond to the total return of common stocks publicly traded in the United States, as represented by the S&amp;P 500® Index.</td>
</tr>
</tbody>
</table>

**ALLIANCEBERNSTEIN VARIABLE PRODUCTS SERIES FUND, INC.:**

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<tr>
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<tbody>
<tr>
<td>AB Balanced Wealth Strategy Portfolio</td>
<td>AllianceBernstein L.P.</td>
<td>Seeks to maximize total return consistent with the Adviser’s determination of reasonable risk.</td>
</tr>
</tbody>
</table>

**FRANKLIN TEMPLETON VARIABLE INSURANCE PRODUCTS TRUST:**

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<tr>
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<tbody>
<tr>
<td>Franklin Allocation VIP Fund</td>
<td>Franklin Advisers, Inc</td>
<td>Seeks capital appreciation, with income as a secondary goal.</td>
</tr>
</tbody>
</table>

**PROFUNDS:**

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<tbody>
<tr>
<td>ProFund VP Asia 30&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks investment results, before fees and expenses, that correspond to the performance of the ProFunds Asia 30 Index.</td>
</tr>
<tr>
<td>ProFund VP Basic Materials&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks investment results, before fees and expenses, that correspond to the performance of the Dow Jones U.S. Basic Materials&lt;sup&gt;SM&lt;/sup&gt; Index.</td>
</tr>
<tr>
<td>ProFund VP Bull&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks investment results, before fees and expenses, that correspond to the performance of the S&amp;P 500® Index.</td>
</tr>
<tr>
<td>ProFund VP Consumer Services&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks investment results, before fees and expenses, that correspond to the performance of the Dow Jones U.S. Consumer Services&lt;sup&gt;SM&lt;/sup&gt; Index.</td>
</tr>
<tr>
<td>ProFund VP Emerging Markets&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks investment results, before fees and expenses, that correspond to the performance of the BNY Mellon Emerging Markets 50 ADR&lt;sup&gt;®&lt;/sup&gt; Index.</td>
</tr>
<tr>
<td>ProFund VP Europe 30&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks investment results, before fees and expenses, that correspond to the performance of the ProFunds Europe 30 Index.</td>
</tr>
<tr>
<td>ProFund VP Falling U.S. Dollar&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks investment results, before fees and expenses, that correspond to the performance of the basket of currencies included in the U.S. Dollar Index&lt;sup&gt;®&lt;/sup&gt;.</td>
</tr>
<tr>
<td>ProFund VP Financials&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks investment results, before fees and expenses, that correspond to the performance of the Dow Jones U.S. Financials&lt;sup&gt;SM&lt;/sup&gt; Index.</td>
</tr>
</tbody>
</table>

<sup>9</sup>Formerly Franklin Founding Funds Allocation VIP Fund.
<sup>10</sup>The ProFunds VP and Access Trust portfolios permit frequent transfers, which in turn may increase portfolio turnover. A high level of portfolio turnover may negatively impact performance by increasing transaction costs. In addition, large movements of assets into and out of a ProFunds or Access Trust VP portfolio may negatively impact a fund’s ability to achieve its investment objective or maintain a consistent level of operating expenses. Please see the ProFunds VP or Access Trust prospectus for a description of the investment objectives and risks associated with investing in the ProFunds or Access Trust VP portfolios.
The ProFunds VP and Access Trust portfolios permit frequent transfers, which in turn may increase portfolio turnover. A high level of portfolio turnover may negatively impact performance by increasing transaction costs. In addition, large movements of assets into and out of a ProFunds or Access Trust VP portfolio may negatively impact a fund’s ability to achieve its investment objective or maintain a consistent level of operating expenses. Please see the ProFunds VP or Access Trust prospectus for a description of the investment objectives and risks associated with investing in the ProFunds or Access Trust VP portfolios.

There can be no assurance that the ProFund VP Government Money Market will be able to maintain a stable net asset value per share. During extended periods of low interest rates, and partly as a result of insurance charges, the yield on the ProFund VP Government Money Market may become extremely low and possibly negative. You could lose money by investing in this Fund.

### Investment Objective

<table>
<thead>
<tr>
<th>Portfolio</th>
<th>Investment Adviser/Sub-Adviser</th>
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</tr>
</thead>
<tbody>
<tr>
<td>ProFund VP Government Money Market&lt;sup&gt;10,11&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks a high level of current income consistent with liquidity and preservation of capital.</td>
</tr>
<tr>
<td>ProFund VP International&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks investment results, before fees and expenses, that correspond to the performance of the MSCI EAFE Index. The fund determines its success in meeting this investment objective by comparing its daily return on a given day with the daily performance of MCSI EAFE futures contracts traded in the United States.</td>
</tr>
<tr>
<td>ProFund VP Japan&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks daily investment results, before fees and expenses, that correspond to the daily performance of the Nikkei 225 Stock Average. The Fund seeks to provide a return consistent with an investment in the component equities in the Index hedged to U.S. dollars. The Fund seeks to provide a return based solely on the local price return of the equity securities in the Index, without any effect from currency movements in the yen versus the U.S. dollar. The Fund determines its success in meeting this investment objective by comparing its daily return on a given day with the daily performance of the dollar-denominated Nikkei 225 futures contracts traded in the United States.</td>
</tr>
<tr>
<td>ProFund VP Mid-Cap&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks investment results, before fees and expenses, that correspond to the performance of the S&amp;P MidCap 400&lt;sup&gt;®&lt;/sup&gt; Index.</td>
</tr>
<tr>
<td>ProFund VP NASDAQ-100&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks investment results, before fees and expenses, that correspond to the performance of the NASDAQ-100&lt;sup&gt;®&lt;/sup&gt; Index.</td>
</tr>
<tr>
<td>ProFund VP Oil &amp; Gas&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks investment results, before fees and expenses, that correspond to the performance of the Dow Jones U.S. Oil &amp; Gas&lt;sup&gt;SM&lt;/sup&gt; Index.</td>
</tr>
<tr>
<td>ProFund VP Pharmaceuticals&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks investment results, before fees and expenses, that correspond to the performance of the Dow Jones U.S. Pharmaceuticals&lt;sup&gt;SM&lt;/sup&gt; Index.</td>
</tr>
<tr>
<td>ProFund VP Precious Metals&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks investment results, before fees and expenses, that correspond to the performance of the Dow Jones Precious Metals&lt;sup&gt;SM&lt;/sup&gt; Index.</td>
</tr>
<tr>
<td>Portfolio</td>
<td>Investment Adviser/Sub-Adviser</td>
<td>Investment Objective</td>
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</tr>
<tr>
<td>ProFund VP Short Emerging Markets&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks daily investment results, before fees and expenses, that correspond to the inverse (-1x) of the daily performance of the BNY Mellon Emerging Markets 50 ADR Index. The fund does not seek to achieve its stated investment objective over a period of time greater than a single day.</td>
</tr>
<tr>
<td>ProFund VP Short International&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks daily investment results, before fees and expenses, that correspond to the inverse (-1x) of the daily performance of the MSCI EAFE Index (the &quot;Index&quot;). The fund does not seek to achieve its stated investment objective over a period of time greater than a single day. The fund determines its success in meeting this investment objective by comparing its daily return on a given day with the inverse (-1x) of the daily performance of MSCI EAFE futures contracts traded in the United States.</td>
</tr>
<tr>
<td>ProFund VP Short NASDAQ-100&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks daily investment results, before fees and expenses, that correspond to the inverse (-1x) of the daily performance of the NASDAQ-100&lt;sup&gt;®&lt;/sup&gt; Index. The fund does not seek to achieve its stated investment objective over a period of time greater than a single day.</td>
</tr>
<tr>
<td>ProFund VP Short Small-Cap&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks daily investment results, before fees and expenses, that correspond to the inverse (-1x) of the daily performance of the Russell 2000&lt;sup&gt;®&lt;/sup&gt; Index. The fund does not seek to achieve its stated investment objective over a period of time greater than a single day.</td>
</tr>
<tr>
<td>ProFund VP Small-Cap&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks investment results, before fees and expenses, that correspond to the performance of the Russell 2000&lt;sup&gt;®&lt;/sup&gt; Index.</td>
</tr>
<tr>
<td>ProFund VP Small-Cap Value&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks investment results, before fees and expenses, that correspond to the performance of the S&amp;P SmallCap 600&lt;sup&gt;®&lt;/sup&gt; Value Index.</td>
</tr>
<tr>
<td>ProFund VP Telecommunications&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks investment results, before fees and expenses, that correspond to the performance of the Dow Jones U.S. Telecommunications&lt;sup&gt;SM&lt;/sup&gt; Index.</td>
</tr>
</tbody>
</table>

<sup>10</sup>The ProFunds VP and Access Trust portfolios permit frequent transfers, which in turn may increase portfolio turnover. A high level of portfolio turnover may negatively impact performance by increasing transaction costs. In addition, large movements of assets into and out of a ProFunds or Access Trust VP portfolio may negatively impact a fund’s ability to achieve its investment objective or maintain a consistent level of operating expenses. Please see the ProFunds VP or Access Trust prospectus for a description of the investment objectives and risks associated with investing in the ProFunds or Access Trust VP portfolios.
<table>
<thead>
<tr>
<th>Portfolio</th>
<th>Investment Adviser/Sub-Adviser</th>
<th>Investment Objective</th>
</tr>
</thead>
<tbody>
<tr>
<td>ProFund VP UltraNASDAQ-100&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks daily investment results, before fees and expenses, that correspond to two times (2x) the daily performance of the NASDAQ-100® Index. The fund does not seek to achieve its stated investment objective over a period of time greater than a single day.</td>
</tr>
<tr>
<td>ProFund VP UltraSmall-Cap&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks daily investment results, before fees and expenses, that correspond to two times (2x) the daily performance of the Russell 2000&lt;sup&gt;®&lt;/sup&gt; Index. The fund does not seek to achieve its stated investment objective over a period of time greater than a single day.</td>
</tr>
<tr>
<td>ProFund VP U.S. Government Plus&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks daily investment results, before fees and expenses, that correspond to one and one-quarter times (1.25x) the daily price movement of the most recently issued 30-year U.S. Treasury Bond. The fund does not seek to achieve its stated investment objective over a period of time greater than a single day.</td>
</tr>
<tr>
<td>ProFund VP Utilities&lt;sup&gt;10&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks investment results, before fees and expenses that correspond to the daily performance of the Dow Jones U.S. Utilities&lt;sup&gt;SM&lt;/sup&gt; Index.</td>
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<tr>
<td>ACCESS TRUST:</td>
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<tr>
<td>Access VP High Yield Fund&lt;sup&gt;10,12&lt;/sup&gt;</td>
<td>ProFund Advisors LLC</td>
<td>Seeks to provide investment results that generally correspond to the total return of the high yield market consistent with maintaining reasonable liquidity.</td>
</tr>
</tbody>
</table>

<sup>10</sup>The ProFunds VP and Access Trust portfolios permit frequent transfers, which in turn may increase portfolio turnover. A high level of portfolio turnover may negatively impact performance by increasing transaction costs. In addition, large movements of assets into and out of a ProFunds or Access Trust VP portfolio may negatively impact a fund’s ability to achieve its investment objective or maintain a consistent level of operating expenses. Please see the ProFunds VP or Access Trust prospectus for a description of the investment objectives and risks associated with investing in the ProFunds or Access Trust VP portfolios.

<sup>12</sup>Under normal market conditions, this portfolio invests at least 80% of its net assets in credit default swaps and other financial instruments that in combination have economic characteristics similar to the high yield debt (“junk bonds”) market and/or in high yield debt securities.

Transamerica Asset Management, Inc. (“TAM”), located at 1801 California Street, Suite 5200, Denver, Colorado 80202-2642, serves as investment adviser to the Transamerica Series Trust (“Series Trust”) and manages the Series Trust in accordance with policies and guidelines established by the Series Trust’s Board of Trustees. TAM is directly owned by Transamerica Premier (77%) and AUSA Holding Company (23%). For certain portfolios, TAM has engaged investment sub-advisers to provide portfolio management services. TAM and each investment sub-adviser are registered investment advisers under the Investment Advisers Act of 1940, as amended. See the Series Trust prospectuses for more information regarding TAM and the investment sub-advisers.

Fidelity Management & Research Company (“FMR”), located at 82 Devonshire Street, Boston, Massachusetts 02109-3605, serves as investment adviser to the Fidelity VIP Funds and manages the Fidelity VIP Funds in accordance with policies and guidelines established by the Fidelity VIP Funds’ Board of Trustees. For certain portfolios, FMR has engaged investment sub-advisers to provide portfolio management services with regard to foreign investments. FMR and each sub-adviser are registered investment advisers under the Investment Advisers Act of 1940, as amended. See the Fidelity VIP Funds prospectuses for more information regarding FMR and the investment sub-advisers.

ProFund Advisors LLC (“ProFund Advisors”), located at 7501 Wisconsin Avenue, Suite 1000, Bethesda, Maryland 20814-6527, serves as the investment adviser and provides management services to all of the ProFunds and the Access Trust portfolios. ProFund Advisors oversees the investment and reinvestment of the assets in each ProFund and Access Trust portfolio in accordance with policies and guidelines established by the ProFunds’ or Access Trust’s Boards. ProFund Advisors is a registered investment adviser under the Investment Advisers Act of 1940, as amended. See the respective ProFunds and/or Access Trust prospectuses for more information regarding ProFund Advisors.
AllianceBernstein L.P., (“AllianceBernstein”) located at 1345 Avenue of the Americas, New York, New York 10105-0302, serves as investment adviser to the AllianceBernstein Variable Products Series Fund, Inc. and manages the AB Balanced Wealth Strategy Portfolio in accordance with the policies and guidelines established by the AllianceBernstein Board of Directors. Please see the prospectus for more information regarding AllianceBernstein L.P.

Franklin Advisers, Inc. (“Franklin”), located at One Franklin Parkway, San Mateo, California 94403-1906, serves as investment adviser to the Franklin Templeton Variable Insurance Products Trust and manages the Franklin Allocation VIP Fund. Franklin oversees the investment and reinvestment of the portfolio’s assets in accordance with policies and guidelines established by the Trust’s Board of Trustees. Please see the portfolio’s prospectus for more information regarding Franklin.

**Selection of Underlying Portfolios**

The underlying portfolios offered through this product are selected by Transamerica Premier. Transamerica Premier may consider various factors, including, but not limited to, asset class coverage, the alignment of the investment objectives of an underlying portfolio with our hedging strategy, the strength of the adviser’s or sub-adviser’s reputation and tenure, brand recognition, performance, and the capability and qualification of each investment firm. Another factor that we may consider is whether the underlying portfolio or its service providers (e.g., the investment adviser or sub-advisers) or its affiliates will make payments to us or our affiliates in connection with certain administrative, marketing, and support services, or whether affiliates of the portfolio can provide marketing and distribution support for sales of the Policies. (For additional information on these arrangements, please refer to the section of this prospectus entitled “Revenues We Receive.”) We review the portfolios periodically and may remove a portfolio or limit its availability to new premiums and/or transfers of cash value if we determine that a portfolio no longer satisfies one or more of the selection criteria, and/or if the portfolio has not attracted significant allocations from policyowners. We have included the Transamerica Series Trust portfolios at least in part because they are managed by TAM, our directly owned subsidiary.

You are responsible for choosing the portfolios, and the amounts allocated to each, that are appropriate for your own individual circumstances and your investment goals, financial situation, and risk tolerance. Because investment risk is borne by you, decisions regarding investment allocations should be carefully considered. We do not recommend or endorse any particular underlying fund portfolio and we do not provide investment advice.

In making your investment selections, we encourage you to thoroughly investigate all of the information that is available to you regarding the portfolios including each fund’s prospectus, statement of additional information and annual and semi-annual reports. Other sources, such as the underlying fund’s website, provide more current information including information about any regulatory actions or investigations relating to a fund or underlying fund portfolio. After you select portfolios for your initial premium, you should monitor and periodically re-evaluate your allocations to determine if they are still appropriate.

You bear the risk of any decline in your cash value resulting from the performance of the portfolios you have chosen.

**Addition, Deletion, or Substitution of Portfolios**

We do not guarantee that each portfolio will always be available for investment through the Policy. We reserve the right, subject to compliance with applicable law, to add new portfolios or portfolio classes, close existing portfolios or portfolio classes, or substitute portfolio shares that are held by any subaccount for shares of a different portfolio. New or substitute portfolios may have different fees and expenses and their availability may be limited to certain classes of purchasers. We will not add, delete or substitute any shares attributable to your interest in a subaccount without notice to you and prior approval of the SEC, to the extent required by the 1940 Act or other applicable law. We may also decide to purchase securities from other portfolios for the separate account. We reserve the right to transfer separate account assets to another separate account that we determine to be associated with the class of contracts to which the Policy belongs.

**Your Right to Vote Portfolio Shares**

Even though we are the legal owner of the portfolio shares held in the subaccounts, and have the right to vote on all matters submitted to shareholders of the portfolios, we will vote our shares only as policyowners instruct, as long as such action is required by law.

Before a vote of a portfolio’s shareholders occurs, you will receive voting materials from us. We will ask you to instruct us on how to vote and to return your voting instructions to us in a timely manner. You will have the right to instruct us on the number of portfolio shares that corresponds to the amount of cash value you have in that portfolio (as of a date set by the portfolio).

If we do not receive voting instructions on time from some policyowners, we will vote those shares in the same proportion as the timely voting instructions we receive. Therefore, because of proportional voting, a small number of policyowners may control the outcome of a vote. Should federal securities laws, regulations and interpretations change, we may elect to vote portfolio shares in our own right. If required by state insurance officials, or if permitted under federal regulation, we may disregard certain owner voting
instructions. If we ever disregard voting instructions, we will send you a summary in the next annual report to policyowners advising you of the action and the reasons we took such action.

**CHARGES AND DEDUCTIONS**

This section describes the charges and deductions that we make under the Policy in consideration for: (1) the services and benefits we provide; (2) the costs and expenses we incur; and (3) the risks we assume. The fees and charges deducted under the Policy may result in a profit to us.

**Services and benefits we provide under the Policy:**
- The death benefit, cash and loan benefits.
- Investment options, including premium allocations.
- Administration of elective options.
- The distribution of reports to owners.

**Costs and expenses we incur:**
- Costs associated with processing and underwriting applications.
- Expenses of issuing and administering the Policy (including any Policy riders).
- Overhead and other expenses for providing services and benefits and sales and marketing expenses, including compensation paid in connection with the sale of the Policies.
- Other costs of doing business, such as collecting premiums, maintaining records, processing claims, effecting transactions, and paying federal, state and local premium and other taxes and fees.

**Risks we assume:**
- That the charges we may deduct may be insufficient to meet our actual claims because insureds die sooner than we estimate.
- That the costs of providing the services and benefits under the Policies may exceed the charges we are allowed to deduct.

Some or all of the charges we deduct are used to pay aggregate Policy costs and expenses we incur in providing the services and benefits under the Policy and assuming the risks associated with the Policy.

**PREMIUM EXPENSE CHARGE**

Before we allocate the net premium payments you make, we will deduct the following premium expense charge.

**For All Except Policies Issued to Residents of Puerto Rico (for Policies applied for on or after September 22, 2008)**

**The premium expense charge is equal to:**
- 6% of premiums during the first ten Policy years on Policies with a specified amount in force of less than $250,000 (Band 1), and 2.5% of premiums thereafter.
- 3.0% of all premiums during the first ten Policy years on Policies with a specified amount in force from $250,000 - $499,999 (Band 2), and 2.5% of premiums thereafter.
- There is no premium expense charge for Policies with a specified amount of $500,000 or higher (Band 3), except for residents of Puerto Rico.

**For Policies Issued to Residents of Puerto Rico (for Policies applied for on or after September 22, 2008)**

- Currently, 10% during the first ten Policy years on Policies with a specified amount of less than $250,000 (Band 1) and 6.5% thereafter; we guarantee this charge will never exceed 12.0% during the first ten Policy years and 8.5% thereafter.
- Currently, 7.0% with a specified amount in force from $250,000 to $499,999 (Band 2) for the first 10 Policy years, and 6.5% thereafter. We guarantee this charge will not exceed 9.0% during the first ten Policy years and 8.5% thereafter.
For residents of Puerto Rico with a specified amount of $500,000 or higher (Band 3), currently, 4.0%. We guarantee this charge will not exceed 6%.

Note: Certain events (such as increases or decreases in the specified amount, a change in death benefit option, or a cash withdrawal (if you choose Option A or Option C death benefit) may affect the specified amount in force. Premium expense charges will be based on the specified amount in force on the Base Policy at the time we receive the premium.

Some or all of the premium expense charges we deduct are used to pay the aggregate policy costs and expenses we incur, including distribution costs and/or state premium taxes. Although state premium tax rates imposed on us vary from state to state, the premium expense charge we deduct will not vary with the state of residence of the policyowner, except for Puerto Rico, as noted above.

MONTHLY DEDUCTIONS

If your Policy was applied for on or after September 22, 2008, we take monthly deductions from the cash value on the Policy date and on each Monthiversary before the insured’s attained age 111. For Policies applied for before September 22, 2008 and issued before January 1, 2009, we take monthly deductions from the cash value on the Policy date and on each Monthiversary prior to attained age 100. Monthly deductions will be taken on a pro-rata basis from each subaccount unless you elect self-directed monthly deductions. You may elect self-directed monthly deductions by sending us a request in a form satisfactory to us. If self-directed monthly deductions are elected, the portion of each monthly deduction taken from each subaccount will equal the monthly deduction multiplied by the selected percentage for that subaccount. If any of the selected subaccounts would be reduced to zero by the current monthly deduction, the monthly deductions will be taken on a pro-rata basis from each subaccount according to the portion of the cash value in each. The change to or from self-directed monthly deductions will be effective on the date we record the change.

Because portions of the monthly deductions (such as cost of insurance) can vary monthly, the monthly deductions will also vary.

Each monthly deduction consists of:

- The monthly Policy charge for the Policy (including any surcharge associated with flat or table substandard ratings); plus
- The monthly cost of insurance charge for the Policy; plus
- The monthly per unit charge for the Policy; plus
- The portion of the monthly deductions for any benefits provided by riders attached to the Policy.

Monthly Policy Charge (for Policies applied for on or after September 22, 2008):

- This charge currently equals $10 each Policy month through attained age 110. Starting at attained age 111, this charge equals $0 each Policy month.
- We guarantee this charge will never be more than $10 per month during the first Policy year and not more than $12 per month through attained age 110 and will be $0 starting at attained age 111.

Monthly Policy Charge (for Policies applied for before September 22, 2008 and issued before January 1, 2009):

- This charge currently equals $8.00 each Policy month for Policy years 1-10 and $4.00 each Policy month for Policy years 11 through attained age 99.
- We guarantee this charge will never be more than $8.00 per month during the first Policy year and thereafter $12.00 per month through attained age 99 and will be $0 starting at attained age 100.

Cost of Insurance Charge:

We deduct this charge each month. It varies each month and is determined as follows:

1. Reduce the death benefit on the Monthiversary by the cash value on the Monthiversary after it has been allocated among the layers of specified amount in force in the following order: first,
initial specified amount, then, each increase in specified amount starting with the oldest increase, then the next oldest, successively, until all cash value has been allocated (the resulting amounts are the net amount at risk for each layer of specified amount).

2. Multiply each layer of net amount at risk provided under 1. (above) by the appropriate monthly cost of insurance rate for that layer; and add the results together.

- Your monthly current cost of insurance rate depends, in part, on your specified amount band. The specified amount bands available are:
  - Band 1: $50,000 - $249,999
  - Band 2: $250,000 - $499,999
  - Band 3: $500,000 or more
- The current Policy cost of insurance rates for the first three (3) Policy years are fixed at issue and we guarantee not to change them.
- Cost of insurance rates are generally lower for each higher band of specified amount.
- We determine your specified amount band each Monthiversary by referring to the specified amount in force for the Base Policy (that is, the initial specified amount on the Policy date, plus any increases, and minus any decreases).

**Monthly Per Unit Charge:**

This charge equals:
- The monthly per unit charge for the specified amount on the Policy date; plus
- The monthly per unit charge for each increase in specified amount caused by either a rider or a requested increase; minus
- The monthly per unit charge for any specified amount that has been decreased.
- We guarantee the duration of this charge to be no more than 10 years following the Policy date and following the date of any increase in specified amount.
- The monthly per unit charge that is set on the Policy date is based on the issue age of the insured. A separate monthly per unit charge is assessed for up to 10 years following each increase in specified amount and the rate of that charge is based on the insured’s issue age at the time of any increase in specified amount. The rate of the monthly per unit charge applied under your Policy depends on whether the Policy was applied for on or after September 22, 2008.

**Optional Insurance Riders:**

- The monthly deductions will include charges for any optional insurance benefits you add to your Policy by rider. Please refer to the section below entitled “Rider Charges” for a description of the rider charges.

To determine the appropriate monthly cost of insurance rates we refer to a schedule of current cost of insurance rates and consider a number of factors, including, but not limited to: the insured’s issue age on the Policy date; issue age at the time of any increase in specified amount; specified amount band; sex; underwriting class; and the length of time from the Policy date or from the date of any increase in specified amount. Cost of insurance rates generally will increase each year with the age of the insured. Cost of insurance rates are generally lower for each higher band of specified amount. The factors that affect the net amount at risk for each layer of specified amount include the investment performance of the portfolios in which you invest, payment of premiums, the fees and charges deducted under the Policy, the death benefit option you choose, as well as any Policy transactions (such as loans, cash withdrawals, transfers, and changes in specified amount). Monthly cost of insurance rates may change from time to time and different monthly cost of insurance rates may apply to increases in the specified amount following the Policy date and any additional death benefit. The actual monthly cost of insurance rates are primarily based on our expectations as to future mortality experience and expenses. The actual rates we charge will never be greater than the Table of Guaranteed Maximum Life Insurance Rates stated in your Policy. For Policies applied for on or after September 22, 2008, these guaranteed rates are based on the 2001 C.S.O. Mortality Tables.
and the insured’s attained age, sex, and underwriting class. *For Policies applied for before September 22, 2008 and issued before January 1, 2009*, these guaranteed rates are based on the 1980 C.S.O. Mortality Tables and the insured’s attained age, sex, and underwriting class.

If you increase the specified amount, different monthly cost of insurance rates may apply to that layer of specified amount, based on factors such as the insured’s issue age and underwriting class at the time of the increase, sex, and the length of time since the increase. Increases in specified amount may move the Policy into a higher specified amount band, resulting in a decrease in the rates for the cost of insurance charge for as long as the Policy remains in the higher specified band and possibly a decrease in the premium expense charges because premium expense charges are based on the specified amount in force on the Base Policy at the time the premium is received.

Decreases in specified amount may cause the Policy to drop into a lower band of specified amount and may result in an increase in the rates for the cost of insurance and premium expense charges. Decreases in specified amount will be applied on a last-in, first-out basis to the specified amount in force, and will first reduce the specified amount provided by the most recent increase in specified amount in force, then reduce the next most recent increases, successively, and thereafter reduce the initial specified amount.

If you have selected the Inflation Fighter Rider Level Premium and you request a decrease in specified amount of your Policy, you will cause the rider to terminate and annual scheduled specified amount increases to stop.

The underwriting class of the insured will affect the cost of insurance rates. In determining underwriting classifications, we apply certain criteria that are based on an assessment of the insured’s life expectancy. We currently place insureds into preferred and standard classes. We also place insureds into substandard classes with extra ratings, which reflect higher mortality risks and will result in higher cost of insurance rates. Examples of reasons an insured may be placed into an extra risk factor underwriting class include, but are not limited to, medical history, avocation, occupation, driving record, or planned future travel (where permitted by state law).

We may issue certain policies on a simplified issue, guaranteed issue or expedited basis. Cost of insurance rates charged for any policies issued on a simplified, guaranteed or expedited basis may cause healthy individuals to pay higher cost of insurance rates than they would pay under a substantially similar policy that we offer using different underwriting criteria.

The guaranteed cost of insurance rates under the riders are based on the same C.S.O. tables as the guaranteed cost of insurance rates on the Base Policy, except that current rates are not guaranteed for any amount of time under the riders.

**MORTALITY AND EXPENSE RISK CHARGES**

We deduct a daily charge from each subaccount that, together with other fees and charges, compensates us for services rendered, the expenses expected to be incurred, and the risks assumed. This charge is equal to:

- The value of each subaccount; multiplied by
- The daily pro rata portion of the annual mortality and expense risk charge rate.

For the first ten Policy years, the current annual rate for the mortality and expense risk charge is equal to 0.75% of the average daily net assets of each subaccount. We may reduce this charge to 0.60% for Policy years 11–15; 0.30% for Policy years 16–20; and 0.00% for Policy years 21+, but we do not guarantee that we will do so. We guarantee this charge to be no more than 0.90% annually for all Policy years.

If this charge, combined with other Policy fees and charges, does not cover our total actual costs for services rendered and expenses incurred, we absorb the loss. Conversely, if these fees and charges more than cover actual costs, the excess is added to our surplus. We expect to profit from these charges.

**SURRENDER CHARGE**

You may surrender your Policy for its cash surrender value at any time upon written request (in good order). If you exercise this option, the Policy and all attached riders will terminate.

If you surrender your Policy completely during the first 10 years (or during the 10-year period following an increase in specified amount), we deduct a surrender charge from your cash value and pay the remaining cash value (less any outstanding loan amount including accrued loan interest) to you. The surrender charge helps us recover distribution expenses that we incur in connection with the Policy, including sales commissions paid to selling firms and printing and advertising costs, as well as aggregate Policy expenses.

The surrender charge is a charge for each $1,000 of the initial specified amount of your Base Policy and of each increase in specified amount. The surrender charge that will apply on a full surrender of the Policy is the total of the surrender charge calculated for the initial specified amount and the surrender charges calculated for each increase in specified amount (including specified amount increases generated by the Inflation Fighter Rider Level Premium). The initial specified amount has a 10-year surrender charge period starting on the Policy date and surrender charges that are based upon the insured’s issue age, sex and underwriting class on the Policy.
date. Each increase in specified amount has its own 10-year surrender charge period and surrender charges that are based upon the insured’s issue age, sex and underwriting class at the time of the increase.

A surrender charge is not assessed when a specified amount decrease occurs but the full surrender charge remains in effect until surrender of the Policy.

The formula we use to compute the surrender charge reduces that charge at older ages in compliance with state laws. There is no surrender charge if you wait until the end of the 10th Policy year to surrender your Policy and you have not selected the Inflation Fighter Rider Level Premium, and you have not increased your specified amount within the past 10 Policy years.

**The surrender charge may be significant. You should evaluate this charge carefully before you consider a surrender.** Under some circumstances, the level of surrender charges might result in no net surrender value available if you surrender your Policy in the early Policy years. This will depend on a number of factors, but is more likely if:

- You pay premiums equal to or not much higher than the minimum monthly guarantee premium shown in your Policy; and/or
- Investment performance is low.

In addition, surrender charges that apply for 10 years after any increase in specified amount will likely significantly reduce your net surrender value.

**The surrender charge for each layer of specified amount is calculated as:**

1. The surrender charge per $1,000 of specified amount in the layer (varies by issue age, sex and underwriting class on the Policy date or date of specified amount increase); **multiplied by**
2. The number of thousands of specified amount in the layer; **multiplied by**
3. The surrender charge factor.

The **surrender charge per thousand** is calculated separately for the initial specified amount and for each increase in specified amount, using the rates found in Appendix A-1 (for Policies applied for on or after September 22, 2008) or Appendix A-2 (for Policies applied for before September 22, 2008 and issued before January 1, 2009).

The **surrender charge factor** is also determined separately for the initial specified amount and for each increase in specified amount in force (including specified amount increases generated by the Inflation Fighter Rider Level Premium). The surrender charge factor varies by the insured’s issue age (on the Policy date or date of specified amount increase) and number of years since the Policy date or date of specified amount increase, but if the Policy has lapsed and been reinstated the surrender charge is based on the amount of time that the Policy or increase in specified amount has been in force with no credit for periods of lapse. In no event are the surrender charge factors any greater than those shown in Appendixes A-1(A) and A-2(A).

Please see “Surrender Charge Factors” in Appendixes A-1(A) and A-2(A)

**TRANSFER CHARGE**

We currently allow you to make 12 transfers each Policy year free of charge. Except as listed below, the charge is $25 for each additional transfer. We deduct the transfer charge from the amount being transferred. We will not increase this charge.

- For purposes of assessing the transfer charge, all transfers made in one day, regardless of the number of subaccounts affected by the transfer, will be considered a single transfer.

- Transfers resulting from loans, the exercise of conversion rights, or the reallocation of cash value immediately after the reallocation date currently **are not treated** as transfers for the purpose of assessing this charge.

- Transfers via the Internet **are not treated** as transfers for the purpose of assessing this charge.

- Transfers among the ProFunds and/or Access Trust subaccounts **are not treated** as transfers for the purpose of assessing this charge.

- Transfers under dollar cost averaging and asset rebalancing currently **are not treated** as transfers for the purpose of assessing this charge.

**LOAN INTEREST RATE CHARGE**

We currently charge you an effective annual interest rate on a Policy loan of 2.75% (3.0% maximum guaranteed) on each Policy anniversary. We will also credit the amount in the loan reserve with an effective annual interest rate of 2.0%. After offsetting the 2.0% interest we credit, the net cost of loans currently is 0.75% annually (1.0% maximum guaranteed). After the 10th Policy year,
we will apply preferred loan rates charged on an amount equal to the cash value; minus total premiums paid (less any cash withdrawals); and minus any outstanding loan amount including accrued loan interest. The current preferred loan effective annual interest rate charged is 2.00% and is guaranteed not to exceed 2.25%. After the insured’s attained age 111 (if your Policy was applied for on or after September 22, 2008) or attained age 100 (if your Policy was applied for before September 22, 2008 and issued before January 1, 2009), all loans, new and existing, are considered preferred loans.

**Cash Withdrawal Charge**

After the first Policy year, you may take one cash withdrawal per Policy year if your surrender value is sufficient to cover the amount of the withdrawal and the associated cash withdrawal charge. When you take a cash withdrawal, we charge a processing fee of $25 or 2% of the amount you withdraw, whichever is less. We deduct this amount from the withdrawal, and we pay you the balance. We will not increase this charge.

**Taxes**

We currently do not make any deductions for taxes from the separate account. We may do so in the future to the extent that such taxes are imposed by federal or state agencies.

**Rider Charges**

The following charges apply if you elect any of the riders available under your Policy as noted below (see “Supplemental Benefits (Riders)”):

- **Living Benefit Rider.** We do not assess an administrative charge for this rider, however, if the rider is exercised, we reduce the single sum benefit by a discount factor to compensate us for income lost due to the early payment of the death benefit. The discount factor is based on the current yield on 90-day Treasury bills or the Policy loan interest rate, whichever is greater. For a complete description of the Living Benefit Rider, please refer to the section entitled “Living Benefit Rider (an Accelerated Death Benefit)” in this prospectus.

- **Primary Insured Rider Plus (“PIR Plus”).** We assess a cost of insurance charge based on the insured’s issue age, sex and underwriting class, and Policy year, and the rider face amount. Charges generally will increase each year with the age of the insured. These charges will vary depending on whether the 1980 C.S.O. Mortality Tables or the 2001 C.S.O. Tables are applicable to your Policy, which depends upon the application and/or issue date of your Policy.

- **Other Insured Rider.** We assess a cost of insurance charge based on each other insured’s issue age, sex and underwriting class, and Policy year, and the rider face amount. Charges generally will increase each year with the age of the insured. These charges will vary depending on whether the 1980 C.S.O. Tables or the 2001 C.S.O. Tables are applicable to your Policy, which depends upon the application and/or issue date of your Policy.

- **Children’s Insurance Rider.** We assess a cost of insurance charge based on the rider face amount regardless of the number of children insured.

- **Accidental Death Benefit Rider.** We assess a cost of insurance charge based on the primary insured’s attained age and rider specified amount. Charges generally will increase each year with the age of the insured.

- **Disability Waiver of Monthly Deductions Rider.** We assess a rider charge based on the primary insured’s issue age, sex and net amount at risk for the Policy, as well as a charge based on those riders that would be eligible to have monthly deductions waived.

- **Disability Waiver of Premium Rider.** The charge for this rider is based on the primary insured’s issue age, sex and the amount of monthly waiver of premium benefit that would be paid in the event of total disability, as defined in the rider.

- **Inflation Fighter Rider Level Premium.** Annual increases in specified amount generated by this rider will increase the cost of insurance charges and increase the amount and duration of the monthly per unit charges and surrender charges under the Policy. Each new layer of surrender charges and monthly per unit charges resulting from the scheduled annual increase in specified amount will be based on the amount of the increase, the insured’s issue age at the time of increase and Policy duration from the date of increase. Each new layer of cost of insurance is based on, among other factors, the insured’s issue age, and the duration of the Policy at the time of the increase.

**Portfolio Expenses**

The value of each subaccount will reflect the fees and expenses paid and received by the corresponding portfolio – including, but not limited to – operating expenses and any 12b-1 fees. Under certain circumstances, the board of directors of a government money market portfolio would have the discretion to impose a liquidity fee on redemptions from the money market.
portfolio and to implement a redemption gate that would temporarily suspend redemptions from the fund. Accordingly, we reserve the right to implement, administer and charge you for any such fee or restriction that may be imposed by the government money market portfolios. This could possibly cause you to lose money on your fund redemption.

Please see the fund prospectuses for more detailed information about the portfolios.

**REVENUES WE RECEIVE**

We (and our affiliates) may directly or indirectly receive payments from the portfolios, their advisers, sub-advisers, distributors or affiliates in connection with certain administrative, marketing and other support services we (and our affiliates) provide and expenses we incur in selling our variable insurance products.

These arrangements are sometimes referred to as “revenue sharing” arrangements and are described further below. While only certain of the types of payments described below may be made in connection with your particular Policy, all such payments may nonetheless influence or impact actions we (and/or our affiliates) take, and recommendations we (and our affiliates) make, regarding each of the variable insurance products that we (and our affiliates) offer, including your Policy.

We (and/or our affiliates) may receive some or all of the following types of payments:

**Rule 12b-1 Fees.** We, and/or our affiliate, Transamerica Capital, Inc. (“TCI”), which is the principal underwriter for the Policies, indirectly receive 12b-1 fees from certain funds available as investment choices under our variable insurance products. Any 12b-1 fees received by TCI that are attributable to our variable insurance products are then credited to us. These fees range from 0.00% to 0.25% of the average daily assets of the certain underlying fund portfolios attributable to the Policies and to certain other variable insurance products that we and our affiliates issue.

**Administrative, Marketing and Support Service Fees (“Support Fees”).** The investment adviser, sub-adviser, administrators, and/or distributors (or affiliates thereof) of the portfolios may make payments to us and/or our affiliates, including TCI. These payments may be derived, in whole or in part, from the profits the investment adviser or sub-adviser realizes on the advisory fee deducted from portfolio assets. Policyowners, through their indirect investment in the portfolios, bear the costs of these advisory fees. (See the prospectuses for the funds for more information.) The amount of the payments we (or our affiliates) receive is generally based on a percentage of the assets of the particular fund portfolios attributable to the Policy and to certain other variable insurance products that our affiliates and we issue. These percentages differ and the amount of payments may be significant. Advisers or sub-advisers (or other affiliates) payments to us vary.

The chart below provides the maximum combined percentages of 12b-1 fees and Support Fees that we anticipate will be paid to us on an annual basis:

<table>
<thead>
<tr>
<th>Incoming Payments to Transamerica Premier and TCI</th>
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</thead>
<tbody>
<tr>
<td><strong>Fund</strong></td>
</tr>
<tr>
<td>Transamerica Series Trust **</td>
</tr>
<tr>
<td>ProFunds</td>
</tr>
<tr>
<td>Alliance Bernstein</td>
</tr>
</tbody>
</table>

*Payments are based on a percentage of the average assets of each fund portfolio owned by the subaccounts that are available under the Policy and under certain other variable insurance products offered by our affiliates and us. We, and/or TCI, may continue to receive 12b-1 fees and administrative fees on subaccounts that are closed to new investments, depending on the terms of the agreements supporting those payments and on the services provided.

**Because the Transamerica Series Trust is managed by an affiliate, there are additional benefits to us and our affiliates for amounts you allocate to the Transamerica Series Trust portfolios, in terms of our and our affiliates’ overall profitability. During 2018 we received $12,423,151.67 in benefits from TAM.

***We receive this percentage once $100 million in fund shares are held by the subaccounts of Transamerica Premier and its affiliates.

**Other payments.** We and our affiliates, including TCI and Transamerica Financial Advisors, Inc. (“TFA”) also directly or indirectly receive additional amounts or different percentages of assets under management from certain advisers and sub-advisers to the portfolios (or their affiliates) with regard to variable insurance products or mutual funds that are issued or managed by us and our affiliates. These payments may be derived in whole or in part, from the profits the investment adviser or sub-adviser receives from the advisory fee deducted from portfolio assets. Policyowners, through their indirect investment in the portfolios, bear the costs of those advisory fees (see the prospectuses for the funds for more information).

Certain advisers and sub-advisers of the underlying Funds (or their affiliates) (1) may directly or indirectly pay TCI conference sponsorship(s) or marketing allowance payments that provide such advisers and sub-advisers with access to TCI’s wholesalers at TCI’s national and regional sales conferences as well as internal and external meetings and events that are attended by TCI’s wholesalers and/or other TCI employees; (2) may pay to TFA, directly or indirectly, varying amounts to obtain access to TFA’s
wholesaling and selling representatives; (3) may provide us and/or certain affiliates and/or selling firms with occasional gifts, meals, tickets or other compensation as an incentive to market the Funds and to assist with their promotional efforts; and (4) may reimburse our affiliated selling firms for exhibit booths and other items at national conferences of selling representatives. The amounts may be significant and these arrangements provide the adviser or sub-adviser (or other affiliates) with increased access to us and to our affiliates involved in the distribution of the Policy.

For the calendar year ended December 31, 2018, TCI and its affiliates received revenue sharing payments that totaled approximately $2,600,000.00. The firms that paid revenue to participate in TCI sponsored events included but were not limited to the following: Aegon Asset Management; Aegon USA Investment Management; Alger; Allianz Global Investors; American Century Investment Management, Inc.; Alliance Bernstein; American Funds; Advent Capital Management, LLC; Barrow, Hanley, Mewhinney & Strauss; Belle Haven Investments; BlackRock Investment Management, LLC; BNY Mellon/Dreyfus; CBRE Clarion Securities; Charles Schwab & Co., Inc.; Columbia Threadneedle Investments; Dimensional Fund Advisors; Deutsche Asset Management; Federated Securities Corp.; Fidelity Investments; Franklin Templeton; Goldman Sachs Asset Management; Hartford Funds; Invesco; Ivy Investments; Janus Henderson Investors; Jennison Associates LLC; John Hancock Investments; JP Morgan Asset Management; Invesco; Legg Mason Global Asset Management; Lord Abbett & Co.; LSV Asset Management; Manning & Napier Advisors; MFS Investment Management; Mesirow Financial; Milliman Financial Risk Management LLC; Morgan Stanley Investment Management Inc.; Morningstar Advisers; Natixis Global Asset Management; Neuberger Berman; New York Life/Mainstay Investments; Oppenheimer Funds, Inc.; Pacific Investment Management Company; PGIM Investments; Principal Global Investors; PineBridge Investments LLC; Pinnacle Financial; Amundi Pioneer Investment Management, Inc.; Putnam Investments; Rockefeller & Co.; Schroder Investment Management; State Street Global Advisors; Systematic Financial Management; T. Rowe Price; Thompson, Siegel & Walmsley; Torray; The Vanguard Group, Inc.; Virtus Investment Partners; Voya Investment Management; Wellington Management Company; and Wells Fargo Asset Management.

Please Note: Some of the aforementioned advisers and/or sub-advisers may not be associated with underlying fund portfolios currently available in this product.

Proceeds from certain of these payments by the Funds, the advisers, the sub-advisers and/or their affiliates may be profit to us, and may be used for any corporate purpose, including payment of expenses (i) that we and our affiliates incur in promoting, issuing, marketing and administering the Policies; and (ii) that we incur, in our role as intermediary, in promoting and marketing the fund portfolios.

For further details about the compensation payments we make in connection with the sale of the Policies, see “Sale of the Policies” in this prospectus.

THE POLICY

Depending on the state of issue, your Policy may be an individual Policy or a certificate issued under a group policy. The Policy is subject to the insurance laws and regulations of each state or jurisdiction in which it is available for distribution. There may be differences between the Policy issued and the general Policy description contained in this prospectus because of requirements of the state where your Policy is issued. Some of the state specific differences are included in the prospectus, but this prospectus does not include references to all state specific differences. All state specific Policy features will be described in your Policy.

OWNERSHIP RIGHTS

The Policy belongs to the owner named in the application. The owner may exercise all of the rights and options described in the Policy. If the owner dies before the insured and no contingent owner is named, then ownership of the Policy will pass to the owner’s estate.

The principal rights an owner may exercise are:

- To designate or change beneficiaries before the death of the insured.
- To receive amounts payable before the death of the insured.
- To assign the Policy. (If you assign the Policy, your rights and the rights of anyone who is to receive payment under the Policy are subject to the terms of that assignment.).
- To change the owner of the Policy.
- To change the specified amount or death benefit option type of the Policy.

Prior to issue, the owner must select either the Guideline Premium Tax Test or the Cash Value Accumulation Tax Test on the Policy application. Once selected, this tax test cannot be changed.

No designation or change in designation of an owner will take effect unless we receive a transfer of ownership form. The request will take effect as of the date we receive it, in good order, at our mailing address, or by fax at our administrative office (1-727-299-1620), subject to payment or other action taken by us before it was received.
MODIFYING THE POLICY

Any modifications or waiver of any rights or requirements under the Policy must be in writing, in good order, and signed by our president or secretary. Note: No registered representative may bind us by making any promise not contained in the Policy.

Upon notice to you, we may amend the Policy:

- To make the Policy or the separate account comply with any law or regulation issued by a governmental agency to which we are subject; or
- To assure qualification of the Policy as a life insurance policy under the Internal Revenue Code or to meet applicable requirements of federal or state laws relating to variable life policies; or
- To reflect a change in the operation of the separate account; or
- To provide additional subaccounts and/or fixed account options.

PURCHASING A POLICY (NOTE: THIS POLICY IS NOT AVAILABLE FOR NEW SALES)

To purchase a Policy, you must submit a completed application, in good order, and an initial premium to us through any licensed life insurance agent who is also a registered representative of a broker-dealer having a selling agreement with TCI (the principal underwriter for the Policy) and us. We may reject the application at any time before issuing a Policy.

There may be delays in our receipt and processing of applications and premium payments that are outside of our control – for example, because of the failure of a selling broker-dealer or registered representative to promptly forward the application to us at our mailing address, or because of delays in determining whether the Policy is suitable for you. Any such delays will affect when your Policy can be issued.

You select the specified amount of insurance coverage for your Policy within the following limits. Our current minimum specified amount for a Policy is generally $50,000. We currently charge lower cost of insurance rates for Policies with specified amounts in higher bands of coverage. We offer the following specified amount bands of coverage:

- Band 1: $50,000 - $249,999
- Band 2: $250,000 - $499,999
- Band 3: $500,000 and over

TAX-FREE SECTION 1035 EXCHANGES

You can generally exchange one life insurance policy for another policy covering the same insured in a “tax-free exchange” under Section 1035 of the Internal Revenue Code. Before making an exchange, you should compare both life insurance policies carefully. Remember that if you exchange another life insurance policy for the one described in this prospectus, you might have to pay a surrender charge on your old policy, other charges may be higher (or lower), and the benefits may be different. If the exchange does not qualify for Section 1035 treatment, or if your current policy is subject to a policy loan, you may also have to pay federal income tax on the exchange. Additionally, if you are under age 59½ then you also may be subject to a federal tax penalty equal to 10% of the taxable amount. You should not exchange another life insurance policy for this one unless you determine, after knowing all the facts, that the exchange is in your best interest and not just better for the person selling you the Policy. (That person will generally earn a commission if you buy this Policy through an exchange or otherwise.)

WHEN INSURANCE COVERAGE TAKES EFFECT

Except as provided in the conditional receipt (“Conditional Receipt”), if issued, or in connection with certain Section 1035 Exchanges, insurance coverage under the Policy will not take effect until after all of the following conditions have been met: (1) the first full premium must be received by the Company at our mailing address; (2) during the lifetime of every proposed insured, the proposed owner must have personally received and accepted the Policy which was applied for and all answers on the application must be true and correct on the date such Policy is received and accepted; and (3) on the date of the later of either (1) or (2) above, all of the statements and answers given in the application must be true and complete, and there must have been no change in the insurability of any proposed insured.
Conditional Insurance Coverage. If you pay the full initial premium and have met all of the requirements listed in the Conditional Receipt attached to the application, and we deliver the Conditional Receipt to you, the insured may have conditional insurance coverage under the terms of the Conditional Receipt. The conditional insurance coverage may vary by state and/or underwriting standards. Because we do not accept initial premiums in advance for Policies with a specified amount in excess of $1,000,000, we do not offer conditional insurance coverage for those Policies. Conditional insurance coverage is void if the check or draft you gave us to pay the initial premium is not honored when we first present it for payment.

The aggregate amount of conditional insurance coverage, if any, is the lesser of:

- The amounts applied for under all Conditional Receipts issued by us; or
- $500,000 of life insurance.

Subject to the conditions and limitations of the Conditional Receipt, conditional insurance under the terms of the Policy applied for may become effective as of the later of:

- The date of application; or
- The date of the last medical examination, test, and other screenings required by us, if any (the “Effective Date”). Such conditional insurance will take effect as of the Effective Date, as long as all of the following requirements are met:
  1. The person proposed to be insured is found to have been insurable as of the Effective Date, exactly as applied for in accordance with our underwriting rules and standards, without any modifications as to plan, amount, or premium rate.
  2. As of the Effective Date, all statements and answers given in the application must be true.
  3. The payment made with the application must not be less than the full initial premium for the mode of payment chosen in the application and must be received at our mailing address within the lifetime of the proposed insured.
  4. All medical examinations, tests, and other screenings required of the proposed insured by us are completed and the results received at our mailing address within 60 days of the date the application was signed.
  5. All parts of the application, any supplemental application, questionnaires, addendum and/or amendment to the application are signed and received, in good order, at our mailing address.

Any conditional life insurance coverage terminates on the earliest of:

- 60 days from the date the application was signed;
- The date we either mail notice to the applicant of the rejection of the application and/or mail a refund of any amounts paid with the application;
- When the insurance applied for goes into effect under the terms of the Policy that you applied for; or
- The date we offer to provide insurance on terms that differ from the insurance for which you have applied.

Special limitations of the Conditional Receipt:

- The Conditional Receipt is not valid unless:
  1. All blanks in the Conditional Receipt are completed; and
  2. The receipt is signed by an authorized Company representative.

Other limitations:

- There is no Conditional Receipt coverage for riders or any additional benefits, if any, for which you may have applied.
- If one or more of the receipt’s conditions have not been met exactly, or if a proposed insured dies by suicide, we will not be liable except to return any payment made with the application.
• If we do not approve and accept the application within 60 days of the date you signed the application, the application will be deemed to be rejected by us and there will be no conditional insurance coverage. In that case, Transamerica Premier’s liability will be limited to returning any payment(s) you have made upon return of this receipt to us.

For 1035 Exchanges. Coverage may begin earlier in Section 1035 exchange situations as provided in the “Absolute Assignment to Effect Internal Revenue Code Section 1035 Exchange and Rollover” form. As provided in that form, the insurance coverage shall take effect as of the date the replaced policy is surrendered, and before delivery of the Policy, if the following conditions have been met:

The Policy has been approved for issue – even if approved other than as applied for - and accepted in writing by the proposed owner and either:

1. The replaced policy has been surrendered and the surrender proceeds thereafter received by the Company are themselves sufficient to place the Policy in force; or

2. If, in addition to the surrender of the replaced policy from the existing issuer, premium is paid during the proposed insured’s lifetime (either with the application for the Policy or thereafter if permitted by the Company in writing) and if such premium together with any surrender proceeds thereafter received, are sufficient to place the Policy in force.

Charges will be applied beginning on the date that the coverage takes effect.

Full Insurance Coverage and Allocation of Initial Premium. Once we determine that the insured meets our underwriting requirements and you have paid the initial premium, full insurance coverage will commence and we will begin to take the monthly deductions from your net premium. This date is the Policy date (or the record date if the Policy is backdated). Any premium payments we receive before the Policy date (or record date, if applicable) will be held in a non-interest bearing suspense account. On the Policy date (or the record date if your Policy is backdated), the entire amount in the non-interest bearing suspense account will be allocated as follows: (i) to the subaccounts and/or the fixed account as you specified in your application, if your state does not require a full refund of initial premium; or (ii) to the reallocation account, if your state requires us to return your initial premium in the event you exercise your free look right. While held in the reallocation account, premium(s) will be credited with interest at the current fixed account rate until the reallocation date when they will be allocated to the subaccounts and/or fixed account as you specified in your application. Please Note: If a Policy is backdated, your premiums are credited on the record date and not the backdated Policy date.

On any day we credit net premiums or transfer cash value to a subaccount, we will convert the dollar amount of the net premium (or transfer) into subaccount units at the unit value for that subaccount, determined at the end of the day on which we receive the premium or transaction request. We will credit amounts to the subaccounts only on a valuation date, that is, on a date the New York Stock Exchange (“NYSE”) is open for trading, but no later than 4:00 p.m. Eastern Time. (If a premium or transaction is received after 4 p.m. Eastern Time, we will process the requested transaction the next available day that the NYSE is open.) This is true whether a requested transaction comes in via fax, wire or other electronic means, or by telephone.

<table>
<thead>
<tr>
<th>Transaction Type:</th>
<th>Priced when received at our:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payment by Check</td>
<td>Mailing Address, unless a different address appears on your Billing Coupon</td>
</tr>
<tr>
<td>Transfer Request</td>
<td>Administrative Office</td>
</tr>
<tr>
<td>Payment by Wire Transfer</td>
<td>Administrative Office</td>
</tr>
<tr>
<td>Electronic Credit and Debit Transactions (e.g., payments through direct deposit, debit transfers, and forms of e-commerce payments)</td>
<td>Administrative Office</td>
</tr>
</tbody>
</table>

BACKDATING A POLICY

If you request, we may backdate a Policy by assigning a Policy date earlier than the date full insurance coverage begins. However, in no event will we backdate a Policy earlier than the earliest date allowed by state law or by our underwriting rules. Your request must be in writing and, if we approve the request, we will amend your application. Your premiums, however, will be credited on the date the Policy is issued, not the backdated Policy date. Please Note: State specific rules may apply to a request to backdate a policy. Please contact your registered representative for further information.

Cost of insurance charges are based in part on the age of the insured on the Policy date or on the date of a requested increase in specified amount. Generally, cost of insurance charges are lower at a younger age. We will deduct the monthly deductions, including cost of insurance charges, for the period that the Policy is backdated. This means that while the monthly deductions may
be lower than what would have been charged had we not backdated the Policy, you will be paying for insurance during a period when the Policy was not in force.

POLICY CHANGES

After Attained Age 111 (For Policies Applied for On Or After September 22, 2008) Or After Attained Age 100 (For Policies Applied for Before September 22, 2008 and Issued Before January 1, 2009)

If the Policy is still in force on the Policy anniversary on or following the insured’s 111th or 100th birthday, as applicable, the Policy will continue, with the following changes, unless state law otherwise requires:

- We will not accept any further premium payments.
- We will no longer deduct the monthly deductions.
- We will continue to deduct the mortality and expense risk charge, if any.
- Interest will continue to accrue on any Policy loans, as before, but all loans, new and existing, will be considered preferred loans.
- We will continue to accept Policy loan repayments and loan interest payments.
- We will continue to permit Policy loans and withdrawals to be made.

Please Note: Continuing a Policy beyond the insured’s 99th birthday may have tax consequences. You should consult a tax advisor if you intend to keep the Policy in force beyond the insured’s 99th birthday. Please see the “Federal Income Tax Considerations” section of this prospectus.

PREMIUMS

ALLOCATING PREMIUMS

You must instruct us on how to allocate your net premium among the subaccounts and the fixed account according to these guidelines:

- Allocation percentages must be in whole numbers.
- If you select dollar cost averaging, we may require you to have a minimum of $5,000 in each subaccount from which we will make transfers and you may be required to transfer at least a total of $100 monthly.
- If you select asset rebalancing, the cash value of your Policy (if an existing Policy) or your minimum initial premium (if a new Policy) must be at least $5,000.
- Unless otherwise required by state law, we may restrict allocations and transfers to the fixed account if the fixed account value (excluding amounts in the loan reserve account) following the allocation or transfer would exceed $250,000. (This restriction does not apply to any transfer to the fixed account necessary in the exercise of conversion rights.)

Currently, you may change the allocation instructions for additional premium payments without charge at any time by writing us at our mailing address or calling us at our administrative office at 1-800-851-9777, Monday - Friday, between the hours of 8:30 a.m. - 7:00 p.m. Eastern Time. You may also change your allocations through our web site at www.premier.transamerica.com.

Please Note: Certain subaccounts have similar names. When providing your allocation instructions, please state or write the full name of the subaccount that you select for your allocation to ensure that those allocation instructions are in good order. The change will be effective as of the valuation date on which we receive the change request, in good order, at our mailing address or our administrative office. Upon instructions from you, your authorized representative for your Policy may also change your allocation instructions for you. The minimum amount you can allocate to a particular subaccount is 1.0% of a net premium payment.

Whenever you direct money into a subaccount, we will credit your Policy with the number of units for that subaccount that can be bought for the dollar payment. Premium payments received at our mailing address, or at the address on your billing coupon (for payments made by check), or at our administrative office (for payments made by wire transfer and through electronic credit and debit transactions) before the NYSE closes, are priced using the unit value determined at the closing of the regular business session of the NYSE (usually at 4:00 p.m. Eastern Time). If we receive a premium payment after the NYSE closes or on a day that the NYSE is closed for trading, we will process the order using the subaccount unit value determined at the close of the next regular session of the NYSE. We will credit amounts to the subaccounts only on a valuation date, that is, on a date the NYSE is open for trading. Your cash value will vary with the investment experience of the subaccounts you have chosen. You bear the investment risk for amounts you allocate to the subaccounts.

You should periodically review how your cash value is allocated among the subaccounts and the fixed account because market conditions and your overall financial objectives may change.
**Allocation Account.** If your state requires us to return your initial premium in the event you exercise your free look right, we will allocate the initial net premium on the Policy date (or the record date if your Policy is backdated) to the reallocation account as shown on your Policy schedule page. While held in the reallocation account, net premium(s) will be credited with interest at the current fixed account rate and reduced by any monthly deductions due. The net premiums will remain in the reallocation account until the reallocation date. In those states that require us to return all premiums paid for the Policy in the event you exercise your free look right, we set the reallocation date to coincide with the free look period that is applicable to your Policy plus a margin of five days for Policy delivery. Please contact your registered representative for details concerning the free look period for your state.

On the first valuation date on or after the reallocation date, we will reallocate all cash value from the reallocation account to the fixed account and the subaccounts you selected on the application. If, however, you requested dollar cost averaging, we will reallocate the cash balance on the reallocation date to the fixed account, the Transamerica BlackRock Government Money Market VP subaccount or the Transamerica JPMorgan Core Bond VP subaccount (depending on which subaccounts you selected on your application).

**Please Note:** For states that do not require a full refund of the initial premium, the reallocation date is the same as the Policy date. On the Policy date, we will allocate your initial net premium, minus monthly deductions, to the fixed account and the subaccounts in accordance with the instructions you gave us on your application.

**Premium Flexibility**

You generally have flexibility to determine the frequency and the amount of the premiums you pay. Before we issue the Policy to you, we may require you to pay a premium at least equal to a minimum monthly guarantee premium set forth in your Policy. Thereafter (subject to the limitations described below), you may make premium payments at any time and in an amount of at least $50. Under some circumstances, you may be required to pay extra premiums to prevent a lapse. Your minimum monthly guarantee premium may change if you request a change in your Policy. If this happens, we will notify you of the new minimum monthly guarantee premium. See “Minimum Monthly Guarantee Premium” below.

**Planned Periodic Payments**

You can determine a planned periodic payment schedule, which allows you to pay level premiums at fixed intervals over a specified period of time. The amount and frequency you choose will be shown in your Policy. You are not required to pay premiums according to this schedule. You may change the amount, frequency, and the time period over which you make your planned periodic payments. Please be sure to notify us or your selling firm of any address changes so that we may be able to keep your current address on record.

Even if you make your planned periodic payments on schedule, your Policy still may lapse. How long your Policy remains in force depends on the Policy’s net surrender value. If the net surrender value is not high enough to pay the monthly deductions when due (and your no lapse period has expired) then your Policy will lapse (unless you make the payment we specify during the 61-day grace period).

**Minimum Monthly Guarantee Premium**

The full initial premium is the only premium you are required to pay under the Policy. However, you greatly increase your risk of lapse if you fail to regularly pay premiums at least as large as the current minimum monthly guarantee premium.

The initial minimum monthly guarantee premium is set forth on your Policy’s schedule page, and depends on a number of factors, including the issue age, sex, ratable class of the insured, the specified amount requested and your Policy’s applicable C.S.O. Table. We will adjust the minimum monthly guarantee premium if you change death benefit options, increase or decrease the specified amount, if any riders are added or terminated, or if in force riders are increased or decreased. We will notify you of the new minimum monthly guarantee premium. A Policy with the Inflation Fighter Rider Level Premium initially has higher minimum monthly guarantee premiums than a Base Policy, but the minimum monthly guarantee premium does not increase annually. We also reserve the right to require, before we issue a Policy, that the initial premium plus the planned premium payable during the no lapse period is at least equal to the cumulative minimum monthly guarantee premiums during the no lapse period.

**No Lapse Guarantee**

Until the no lapse date shown on your Policy schedule page, your Policy will remain in force and no grace period will begin, even if your net surrender value is too low to pay the monthly deductions, as long as on any Monthiversary the total amount of the premiums you have paid **(minus any cash withdrawals, minus any outstanding loan amount including any accrued loan interest)** equals or exceeds the sum of the minimum monthly guarantee premiums in effect for each month from the Policy date up to, and including, the current month. (Your initial minimum monthly guarantee premium is shown on your Policy schedule page. You may obtain information about your minimum monthly guarantee premium and assistance to determine the amount of premiums you must pay to keep your Policy in force by contacting our administrative office.) If you take a cash withdrawal or a loan, or if you increase or
decrease your specified amount, or if you add, increase, or decrease a rider, you may need to pay additional premiums in order to keep the no lapse guarantee in effect. Please see the section of this prospectus entitled “Policy Lapse and Reinstatement.”

After the no lapse period guarantee ends, paying the current minimum monthly guarantee premium each month will not necessarily keep your Policy in force. You may need to pay additional premiums to keep the Policy in force.

For a Policy issued to any insured with an issue age of 0-60, the no lapse date is the 20th Policy anniversary or the insured’s attained age 65, whichever is earlier. For a Policy issued to an insured with an issue age of 61-85, the no lapse date is the 5th Policy anniversary. The no lapse date is specified in your Policy.

PREMIUM LIMITATIONS & PAYMENTS

We will not allow you to make any premium payments that would cause the total amount of the premiums you pay to exceed the current maximum premium limitations, if applicable, by which the Policy qualifies as life insurance under federal tax laws. (See “Death Benefit” for more information regarding the Guideline Premium Test.)

This maximum is set forth in your Policy. If you make a payment that would cause your total premiums to be greater than the maximum premium limitations, we generally will return the excess portion of the premium payment, with interest, within 60 days after the end of the Policy year. If you choose the Guideline Premium Test there are additional premium limitations. We will not accept a payment that will cause the Policy to become a modified endowment contract without your consent. (Please see the section of this prospectus entitled “Federal Income Tax Considerations” for more information concerning your Policy or consult a qualified tax advisor.)

We may require premium payments to be at least $50 (1,000 by wire). If the payment is made by monthly direct deposit, we may require minimum payments of $75. We may return premiums less than the minimum.

Note: We reserve the right to reject any form of payment. Any unacceptable forms of payment will be returned.

Wire Transfers. We will accept premium payments by wire transfer. If you wish to make payments by wire transfer, you should contact our administrative office at 1-800-851-9777 for instructions on wiring funds to us. Certain charges are deducted from the premium payments you make.

Tax-Free Exchanges (“1035 Exchanges”). We will accept a part or all of your initial premiums from one or more contracts insuring the same insured that qualify for tax-free exchanges under Section 1035 of the Internal Revenue Code. If you contemplate such an exchange, you should consult a competent tax advisor to learn the potential tax effects of such a transaction.

TRANSFERS

GENERAL

You or your authorized representative of record may make transfers among the subaccounts or among the subaccounts and the fixed account. You will be bound by any transfers made by your authorized representative. We determine the amount you have available for transfers at the end of the valuation period when we receive your transfer request. We may, at any time, discontinue transfer privileges, modify our procedures, or limit the number of transfers we permit.

The following features apply to transfers under the Policy:

- Your Policy may be limited to a cumulative transfer from the fixed account each Policy year of the greater of 25% of the amount in the fixed account, or the amount transferred out of the fixed account the previous Policy year. However, the transfer may not be greater than the unloaned portion of the fixed account on that date. See “Fixed Account Transfers.”
- Currently we do not, but reserve the right to, limit the amount of and the number of transfers out of the fixed account to one per Policy year. If we modify or stop our current practices, we will notify you at the time of your transfer.
- Unless otherwise required by state law, we may restrict transfers to the fixed account, if the fixed account value, excluding amounts in the loan reserve account, following the transfer would exceed $250,000. This restriction does not apply to any transfer to the fixed account necessary in the exercise of conversion rights.
- You may request transfers in writing (in a form we accept) to our mailing address, by fax or by telephone to our administrative office, or electronically through our website (www.premier.transamerica.com). Please Note: Certain subaccounts have similar names. It is important that you state or write the full name of the subaccount when making a transfer request to ensure that any transfer request that you submit is in good order.
There is no minimum amount that must be transferred.
There is no minimum amount that must remain in a subaccount after a transfer.
Except as listed below, we may deduct a $25 charge from the amount transferred for each transfer in excess of 12 transfers in a Policy year:
1. We consider all transfers made in any one day to be a single transfer.
2. Transfers resulting from loans or the exercise of conversion rights, or due to reallocation of cash value immediately after the reallocation date are currently not treated as transfers for the purpose of assessing the transfer charge.
3. Transfers via the Internet are not treated as transfers for the purpose of assessing the transfer charge.
4. Transfers among the ProFunds or Access Trust subaccounts are not treated as transfers for the purpose of assessing the transfer charge.
5. Transfers under asset rebalancing and dollar cost averaging currently are not treated as transfers for purpose of assessing the transfer charge.

We will process any transfer order that is received, in good order, in writing at our mailing address, or by fax or by telephone at our administrative office, before the NYSE closes (usually 4:00 p.m. Eastern Time) using the subaccount unit value determined at the end of that session of the NYSE. If we receive the transfer order after the NYSE closes, or on a day that the NYSE is closed for trading, we will process the order using the subaccount unit value determined at the close of the next regular business session of the NYSE. (If you send your request by fax, be sure to use the correct fax number. Please see “Telephone, Fax and Online Privileges.”)

Market Timing and Disruptive Trading

The market timing policy and the related procedures (discussed below) do not apply to the ProFunds or Access Trust subaccounts because the corresponding portfolios are specifically designed to accommodate frequent transfer activity. If you invest in the ProFunds or Access Trust subaccounts, you should be aware that you may bear the costs and increased risks of frequent transfers discussed below and they may have a greater risk than other portfolios of suffering the harmful effects of market timing and disruptive trading.

Statement of Policy. This variable insurance Policy was not designed to accommodate market timing or facilitate frequent or large trading through transfers among the subaccounts or between the subaccounts and the fixed account by market timers or frequent or disruptive traders. (Both frequent and large transfers may be considered disruptive.)

Market timing and disruptive trading can adversely affect you, other policyowners, beneficiaries and underlying fund portfolios. The adverse effects include:

1. Dilution of the interests of long-term investors in a subaccount if purchases or transfers into or out of an underlying fund portfolio are made at prices that do not reflect an accurate value for the underlying fund portfolio’s investments (some market timers attempt to do this through methods known as “time-zone arbitrage” and “liquidity arbitrage”);
2. An adverse effect on portfolio management, such as (a) impeding a portfolio manager’s ability to sustain an investment objective; (b) causing the underlying fund portfolio to maintain a higher level of cash than would otherwise be the case; or (c) causing an underlying fund portfolio to liquidate investments prematurely (or otherwise at an inopportune time) in order to pay withdrawals or transfers out of the underlying fund portfolio; and
3. Increased brokerage and administrative expenses.

These risks and costs are borne by all policyowners invested in those subaccounts, not just those making the transfers.

We have developed policies and procedures with respect to market timing and disruptive trading (which vary for certain subaccounts at the request of the corresponding underlying fund portfolios) and we do not make special arrangements or grant exceptions to accommodate market timing or potentially disruptive trading. As discussed herein, we cannot detect or deter all market timing or potentially disruptive trading. Do not invest with us if you intend to conduct market timing or potentially disruptive trading or have concerns about our inability to detect or prevent any such trading.

Detection. We employ various means in an attempt to detect and deter market timing and disruptive trading. However, despite our monitoring we may not be able to detect nor halt all harmful trading. In addition, because other insurance companies (and retirement plans) with different policies and procedures may invest in the underlying fund portfolios, we cannot guarantee that all harmful trading will be detected or that an underlying fund portfolio will not suffer harm from market timing and disruptive trading among subaccounts of variable products issued by these other insurance companies or retirement plans.
**Deterrence.** If we determine that you or anyone acting on your behalf is engaged in market timing or disruptive trading, we may take one or more actions in an attempt to halt such trading. Your ability to make transfers is subject to modification or restriction if we determine, in our sole opinion, that your exercise of the transfer privilege may disadvantage or potentially harm the rights or interests of other policyowners (or others having an interest in the variable insurance products). As described below, restrictions may take various forms, but under our current policies and procedures will include loss of expedited transfer privileges. We consider transfers by telephone, fax, overnight mail, or the Internet to be “expedited” transfers. This means that we would accept only written transfer requests with an original signature sent to us only by U.S. mail. We may also restrict the transfer privileges of others acting on your behalf, including your registered representative or an asset allocation or investment advisory service.

We reserve the right to reject any premium payment or transfer request from any person without prior notice, if, in our judgment, (1) the premium payment or transfer, or series of premium payments or transfers, would have a negative impact on an underlying fund portfolio’s operations, or (2) if an underlying fund portfolio would reject or has rejected our purchase order or has instructed us not to allow that purchase or transfer, or (3) because of a history of market timing or disruptive trading.

We may impose other restrictions on transfers, or even prohibit transfers for any policyowner who, in our view, has abused, or appears likely to abuse, the transfer privilege on a case-by-case basis. We may, at any time and without prior notice, discontinue transfer privileges, modify our procedures, impose holding period requirements or limit the number, size, frequency, manner, or timing of transfers we permit. We also reserve the right to reverse a potentially harmful transfer if an underlying fund portfolio refuses or reverses our order; in such instances some policyowners may be treated differently than others in that some transfers may be reversed and others allowed. For all of these purposes, we may aggregate two or more trades or variable insurance products that we believe are connected by policyowners or persons engaged in trading on behalf of policyowners.

In addition, transfers for multiple policies invested in the Transamerica Series Trust underlying fund portfolios which are submitted together may be disruptive at certain levels. At the present time, such aggregated transactions likely will not cause disruption if less than one million dollars total is being transferred with respect to any one underlying fund portfolio (a smaller amount may apply to smaller portfolios). Please note that transfers of less than one million dollars may be disruptive in some circumstances; we may change the maximum dollar amount of permitted transfers quickly and without notice.

**Please Note:** If you engage a third party investment adviser for asset allocation services, then you may be subject to these transfer restrictions because of the actions of your investment adviser in providing these services.

In addition to our internal policies and procedures, we will administer your variable life policy to comply with any applicable state, federal, and other regulatory requirements concerning transfers. We reserve the right to implement, administer, and charge you for any fee or restriction, including redemption fees, imposed by any underlying fund portfolio. To the extent permitted by law, we also reserve the right to defer the transfer privilege at any time that we are unable to purchase or redeem shares of any of the underlying fund portfolios.

Under our current policies and procedures, we do not:
- impose redemption fees on transfers; or
- expressly limit the number or size of transfers in a given period except for certain subaccounts where an underlying fund portfolio has advised us to prohibit certain transfers that exceed a certain size; or
- provide a certain number of allowable transfers in a given period.

Redemption fees, transfer limits, and other procedures or restrictions imposed by the underlying funds or our competitors may be more or less successful than ours in deterring market timing or other disruptive trading and in preventing or limiting harm from such trading.

We do not impose any prophylactic transfer restrictions. In the absence of any such restrictions (e.g., expressly limiting the number of trades within a given period or limiting trades by their size), it is possible that some level of market timing and disruptive trading will occur before it is detected and we take steps to deter it.

Please note that the limits and restrictions described herein are subject to our ability to monitor transfer activity. Our ability to detect market timing or disruptive trading may be limited by operational and technological systems, as well as by our ability to predict strategies employed by policyowners (or those acting on their behalf) to avoid detection. As a result, despite our efforts to prevent harmful trading activity among the variable investment options available under this variable insurance product, there is no assurance that we will be able to detect or deter market timing or disruptive trading by such policyowners or intermediaries acting on their behalf. Moreover, our ability to discourage and restrict market timing or disruptive trading may be limited by decisions of state regulatory bodies and court orders that we cannot predict.
Furthermore, we may revise our policies and procedures in our sole discretion at any time and without prior notice, as we deem necessary or appropriate (1) to better detect and deter harmful trading that may adversely affect other policyowners, other persons with material rights under the variable insurance products, or underlying fund shareholders generally, (2) to comply with state or federal regulatory requirements, or (3) to impose additional or alternative restrictions on policyowners engaging in market timing or disruptive trading among the investment options under the variable insurance product. In addition, we may not honor transfer requests if any variable investment option that would be affected by the transfer is unable to purchase or redeem shares of its corresponding underlying fund portfolio.

**Underlying Fund Portfolio Frequent Trading Policies.** The underlying fund portfolios may have adopted their own policies and procedures with respect to frequent purchases and redemptions of their respective shares. Underlying fund portfolios may, for example, assess a redemption fee (which we reserve the right to collect) on shares held for less than a certain period of time. The prospectuses for the underlying fund portfolios describe any such policies and procedures. The frequent trading policies and procedures of an underlying fund portfolio may be different, and more or less restrictive, than the frequent trading policies and procedures of other underlying fund portfolios and the policies and procedures we have adopted for our variable insurance products to discourage market timing and disruptive trading. Policyowners should be aware that we do not monitor transfer requests from policyowners or persons acting on behalf of policyowners for compliance with, nor do we apply, the frequent trading policies and procedures of the respective underlying fund portfolios that would be affected by the transfers.

Policyowners should be aware that we are required to provide to an underlying fund portfolio or its payee, promptly upon request, certain information about the trading activity of individual policyowners, and to restrict or prohibit further purchases or transfers by specific policyowners or persons acting on their behalf, if identified by an underlying fund portfolio as violating the frequent trading policies established for the underlying fund portfolio. Please read the fund’s prospectus for information about restrictions on transfers.

**Omnibus Orders.** Policyowners and other persons with material rights under the variable insurance products also should be aware that the purchase and redemption orders received by the underlying fund portfolios generally are “omnibus” orders from intermediaries such as retirement plans and separate accounts funding variable insurance products. The omnibus orders reflect the aggregation and netting of multiple orders from individual retirement plan participants and individual policyowners of variable insurance products. The omnibus nature of these orders may limit the underlying fund portfolios’ ability to apply their respective frequent trading policies and procedures.

We cannot guarantee that the underlying fund portfolios will not be harmed by transfer activity relating to the retirement plans or other insurance companies that may invest in the underlying fund portfolios. These other insurance companies are responsible for their own policies and procedures regarding frequent transfer activity. If their policies and procedures fail to successfully discourage harmful transfer activity, it may affect other policyowners of underlying fund portfolio shares, as well as the policyowners of all of the variable annuity contracts or life insurance policies, including ours, whose variable investment options correspond to the affected underlying fund portfolios. In addition, if an underlying fund portfolio believes that an omnibus order we submit may reflect one or more transfer requests from policyowners engaged in market timing or disruptive trading, the underlying fund portfolio may reject the entire omnibus order and thereby delay or prevent us from implementing your request.

**TELEPHONE, FAX AND ONLINE PRIVILEGES**

Telephone transfer privileges will automatically apply to your Policy unless you provide other instructions. The telephone transfer privileges will allow you to give authority to the registered representative or agent of record for your Policy to make telephone transfers and to change the allocation of future payments among the subaccounts and the fixed account on your behalf according to your instructions. To make a telephone transfer, you may call us at our administrative office at 1-800-851-9777, Monday – Friday, between the hours of 8:30 a.m. - 7:00 p.m. Eastern Time, or fax your instructions to our subaccount transfer fax number – 1-727-299-1648 (for all other fax requests, please use 1- 727-299-1620). You also may request transfers electronically through our website, www.premier.transamerica.com. **Please Note:** Certain subaccounts have similar names. When providing your allocation instructions, please state or write the full name of the subaccount that you select for your allocation to ensure that those instructions are in good order.

Please note the following regarding telephone, Internet or fax transfers:

- We will employ reasonable procedures to confirm that instructions are genuine.
- If we follow these procedures, we are not liable for any loss, damage, cost or expense from complying with instructions we reasonably believe to be authentic. You bear the risk of any such loss.
- If we do not employ reasonable confirmation procedures, we may be liable for losses due to unauthorized or fraudulent instructions.
● Such procedures may include requiring forms of personal identification prior to acting upon telephone instructions, providing written confirmation of transactions to owners, and/or tape recording telephone instructions received from owners.

● We may also require that you send us the telephone, Internet or fax transfer order in writing.

● If you do not want the ability to make telephone or Internet transfers, you should notify us in writing at our mailing address or through our fax number (1-727-299-1620).

● **We will not be responsible for same day processing of transfers if the transfer order is faxed to a number other than 1-727-299-1648 or 1-727-299-1620.**

● We will not be responsible for any transmittal problems when you fax us your order unless you report it to us within five business days and send us proof of your fax transmittal. We may discontinue this option at any time.

We cannot guarantee that telephone and electronic transactions will always be available. For example, our offices may be closed during severe weather emergencies or there may be interruptions in telephone or fax service beyond our control. If the volume of calls is unusually high, we might not have someone immediately available to receive your order at our administrative office. Although we have taken precautions to help our systems handle heavy use, we cannot promise complete reliability under all circumstances.

Similarly, online transactions processed via the Internet may not always be possible. Telephone and computer systems, whether yours, your Internet service provider’s, your registered representative’s or Transamerica Premier’s, can experience outages or slowdowns for a variety of reasons. These outages or slowdowns may prevent or delay our receipt of your request. If you are experiencing problems, you should make your request or inquiry in writing.

You should protect your user ID and password because self-service options will be available to your authorized representative and to anyone who provides your identifying information. We will not be able to verify that the person providing instructions online is you or someone authorized by you.

*Note:* Your requests that are received before the NYSE closes are priced using the subaccount unit value determined at the close of that regular business session of the NYSE (usually 4:00 p.m. Eastern Time). If we receive a request after the NYSE closes, or on a day the NYSE is closed for trading, we will process the withdrawal request using the subaccount unit value determined at the close of the next regular business session of the NYSE. Please Note: All requests must be submitted in good order to avoid a delay in processing your request.

**FIXED ACCOUNT TRANSFERS**

Currently, we do not, but reserve the right to, limit the number of transfers out of the fixed account to one per Policy year. If we change this, we will notify you at the time of your transfer.

We also reserve the right to limit the maximum amount you may transfer from the fixed account each Policy year to the greater of 25% of the amount in the fixed account or the amount you transferred from the fixed account in the immediately preceding Policy year.

These restrictions do not apply to dollar cost averaging transactions. However, the transfer may not be greater than the unloaned portion of the fixed account on the valuation date on which we receive the transfer request.

We will make the transfer at the end of the valuation date on which we receive the request, in good order, at our administrative office (for telephonic and facsimile transactions), at our mailing address (for written correspondence), or electronically through our website. We reserve the right to require that you make the transfer request in writing and that we receive the written transfer request no later than 30 days after a Policy anniversary. Unless otherwise required by state law, we may restrict transfers to the fixed account, if, following the transfer, the fixed account value, excluding amounts in the loan reserve, following the transfer would exceed $250,000. *Note:* These restrictions may prolong the period of time it takes to transfer your total cash value in the fixed account to the subaccounts and, therefore, you should carefully consider whether investment in the fixed account meets your needs and investment criteria. This restriction does not apply to any transfer to the fixed account necessary in the exercise of conversion rights.

Except when used to pay premiums, we may also defer payment of any amounts from the fixed account for no longer than six months after we receive such written notice.

**New Jersey:** The fixed account is not available to you if your Policy was applied for before September 22, 2008 and was issued before January 1, 2009 in the State of New Jersey. You may not direct or transfer any money to the fixed account.
CONVERSION RIGHTS

If, within 24 months of your Policy date, you transfer all of your subaccount values to the fixed account, then we will not charge you a transfer fee, even if applicable. You must make your request in writing, in good order, to our mailing address.

In the event of a material change in the investment policy of any portfolio, you may transfer all subaccount value in that portfolio to the fixed account without a transfer charge. We must receive your request to transfer the subaccount value to the fixed account in good order within 60 days after the effective date of the change of investment policy or the date you receive notification of such change, whichever is later.

DOLLAR COST AVERAGING

Dollar cost averaging is a strategy designed to reduce the average purchase price per unit. The strategy spreads the allocation of your premium to the subaccounts over a period of time. This potentially allows you to reduce the risk of allocating most of your premium to the subaccounts at a time when prices are high. The success of this strategy is not assured and depends on market trends. You should consider carefully your financial ability to continue the program over a long enough period of time to purchase units when their value is low as well as when it is high. We make no guarantee that dollar cost averaging will result in a profit or protect you against loss.

Under dollar cost averaging, we automatically transfer a set dollar amount from the Transamerica BlackRock Government Money Market VP subaccount, the Transamerica JPMorgan Core Bond VP subaccount, or the fixed account to a subaccount that you choose. We will make the transfers monthly as of the end of the valuation date after the first Monthiversary after the reallocation date. We will make the first transfer in the month after we receive your request, in good order, at our mailing address or by facsimile at our administrative office provided that we receive the form by the 25th day of the month. (Note: As stated on the dollar cost averaging form, the date that you select cannot be the 29th, 30th or 31st of any month.)

To start dollar cost averaging:

- You must submit to us, in good order, in writing to our mailing address (or by facsimile to our administrative office) a completed form signed by the owner requesting dollar cost averaging.
- You may be required to have at least $5,000 in each subaccount or the fixed account from which we will make transfers.
- Your total transfers each month under dollar cost averaging may be limited to a minimum of $100.
- Each month, you may not transfer more than one-tenth of the amount that was in your fixed account at the beginning of dollar cost averaging.

You may request dollar cost averaging at any time. There is no charge for dollar cost averaging.

Dollar cost averaging will terminate if any of the following occur:

- We receive, in good order, at our mailing address (or by facsimile or telephone at our administrative office) a request to discontinue participation from you or your authorized representative.
- The value in the accounts from which we make the transfers is depleted.
- You elect to participate in the asset rebalancing program.
- You elect to participate in any asset allocation services provided by a third party.

If you terminate your participation in the dollar cost averaging program and later decide that you would like to participate again, you must submit (in good order) a new dollar cost averaging form. We may modify, suspend, or discontinue dollar cost averaging at any time.

ASSET REBALANCING PROGRAM

We also offer an asset rebalancing program under which you may transfer amounts periodically to maintain a particular allocation percentage among the subaccounts you have selected. Cash value allocated to each subaccount will grow or decline in value at different rates. The asset rebalancing program automatically reallocates the cash value in the subaccounts at the end of each period to match your Policy’s currently effective premium allocation schedule. Cash value in the fixed account is not available for this program and this program is not available in conjunction with the dollar cost averaging program. We make no guarantee that participating in this program will result in a profit or protect you against loss.
You may elect asset rebalancing to occur on a monthly, quarterly, semi-annual or annual basis. Once we receive the asset rebalancing request form, in good order, at our mailing address (or by facsimile at our administrative office), we will change your premium allocations to match your asset rebalancing instructions, and we will implement the asset rebalancing program on the date you indicated. If you do not indicate a specific date, then we will use the date that we receive your request form. We will credit the amounts transferred at the unit value next determined on the dates the transfers are made. If a day on which rebalancing would ordinarily occur falls on a day on which the NYSE is closed, rebalancing will occur on the next day that the NYSE is open.

To start asset rebalancing:
- You must submit to us, in good order, in writing to our mailing address (or by facsimile to our administrative office), a completed asset rebalancing request form signed by the owner.
- You may be required to have a minimum cash value of $5,000 or make a $5,000 initial premium payment.

There is no charge for the asset rebalancing program. (We reserve the right to count such allocations as part of your free transfers in the future.)

Asset rebalancing will cease if:
- You elect to participate in the dollar cost averaging program.
- We receive, in good order, at our mailing address (or by facsimile or telephone at our administrative office), a request to discontinue participation from you or your authorized representative.
- You make any transfer to or from any subaccount other than under a scheduled rebalancing.
- You elect to participate in any asset allocation services provided by a third party.

You may start and stop participation in the asset rebalancing program at any time, but we restrict your right to re-enter the program to once each Policy year. If you wish to resume the asset rebalancing program, you must complete a new request form. We may modify, suspend, or discontinue the asset rebalancing program at any time.

**THIRD PARTY ASSET ALLOCATION SERVICES**

We do not offer any asset allocation programs, or any allocation models for use with your life insurance policy. You may authorize and engage your own investment advisor to manage your account. These investment advisors may be firms or persons who also are appointed by us, or whose affiliated broker-dealers are appointed by us, as authorized sellers of the Policies. Even if this is the case, however, please note that the investment advisor you engage to provide advice and/or make transfers for you is not acting on our behalf, but rather is acting on your behalf. We do not offer advice about how to allocate your cash value under any circumstance. We are not responsible for any recommendations such investment advisors make, any investment models or asset allocation programs they choose to follow, or any specific transfers they make on your behalf.

Any fee that is charged by your investment advisor is in addition to the fees and expenses that apply under your Policy. You are not a party to the agreement you have with your investment advisor. You will, however, receive confirmations of transactions that affect your Policy. *Note:* If you make withdrawals of cash value to pay advisory fees, then taxes may apply to any such withdrawals.

If your investment advisor has also acted as your insurance agent with respect to the sale of your Policy, he or she may be receiving compensation for services provided both as an insurance agent and investment advisor. Alternatively, the investment advisor may compensate the registered representative from whom you purchased your Policy for the referral that led you to enter into your investment advisory relationship with the investment advisor. If you are interested in the details about the compensation that your investment advisor and/or your registered representative receive in connection with your Policy, you should ask them for more details.

We, or an affiliate of ours, will process the financial transactions placed by your authorized registered representative or investment advisor. We reserve the right to discontinue doing so at any time and for any reason. We may require insurance agents or investment advisors, who are authorized by multiple policyowners to make financial transactions, to enter into an administrative agreement with Transamerica Premier as a condition of our accepting transactions on your behalf. The administrative agreement may impose limitations on the registered representative/agent’s or investment advisor’s ability to request financial transactions on your behalf. These limitations, which are discussed in the section above entitled “Transfers – Disruptive Trading and Market Timing,” are intended (i) to minimize the detrimental impact of an investment professional who is in a position to transfer large amounts of money for multiple clients in a particular portfolio or type of portfolio; or (ii) to comply with specific restrictions or limitations imposed by a portfolio of Transamerica Premier.

*Note:*
- Limitations that we may impose on your authorized registered representative or investment advisor under the terms of the administrative agreement do not apply to financial transactions requested by owners on their own behalf,
except as otherwise described in this prospectus. Any third party asset allocation service may be terminated at any time by the owner or by the third party service by sending written instructions to our mailing address.

- The practices and procedures described above do not apply to any asset allocation portfolios that are available as investment options under the Policy.

**Policy Values**

**Cash Value**

**Your Cash Value:**

- Is determined on the Policy date and on each valuation date.
- Equals the sum of all amounts invested in each subaccount and the fixed account, including any amounts held in the loan reserve account (part of the fixed account) to secure any outstanding Policy loan.
- Serves as the starting point for calculating values under a Policy.
- Varies from day to day, depending on the investment experience of the subaccounts you choose, the interest credited to the fixed account, the charges deducted and any other Policy transactions (such as additional premium payments, transfers, withdrawals and Policy loans).
- Has no guaranteed minimum amount and may be more or less than premiums paid.

**Net Surrender Value**

The net surrender value is the amount we pay when you surrender your Policy while it is in force. We determine the net surrender value at the end of the valuation period when we receive your written surrender request, in good order, at our mailing address. You may also fax your requests to 1-727-299-1620.

Net surrender value on any valuation date equals:

- The cash value as of such date; minus
- Any surrender charge as of such date; minus
- Any outstanding Policy loan amount including any accrued Policy loan interest.

**Subaccount Value**

The cash value in a subaccount is referred to as “subaccount value.” At the end of any valuation period, subaccount value is equal to the number of units that the Policy has in the subaccount, multiplied by the unit value of that subaccount. (Note: Subaccount transactions are converted to units for accounting purposes.)

The number of units in any subaccount on any valuation date equals:

- The initial units purchased at unit value on the Policy date, or reallocation date, if different; plus
- Units purchased with additional net premium(s); plus
- Units purchased due to a loan repayment; plus
- Units purchased through transfers from another subaccount or the fixed account; minus
- Units redeemed to pay for monthly deductions; minus
- Units redeemed to pay for cash withdrawals; minus
- Units redeemed as part of a transfer to another subaccount, or the fixed account (including the loan reserve account); minus
- Units redeemed to pay cash withdrawal and transfer charges; minus
- Units redeemed due to any refund of premiums allocated to that subaccount.

Every time you allocate, transfer or withdraw money to or from a subaccount, we convert that dollar amount into units. We determine the number of units we credit to, or subtract from, your Policy by dividing the dollar amount of the allocation, transfer or cash withdrawal by the unit value for that subaccount next determined at the end of the valuation period on which the premium allocation, transfer request, or cash withdrawal request is received: (i) at our mailing address (for written requests or payments by check); (ii) at our administrative office (for requests by fax or by telephone, or for payments made through electronic credit and debit transactions); or (iii) electronically through our website.
**SUBACCOUNT UNIT VALUE**

The value (or price) of each subaccount unit will reflect the investment performance of the portfolio in which the subaccount invests. Unit values will vary among subaccounts. The unit value at the inception of each class of units of each subaccount was originally established at $10 per unit. The unit value may increase or decrease from one valuation period to the next.

The unit value of any subaccount at the end of a valuation period is calculated as:

- The total value of the portfolio shares held in the subaccount, including the value of any dividends or capital gains distribution declared and reinvested by the portfolio during the valuation period. This value is determined by multiplying the number of portfolio shares owned by the subaccount by the portfolio’s net asset value per share determined at the end of the valuation period; **minus**
- A charge equal to the daily net assets of the subaccount multiplied by the daily equivalent of the mortality and expense risk charge; **minus**
- The accrued amount of reserve for any taxes or other economic burden resulting from applying tax laws that we determine to be properly attributable to the subaccount; **and the result divided by**
- The number of outstanding units in the subaccount before the purchase or redemption of any units on that date.

The portfolio in which any subaccount invests will determine its net asset value per share once daily, as of the close of the regular business session of the NYSE (usually 4:00 p.m. Eastern Time) except on customary national holidays on which the NYSE is closed, which coincides with the end of each valuation period.

**FIXED ACCOUNT VALUE**

On the Policy date, or the reallocation date if different, the fixed account value is equal to the cash value allocated to the fixed account, less the portion of the first monthly deduction that is subtracted from the fixed account.

The fixed account value at the end of any valuation period is equal to:

- The sum of net premiums allocated to the fixed account; **plus**
- Any amounts transferred from a subaccount to the fixed account (including amounts transferred to the loan reserve account); **plus**
- Total interest credited to the fixed account; **minus**
- Amounts charged to pay for monthly deductions; **minus**
- Amounts withdrawn or surrendered from the fixed account to pay for cash withdrawals, transfer charges, or any other fees and charges; **minus**
- Amounts transferred from the fixed account (including amounts transferred from the loan reserve account) to a subaccount; **minus**
- Any refund of premiums allocated to the fixed account.

**DEATH BENEFIT**

**DEATH BENEFIT PROCEEDS**

We will determine the amount of the death benefit proceeds on any Policy in force on the date of death upon receipt, in good order, at our administrative office of satisfactory proof of the insured’s death, plus written direction (from each eligible recipient of death benefit proceeds) regarding distribution of the death benefit payment, and any other documents, forms and information we need. We will pay interest on the Death Benefit from the date of death to the date of payment. We may require that the Policy be returned. We will pay the death benefit proceeds to the primary beneficiary(ies), if living, or to a contingent beneficiary. If each beneficiary dies before the insured and there is no contingent beneficiary, we will pay the death benefit proceeds to the owner or the owner’s estate. We will pay the death benefit proceeds in a lump sum or under a payment option.

The death benefit is equal to:

- The amount determined based on the death benefit option that you select (described below); **minus**
● Any monthly deductions due during the grace period (if applicable); minus
● Any outstanding loan amount including any accrued loan interest; plus
● Any additional insurance in force provided by rider.

We may further adjust the amount of the death benefit proceeds if we contest the Policy or if you misstate the insured’s age or sex.

DEATH BENEFIT

The Policy offers three death benefit options – Option A, Option B and Option C. The amount of the death benefit is determined at the end of the valuation period in which the insured dies. You must select one of the three death benefit options we offer. This is an important decision. If you do not choose a death benefit option in your application, the Option A death benefit option will automatically be in effect. No matter which death benefit option you choose, we guarantee that, as long as the Policy does not lapse, the death benefit will never be less than the specified amount on the date of the insured’s death adjusted as shown above.

The Policy is intended to qualify under Internal Revenue Code Section 7702 as a life insurance policy for federal tax purposes. The death benefit is intended to qualify for the federal income tax exclusion. The provisions of the Policy and any attached endorsement or rider will be interpreted to ensure such qualification, regardless of any language to the contrary.

To the extent the death benefit is increased to maintain qualification as a life insurance policy, we will make appropriate adjustments (retroactively and prospectively) to any monthly deductions or supplemental benefits that are consistent with such an increase. We may deduct retroactive adjustments from the cash value or from any death benefits payable. Prospective adjustments will be reflected in the monthly deductions.

Under Section 7702 of the Internal Revenue Code, a Policy will generally be treated as life insurance for federal tax purposes if, at all times, it meets either a Guideline Premium Test ("GPT") or a Cash Value Accumulation Test ("CVAT"). You must choose either the GPT or the CVAT before the Policy is issued. Once the Policy is issued, you may not change to a different test. The death benefit will vary depending on which test is used.

The GPT has two components, a premium limit component and a corridor component. The premium limit restricts the amount of premium that can be paid into the Policy. The corridor requires that the death benefit be at least a certain percentage (varying each year by attained age of the insured) of the cash value. The CVAT does not have a premium limit, but does have a corridor that requires that the death benefit be at least a certain percentage (varying based on the attained age, sex and underwriting class of the insured) of the cash value, adjusted for certain riders.

The corridor under the CVAT is different from the corridor under the GPT. Specifically, the CVAT corridor requires more death benefit in relation to cash value than is required by the GPT corridor. Therefore, for a Policy in the corridor with no riders, as your cash value increases your death benefit will increase more rapidly under CVAT than it would under GPT.

Your Policy will be issued using the GPT unless you choose otherwise. In deciding whether or not to choose the CVAT, you should consider that the CVAT generally permits more premiums to be contributed to a Policy, but may require the Policy to have a higher death benefit, which may increase certain charges.

OPTION A

UNDER THE GUIDELINE PREMIUM TEST

The death benefit equals the greatest of:

1. The specified amount; or
2. A specified percentage called the “limitation percentage,” as shown on your Policy’s schedule page, multiplied by the cash value on the primary insured’s date of death; or
3. The amount required for the Policy to qualify as a life insurance policy under Section 7702 of the Internal Revenue Code.

Under Option A, your death benefit remains level unless the limitation percentage multiplied by the cash value is greater than the specified amount; then the death benefit will vary as the cash value varies.

The limitation percentage is the minimum percentage of cash value we must pay as the death benefit under federal tax requirements. It is based on the attained age of the insured at the beginning of each Policy year. The following table indicates the limitation percentages for the GPT for different ages:
<table>
<thead>
<tr>
<th>Attained Age</th>
<th>Limitation Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>40 and under</td>
<td>250%</td>
</tr>
<tr>
<td>41 to 45</td>
<td>250% minus 7% for each age over age 40</td>
</tr>
<tr>
<td>46 to 50</td>
<td>215% minus 6% for each age over age 45</td>
</tr>
<tr>
<td>51 to 55</td>
<td>185% minus 7% for each age over age 50</td>
</tr>
<tr>
<td>56 to 60</td>
<td>150% minus 4% for each age over age 55</td>
</tr>
<tr>
<td>61 to 65</td>
<td>130% minus 2% for each age over age 60</td>
</tr>
<tr>
<td>66 to 70</td>
<td>120% minus 1% for each age over age 65</td>
</tr>
<tr>
<td>71 to 75</td>
<td>115% minus 2% for each age over age 70</td>
</tr>
<tr>
<td>76 to 90</td>
<td>105%</td>
</tr>
<tr>
<td>91 to 95</td>
<td>105% minus 1% for each age over age 90</td>
</tr>
<tr>
<td>96 to 99</td>
<td>100%</td>
</tr>
<tr>
<td>100 and older</td>
<td>101%</td>
</tr>
</tbody>
</table>

If the federal tax code requires us to determine the death benefit by reference to these limitation percentages, the Policy is described as “in the corridor.” An increase in the cash value will increase our risk, and we will increase the cost of insurance we deduct from the cash value.

Example 1. *Option A Guideline Premium Test Example*. Assume that the insured’s attained age is under 40 and that there are no outstanding loans. Under Option A, a Policy with a $100,000 specified amount will generally pay $100,000 in death benefits. However, because the death benefit must be equal to or be greater than 2.5 times the cash value, any time the cash value of the Policy exceeds $40,000, the death benefit will exceed the $100,000 specified amount. (The figure $40,000 is derived by solving for cash value in the following calculation: $100,000 = 2.5 times the cash value.) Each additional dollar added to the cash value above $40,000 will increase the death benefit by $2.50.

Similarly, as long as the cash value exceeds $40,000, each dollar taken out of the cash value will reduce the death benefit by $2.50. If at any time the cash value multiplied by the limitation percentage is less than the specified amount, then the death benefit will equal the specified amount of the Policy.

**UNDER THE CASH VALUE ACCUMULATION TEST**

**The death benefit equals the greatest of:**

1. The specified amount; or
2. A specified percentage called the “limitation percentage,” as shown on your Policy’s schedule page, multiplied by the difference between the cash value on the date of the primary insured’s death and any applicable net single premium for riders that are qualified additional benefits as shown on your Policy’s schedule page (Note: Qualified Additional Benefits are specific benefits defined in Section 7702 of the Internal Revenue Code); or
3. The amount required for the Policy to qualify as a life insurance policy under Section 7702 of the Internal Revenue Code.

Under Option A, your death benefit remains level unless the limitation percentage calculation above is greater than the specified amount; then the death benefit will vary as the cash value varies.

The limitation percentage and the net single premium for riders under the CVAT are calculated as specified under Section 7702. They are based on the insured’s sex, underwriting class, specified amount band, and attained age at the beginning of each Policy year, and will differ depending on whether your Policy was issued under the 2001 or 1980 C.S.O. Tables.

If the federal tax code requires us to determine the death benefit by reference to these limitation percentages and net single premiums, the Policy is described as “in the corridor.” An increase in the cash value will increase our risk, and we will increase the cost of insurance we deduct from the cash value.

Example 2. *Option A Cash Value Accumulation Test Example*. Assume that a Policy has no outstanding loans. Also assume that the Policy has a specified amount of $100,000, an Other Insured Rider with a face amount of $50,000 has been added to the Policy, the limitation percentage is 2.97, and the net single premium for the rider is $14,850. Under Option A, a Policy with a $100,000 specified amount will generally pay $100,000 in death benefits. However, because the death benefit for the Policy, not including the Other Insured Rider, must be equal to or be greater than 2.97 times the difference of the cash value and the net single premium for riders, any time the cash value of the Policy exceeds $48,520, the death benefit of the Base Policy will exceed the
$100,000 specified amount. The figure of $48,520 is derived by solving for cash value in the calculation $100,000 = 2.97 \textit{multiplied by} (\text{cash \ value \ minus} \$14,850): \ 2.97 \textit{multiplied by} (\$48,520 - \$14,850) = \$100,000. Each additional dollar added to the cash value above $48,520 will increase the death benefit of the Policy by $2.97.

Similarly, as long as the cash value exceeds $48,520, each dollar taken out of the cash value will reduce the death benefit of the Policy, not including the Other Insured Rider, by $2.97. If at any time the difference between the cash value and the net single premium for riders multiplied by the limitation percentage is less than the specified amount, the death benefit of the Policy, not including the Other Insured Rider, will equal the specified amount of the Policy.

**OPTION B**

**UNDER THE GUIDELINE PREMIUM TEST**

The death benefit equals the greatest of:

1. The specified amount; \textit{plus} the cash value on the insured’s date of death; \textit{or}
2. The limitation percentage, as shown on your Policy’s schedule page, \textit{multiplied by} the cash value on the primary insured’s date of death; \textit{or}
3. The amount required for the Policy to qualify as a life insurance policy under Section 7702 of the Internal Revenue Code.

Under Option B, the death benefit always varies as the cash value varies.

Example 3. **Option B Guideline Premium Test Example.** Assume that the insured’s attained age is under 40 and that there are no outstanding loans. Under Option B, a Policy with a specified amount of $100,000 will generally pay a death benefit of $100,000 plus cash value. Thus, a Policy with a cash value of $10,000 will have a death benefit of $110,000 ($100,000 + $10,000). The death benefit, however, must be at least 2.5 times the cash value. As a result, if the cash value exceeds $66,667, then the death benefit will be greater than the specified amount plus cash value. The figure of $66,667 is derived by solving for cash value in the calculation 2.5 \textit{multiplied by} cash value = $100,000 \textit{plus} cash value; 2.5 \textit{multiplied by} $66,667 = $100,000 \textit{plus} $66,667. Each additional dollar of cash value above $66,667 will increase the death benefit by $2.50.

Similarly, any time the cash value exceeds $66,667, each dollar taken out of the cash value will reduce the death benefit by $2.50. If at any time, cash value multiplied by the limitation percentage is less than the specified amount plus the cash value, then the death benefit will be the specified amount plus the cash value of the Policy.

**UNDER THE CASH VALUE ACCUMULATION TEST**

The death benefit equals the greatest of:

1. The specified amount; \textit{plus} the cash value on the primary insured’s date of death; \textit{or}
2. A specified percentage called the “limitation percentage,” as shown on your Policy’s schedule page, \textit{multiplied by} the difference between the cash value on the date of the primary insured’s death and any applicable net single premium for riders that are Qualified Additional Benefits as shown on your Policy’s schedule page; \textit{or}
3. The amount required for the Policy to qualify as a life insurance policy under Section 7702 of the Internal Revenue Code.

Under Option B, the death benefit always varies as the cash value varies.

Example 4. **Option B Cash Value Accumulation Test Example.** Assume that the insured’s attained age is 40 and that there are no outstanding loans. Also assume that the Policy has a specified amount of $100,000, an Other Insured Rider with a face amount of $50,000 has been added to the Policy, the limitation percentage is 2.97, and the net single premium for the rider is $14,850. Under Option B, a Policy with a specified amount of $100,000 will generally pay a death benefit of $100,000 plus cash value. Thus, a Policy with a cash value of $10,000 will have a death benefit of $110,000 ($100,000 + $10,000). The death benefit for the Base Policy, however, must be at least 2.97 times the difference between the cash value and the net single premium for riders. As a result, if the cash value exceeds $73,149, then the death benefit for the Base Policy will be greater than the specified amount plus cash value. The figure of $73,149 is derived by solving for cash value in the calculation 2.97 \textit{multiplied by} (cash value \textit{minus} the net single premium for the rider) = specified amount \textit{plus} cash value; 2.97 \textit{multiplied by} ($73,149 - $14,850) = $100,000 \textit{plus} $73,149. Each additional dollar of cash value above $73,149 will increase the death benefit of the Base Policy by $2.97.
Similarly, any time the cash value exceeds $73,149, each dollar taken out of the cash value will reduce the death benefit of the Base Policy by $2.97. If at any time, the difference between the cash value and the net single premium for riders multiplied by the limitation percentage is less than the specified amount plus the cash value, then the death benefit for the Base Policy will be the specified amount plus the cash value of the Policy.

**OPTION C**

**The death benefit equals the greatest of:**

1. The death benefit under Option A; or
2. The specified amount **multiplied by** an age-based “factor” equal to the lesser of:
   - 1.0; or
   - 0.04 **multiplied by** (95 minus insured’s attained age at death)
   (the “factor” will never be less than zero); plus the cash value on the date of the insured’s death; or
3. The amount required for the Policy to qualify as a life insurance policy under Section 7702 of the Internal Revenue Code.

Under Option C, the death benefit varies with the cash value and the insured’s attained age. Because the death benefit under Option C is at least as large as that under Option A, the Code Section 7702 life insurance qualification compliance test used in calculating the Option A death benefit will be taken into account in the Option C death benefit.

**Option C—Three Examples.**

1. Assume that the insured is attained age 75 and that there are no outstanding loans. Under Option C, a Policy with a specified amount of $100,000 and with a cash value of $22,000 will have a death benefit of $102,000 ($100,000 x the minimum of (1.0 and (0.04 x (95-75))) + $22,000).
2. Assume that the insured is attained age 75 and that there are no outstanding loans. Under Option C, a Policy with a specified amount of $100,000 and with a cash value of $9,000 will have a death benefit equal to the specified amount of $100,000, since the calculation of $100,000 times the minimum of {1.0 and (0.04 x (95-75))} plus $9,000 is less than the specified amount.
3. Assume that the insured is under attained age 71 and that there are no outstanding loans. Under Option C, a Policy with a specified amount of $100,000 and with a cash value of $10,000 will have a death benefit of $110,000, because through attained age 70 the minimum of {1.0 and (0.04 x (95-age))} is always 1.0. Until the insured attains age 71, the Option C death benefit is the same as the Option B death benefit.

**Death Benefit After Attained Age 111 (For Policies Applied for On or After September 22, 2008) or After Attained Age 100 (For Policies Applied for Before September 22, 2008 and Issued Before January 1, 2009)**

If the Policy is still in force on the Policy anniversary on or following the insured’s 111th birthday or 100th birthday, as applicable, the Policy will continue and the death benefit payable will continue to be calculated in accordance with the death benefit option and the life insurance compliance test then in effect. **Please Note:** Continuing a Policy beyond the insured’s attained age 99 may have tax consequences. You should consult a tax advisor if you intend to keep the Policy in force beyond the insured’s attained age 99. Please see the “Federal Income Tax Considerations” section of this prospectus.

**Effect of Cash Withdrawals on the Death Benefit**

If Option A is in effect, or if Option C is in effect and the insured’s attained age is 71 or greater, a cash withdrawal will reduce the specified amount of the Policy by an amount equal to the amount of the cash withdrawal. Regardless of the death benefit option in effect, a cash withdrawal will reduce the death benefit by at least the amount of the withdrawal. For a description of the effect of cash withdrawals on the death benefit option that you select, please refer to the section entitled “Surrenders and Cash Withdrawals – Cash Withdrawal Conditions” in this prospectus.

**Effect of Inflation Fighter Rider Level Premium on the Death Benefit**

If you choose Option A, then you may add the Inflation Fighter Rider Level Premium. Your Policy’s specified amount will automatically increase each year on the Policy anniversary until the 20th Policy anniversary. If you change from Option A to either Option B or Option C, future scheduled increases in specified amount will automatically cease because the Inflation Fighter Rider Level Premium will terminate.
CHOOSING DEATH BENEFIT OPTIONS

You must choose one death benefit option on your application. This is an important decision. The death benefit option you choose will have an impact on the dollar value of the death benefit, on your cash value, and on the amount of cost of insurance charges you pay. If you do not select a death benefit option on your application, then Option A will become the death benefit option for your Policy by default.

You may find Option A more suitable for you if your goal is to increase your cash value through positive investment experience. You may find Option B more suitable if your goal is to increase your total death benefit. You may find Option C more suitable if your goal is to increase your total death benefit before you reach attained age 70, and to increase your cash value through positive investment experience thereafter.

CHANGING THE DEATH BENEFIT OPTION

After the third Policy year and before the insured’s attained age 95, you may change your death benefit option once each Policy year. Changing the death benefit option may affect the specified amount. We will notify you of the new specified amount.

Changes to the Death Benefit Option are subject to the following conditions:

- You must send your written request, in good order, to our mailing address or fax it to us at 1-727-299-1620. (If you send your request by fax, be sure to use the correct fax number. Please see “Telephone, Fax, and Online Privileges.”)
- The effective date of the change will be the Monthiversary on or following the date when we receive your request for a change.
- You may not make a change that would decrease the specified amount below the minimum specified amount shown on your Policy schedule page.
- There may be adverse federal tax consequences. You should consult a tax advisor before changing your Policy’s death benefit option.

INCREASING/DECREASING THE SPECIFIED AMOUNT

You may apply to increase the specified amount at any time or decrease it at any time after the third Policy year. No more than one change in the specified amount can occur each Policy year. If approved, the increase or decrease will take effect on the next Policy Monthiversary. An increase or decrease in the specified amount may affect your cost of insurance charge, monthly per unit charge, your GPT premium limitation, your minimum monthly guarantee premium, and may affect your ability to maintain the no lapse period guarantee. A change in specified amount may affect the Policy’s qualification tests as life insurance under IRC 7702 and could cause the Policy to become a Modified Endowment Contract under IRC 7702A and may have adverse federal tax consequences. Any charges associated with an increase or decrease in your specified amount will be based on the same C.S.O. Table that was in effect when your Policy was issued.

In addition, an increase or decrease in specified amount may move the Policy into a different specified amount band so that your overall cost of insurance rate and monthly per unit charge will change. An increase in specified amount will be treated as an additional layer of coverage with its own monthly per unit charge, surrender charges and surrender charge period. If you increase your specified amount, you will receive notification of your new minimum monthly guarantee premium and surrender charge schedule. This also applies to increases generated by the Inflation Fighter Rider Level Premium.

Any decrease will reduce your specified amount in the additional layer of coverage created:

- (a) first, by the most recent increase;
- (b) followed by the next most recent increases successively; and
- (c) followed by the amount specified in the original application.

You should consult a tax advisor before increasing or decreasing your Policy’s specified amount.

Conditions for and impact of decreasing the specified amount:

- You must send your written request, in good order, to our mailing address or fax it to us at 1-727-299-1620.
- Decreases are only allowed after the third Policy year.
- You may not increase and decrease your specified amount in the same Policy year.
- You may not decrease your specified amount lower than the minimum specified amount under Band 1 shown on your Policy schedule page.
● You may not decrease your specified amount if it would disqualify your Policy as life insurance under the Internal Revenue Code.
● Until the later of the end of the surrender charge period or the Policy anniversary on or following the insured’s 65th birthday, we may limit the amount of decrease to no more than 20% of the then specified amount.
● A decrease in specified amount will take effect on the first Monthiversary on or next following the day we receive your written request, in good order, at our mailing address.
● If a decrease to your Policy’s specified amount causes your specified amount band to change, then we will apply the cost of insurance rates to the amounts in the new band as of the effective date of the decrease in specified amount.
● A decrease in specified amount will cause a new minimum monthly guarantee premium to be calculated. The new minimum monthly guarantee premium is effective on the date of decrease if the Policy is still within the no lapse period.

**Conditions for and impact of increasing the specified amount:**

● We will accept requests for increases in specified amount at any time before the insured’s 86th birthday.
● Your request, in good order, must be applied for through a supplemental application and include evidence of insurability satisfactory to us.
● A requested increase in specified amount requires our approval and will take effect on the Policy Monthiversary on or after the day we approve your request.
● We may require your requested increase in specified amount to be at least $10,000.
● You may not decrease and increase your specified amount in the same Policy year.
● If an increase (including specified amount increases generated by the Inflation Fighter Rider Level Premium) to your Policy’s specified amount causes your specified amount band to change, then we will apply the cost of insurance rates to the amounts in the new band as of the effective date of the increase in specified amount.
● An increase in specified amount (except specified amount increases generated by the Inflation Fighter Rider Level Premium) will cause a new minimum monthly guarantee premium to be calculated. The new minimum monthly guarantee premium is effective on the date of increase if the Policy is still in the no lapse period.
● Each increase in specified amount (including specified amount increases generated by the Inflation Fighter Rider Level Premium) will have its own surrender charge that applies for 10 years after the date of each increase. This charge may significantly reduce your net surrender value.
● Each increase in specified amount (including specified amount increases generated by the Inflation Fighter Rider Level Premium) will trigger a new contestability and a new suicide period.
● Requested increases in specified amount will not be subject to future automatic increases under the Inflation Fighter Rider Level Premium.

**PAYMENT OPTIONS**

There are several ways of receiving proceeds under the death benefit and surrender provisions of the Policy, other than in a lump sum. These are described under “Settlement Options” in your Policy and in this prospectus.
SURRENDERS AND CASH WITHDRAWALS

SURRENDERS

You must make a written request to surrender your Policy for its net surrender value as calculated at the end of the valuation date on which we receive your request, in good order, at our mailing address. You may also fax your request to our administrative office at 1-727-299-1620. We may require an original signature in your written request. Written requests to surrender a Policy that are received at our mailing address (or faxed to our administrative office) before the NYSE closes are priced using the subaccount unit value determined at the close of that regular business session of the NYSE (usually 4:00 p.m. Eastern Time). If we receive the written request at our mailing address or a fax request at our administrative office after the NYSE closes, or on a day that the NYSE is closed for trading, we will process the surrender request using the subaccount unit value determined at the close of the next regular business session of the NYSE. Please Note: All surrender requests must be submitted in good order to avoid a delay in processing your request.

The insured must be alive and the Policy must be in force when you make your written request. A surrender is effective as of the date when we receive your written request, in good order, at our mailing address. You will incur a surrender charge if you surrender the Policy during the first 10 Policy years (or during the 10-year period following an increase in specified amount, including specified amount increases generated by the Inflation Fighter Rider Level Premium).

Once you surrender your Policy, all coverage and other benefits under it cease and cannot be reinstated. We will normally pay you the net surrender value in a lump sum (by check) within seven days or under a settlement option. A surrender may have tax consequences. For more information regarding tax consequences, please refer to the section entitled “Federal Income Tax Considerations” in this prospectus.

CASH WITHDRAWALS

After the first Policy year, you may request a cash withdrawal of a portion of your surrender value subject to certain conditions. (Note: All requests for a withdrawal must be submitted in good order to avoid a delay in processing your request.)

Cash withdrawal conditions:

- You must send your written cash withdrawal request with an original signature, in good order, to our mailing address. If your withdrawal request is less than $500,000, then you may fax it to us at 1-727-299-1620.
- We may limit the number of withdrawals to one cash withdrawal per Policy year.
- We may limit the amount you can withdraw to a minimum of $500 and the remaining net surrender value following a withdrawal may not be less than $500. During the first 10 Policy years, the amount of the withdrawal may be limited to no less than $500 and to no more than 10% of the net surrender value. After the 10th Policy year, the amount of a withdrawal may be limited to a minimum of $500 and may not exceed the net surrender value, less $500.
- You may not take a cash withdrawal if it will reduce the specified amount below the minimum specified amount set forth in the Policy.
- You may specify the subaccount(s) and the fixed account from which to make the withdrawal. If you do not specify an account, we will take the withdrawal from each account in accordance with your current premium allocation instructions. If this is not possible, the withdrawal amount will be withdrawn pro-rata from all accounts.
- We generally will pay a cash withdrawal request within seven days following the valuation date we receive the request, in good order, at our mailing address.
- We will deduct a processing fee equal to $25 or 2% of the amount you withdraw, whichever is less. We deduct this amount from the withdrawal, and we pay you the balance.
- A withdrawal from the Transamerica BlackRock Government Money Market VP portfolio or the ProFund VP Government Money Market fund may be subject to a redemption fee. This could possibly cause you to lose money on your fund redemption.
• You may not take a cash withdrawal that would disqualify your Policy as life insurance under the Internal Revenue Code.
• You will forfeit any future increases in specified amount generated by the Inflation Fighter Rider Level Premium if you take a cash withdrawal.
• A cash withdrawal may have tax consequences.

A cash withdrawal will reduce the cash value by the amount of the cash withdrawal, and in most cases, will reduce the death benefit by at least the amount of the cash withdrawal. When death benefit Option A is in effect or when death benefit Option C is in effect and the insured’s attained age is 71 or greater, a cash withdrawal will reduce the specified amount of the Policy by an amount equal to the amount of the cash withdrawal. This decrease in specified amount may cause your Policy to be in a lower specified amount band, so that your cost of insurance rates would be higher. You also may have to pay higher minimum monthly guarantee premiums.

When we incur extraordinary expenses, such as overnight mail expenses or wire service fees, for expediting delivery of your cash withdrawal or surrender payment, we will deduct that charge from the payment. We currently charge $20 for an overnight delivery ($30 for Saturday delivery) and $50 for wire service. You can obtain further information about these charges by contacting us at our mailing address or our administrative office.

CANCELING A POLICY (NOTE: THIS POLICY IS NOT AVAILABLE FOR NEW SALES)

You may cancel the Policy for a refund during the free look period by returning it, with a written request to cancel the Policy, to our mailing address. You may also fax your request to our administrative office at 1-727-299-1620 along with page 3 of the Policy. (If you send your request by fax, be sure to use the correct fax number.) The free look period generally expires 10 days after you receive the Policy, but in some states you may have more than 10 days. If you decide to cancel the Policy during the free look period, we will treat the Policy as if it had never been issued. We will pay the refund within seven days after we receive, in good order, the written request (with the owner’s signature) and returned Policy at our mailing address (or a fax request and page 3 of the Policy are received in good order at our administrative office). Note: Canceling a Policy after a 1035 Exchange could have tax consequences as any gain from the old policy will generally be recognized.

If your state requires us to allocate premium according to a policyowner’s instructions during the free look period, then the amount of the refund will be the sum of:

• The difference between the premiums paid and the amounts allocated to any accounts under the Policy on the date the written request and Policy are received, in good order, at our mailing address (or a fax request and page 3 of the Policy are received at our administrative Office); plus
• The total amounts of monthly deductions made and any other charges imposed on amounts allocated to the accounts; plus
• The value of the amounts allocated to the accounts on the date we or our agent received the returned Policy.

If state law prohibits the calculation above, or requires us to refund all of the initial premiums, the refund will be the total of all premiums paid for this Policy. (See “Policy Features – Premiums – Allocating Premiums – Reallocation Account.”) Please note: If you have submitted a recent check or draft, we have the right to defer payment of the refund until such check or draft has been honored.

CALIFORNIA POLICYOWNERS AGE 60 AND OVER

For policies issued in the state of California, if the policyowner is age 60 or older, as of the Policy effective date, the Policy’s free look period is 30 days from the date of delivery. During the 30-day free look period, we will hold the net premiums in the fixed account, unless you direct us to allocate the net premiums as per your most recent allocation instructions. On the day following the end of the 30-day free look period, we will automatically transfer the accumulated value to subaccounts that you selected. This automatic transfer is excluded from the transfer limitations described later in this prospectus.

You can specifically direct the allocation of your net premiums to the subaccounts during the 30-day free look period:

• On your application.
• In writing any time before the end of the 30-day free look period.

SIGNATURE GUARANTEES

Signature guarantees are relied upon as a means of preventing the perpetration of fraud in financial transactions, including the disbursement of funds or assets from a victim's account with a financial institution or a provider of financial services. They provide
protection to investors by, for example, making it more difficult for a person to take another person's money by forging a signature on a written request for the disbursement of funds.

As a protection against fraud, we may require that the following transaction requests include a Medallion signature guarantee:

- All requests for disbursements (i.e., cash withdrawals and surrenders) of $500,000 or more.
- Any disbursement request made on or within 10 days of our receipt of a request to change the address of record for an owner's Policy.
- Any disbursement request when Transamerica Premier has been directed to send proceeds to a different address from the address of record for that owner's account. **Please Note:** This requirement will not apply to disbursement requests made in connection with exchanges of one policy for another with the same owner in a "tax-free exchange" under Section 1035 of the Internal Revenue Code.
- Any financial transaction where the owner’s signature on a request submitted does not match the signature in our files.

An investor can obtain a signature guarantee from financial institutions across the United States and Canada that participate in a Medallion signature guarantee program. This includes many:

- National and state banks
- Savings banks and savings and loan associations
- Securities brokers and dealers
- Credit unions

The best source of a signature guarantee is a bank, savings and loan association, brokerage firm, or credit union with which you do business. Guarantor firms may, but frequently do not, charge a fee for their services.

**A notary public cannot provide a signature guarantee. Notarization will not substitute for a signature guarantee.**

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**LOANS**

**GENERAL**

After the first Policy year (as long as the Policy is in force) you may borrow money from the Policy using the Policy’s net surrender value as the only security for the loan. We may permit a loan prior to the first Policy anniversary for Policies issued pursuant to 1035 Exchanges. A loan that is taken from and secured by a Policy may have tax consequences. See “Federal Income Tax Considerations.”

**Policy loans are subject to certain conditions:**

- We may require you to borrow at least $500.
- The maximum amount you may borrow is 90% of the net surrender value, **minus** loan interest that will accrue before the next Policy anniversary.

When you take a loan, we will withdraw an amount equal to the requested loan from each of the subaccounts and the fixed account based on your current premium allocation instructions (unless you specify otherwise). If this is not possible, the withdrawal amount will be withdrawn from all accounts. We will transfer that amount to the loan reserve account. The loan reserve account is part of the fixed account.

We normally pay the amount of the loan within seven days after we receive a loan request, in good order, at our mailing address or, in limited circumstances described below, by telephone or fax at our administrative office. We may postpone payment of loans under certain conditions.

You may request a loan of up to $50,000 by telephone by calling us at our administrative office at 1-800-851-9777, Monday – Friday, between the hours of 8:30 a.m. - 7:00 p.m. Eastern Time. If you do not want the ability to request a loan by telephone, you should notify us in writing at our mailing address. You will be required to provide certain information for identification purposes when you request a loan by telephone. We may ask you to provide us with written confirmation of your request. We will not be liable for processing a loan request if we believe the request is genuine. **(Note:** All loan requests must be submitted in good order to avoid a delay in processing your request.)

If your loan request is less than $500,000, then you may fax it to us at 1-727-299-1620. (If you send your request by fax, be sure to use the correct fax number.) If the loan request exceeds $500,000 or if the address of record has been changed in the past 10
days, we may reject your request or require a signature guarantee. We will not be responsible for any transmittal problems when you fax your request unless you report it to us within five business days and send us proof of your fax transmittal.

Your requests for a loan that are received at our mailing address (or faxed to our administrative office per the above instructions) before the NYSE closes are priced using the subaccount unit value determined at the close of that regular business session of the NYSE (usually 4:00 p.m. Eastern Time). If we receive a written request at our mailing address (or a fax request at our administrative office) after the NYSE closes, or on a day the NYSE is closed for trading, we will process the request using the subaccount unit value determined at the close of the next regular business session of the NYSE. Please Note: All loan requests must be submitted in good order to avoid a delay in processing your request.

You can repay a loan at any time while the Policy is in force. Loan repayments must be sent to our mailing address and will be credited as of the date received.

At each Policy anniversary, we will compare the outstanding loan amount, including accrued loan interest, to the amount in the loan reserve account. At each such time, if the outstanding loan amount, including accrued loan interest, exceeds the amount in the loan reserve account, we will withdraw the difference from the subaccounts and the fixed account and transfer it to the loan reserve account, in the same manner as when a loan is made. If the amount in the loan reserve account exceeds the amount of the outstanding loan, including accrued loan interest, we will withdraw the difference from the loan reserve account and transfer it to the subaccounts and the fixed account in the same manner as current premiums are allocated. No charge will be imposed for these transfers, and these transfers are not treated as transfers in calculating the transfer charge. We reserve the right to require a transfer to the fixed account if the loans were originally transferred from the fixed account.

**LOAN INTEREST SPREAD**

The Loan Interest Spread is the difference between the amount of interest we charge you for a loan (currently, an effective annual rate of 2.75%, guaranteed not to exceed 3.0%) and the amount of interest we credit to your loan reserve account (an effective annual rate of 2.0% guaranteed). We may apply different loan interest rates to different portions of the outstanding loan amount. After the 10th Policy year, we will charge preferred loan interest rate on a portion of the outstanding loan amount, but only if there is a gain on the Policy. Beginning at the insured’s attained age 100, we will apply preferred loan rates on an amount equal to the cash value minus total premiums paid (less any cash withdrawals) and minus any outstanding loan amount, including accrued loan interest. The maximum loan interest spread on preferred loans is 0.25%, and the current spread is 0.0%.

**LOAN RESERVE INTEREST RATE CREDITED**

We will credit the amount in the loan reserve account with interest at an effective annual rate of 2.0%.

**EFFECT OF POLICY LOANS**

A Policy loan reduces the death benefit proceeds and net surrender value by the amount of any outstanding loan amount, including accrued loan interest. Repaying the loan causes the death benefit proceeds and net surrender value to increase by the amount of the repayment. As long as a loan is outstanding, we hold an amount in the loan reserve equal to the amount of the outstanding loan as of the last Policy anniversary plus any accrued interest. This amount is not affected by the separate account’s investment performance and may not be credited with the interest rates accruing on the unloaned portion of cash value in the fixed account. Amounts transferred from the separate account to the loan reserve account will reduce the value in the separate account and we will credit such amounts with an interest rate of 2.0% rather than a rate of return reflecting the investment results of the separate account.

We also currently charge interest on Policy loans at an effective annual rate of 2.75%. Because interest is added to the amount of the Policy loan to be repaid, the size of the loan will constantly increase unless the interest and/or the Policy loan is repaid.

There are risks involved in taking a Policy loan, including the potential for a Policy to lapse if projected earnings, taking into account outstanding loans, are not achieved. A Policy loan may also have possible adverse tax consequences. You should consult a tax advisor before taking out a Policy loan.

We will notify you (and any assignee of record) if a loan causes your net surrender value to reach zero. If you do not submit a sufficient payment within 61 days from the date of the notice, your Policy may lapse.

**POLICY LAPSE AND REINSTATEMENT**

**LAPSE**

Your Policy may not necessarily lapse (terminate without value) if you fail to make a planned periodic payment. However, even if you make all your planned periodic payments, there is a possibility that your Policy will lose value and lapse. This Policy provides a no lapse guarantee as described below. Once your no lapse period ends, or if the no lapse guarantee is not in effect, your
Policy may lapse if the net surrender value on any Monthiversary is less than the monthly deductions due on that day. Lapse might occur if unfavorable investment experience, loans, accrued loan interest, and cash withdrawals cause a decrease in the net surrender value, or if you have not paid sufficient premiums (as discussed below) to offset the cost of monthly deductions.

If the net surrender value is not enough to pay the monthly deductions, then we will mail a notice to your last known address according to our records and any assignee of record. The notice will specify the minimum payment you must pay and the final date by which we must receive the payment to prevent a lapse. We generally require that you make the payment within 61 days after the date of the notice. This 61-day period is called the grace period. We pay the death benefit proceeds if an insured dies during the grace period. If we do not receive the specified minimum payment by the end of the grace period, then all coverage under the Policy will terminate without value.

Your Policy is a flexible premium policy that is subject to certain monthly deductions that are dependent upon, among other factors, the characteristics of the insureds, riders associated with your Policy, and your Policy’s specified amount. If your Policy does lapse and you choose to reinstate it, you will be required to make additional payments. The payments needed to reinstate the Policy will depend on whether the no lapse date has passed. Please refer to the section below entitled “Reinstatement” for a description of the payments that may be required to reinstate your Policy.

**NO LAPSE GUARANTEE**

As noted above, the Policy provides a no lapse guarantee during the no lapse period. As long as you keep the no lapse guarantee in effect, your Policy will not lapse and no grace period will begin. Even if your net surrender value is not enough to pay your monthly deductions, the Policy will not lapse as long as the no lapse guarantee is in effect. The no lapse guarantee will not extend beyond the no lapse date stated in your Policy. Each month we determine whether the no lapse guarantee is still in effect. If the no lapse guarantee is not in effect and the Policy is still in force, it can be restored by paying, at any time before the no lapse date, minimum monthly guarantee premiums sufficient to cover the period from the Policy date up to and including the current month.

**No lapse date:**

- For issue ages 0-60, the no lapse date is determined by either the number of years to attained age 65 or the 20th Policy anniversary, whichever is earlier.
- For issue ages 61-85, the no lapse date is the 5th Policy anniversary.
- The no lapse date is specified in your Policy.
- The no lapse guarantee will not remain in effect if you do not pay sufficient minimum monthly guarantee premiums.
- You must pay total premiums (minus cash withdrawals and any outstanding loan amount including accrued loan interest) that equal at least:
  - the sum of the minimum monthly guarantee premiums in effect for each month from the Policy date up to and including the current month.

**Keeping the no lapse guarantee in effect:**

**Effect of changes on minimum monthly guarantee premium:**

- We will recalculate the amount of the minimum monthly guarantee premium if, while the no lapse guarantee is in effect, you change death benefit options, increase or decrease the specified amount, or if supplemental benefits (riders) (except the Inflation Fighter Rider Level Premium) are added, terminated, reduced or increased.
- Depending upon the change made to the Policy or rider and the resulting impact on the level of the minimum monthly guarantee premium, you may need to pay additional premiums to keep the Policy in force and/or to keep the no lapse guarantee in effect. We normally will not extend the length of the no lapse guarantee.

You will lessen the risk of Policy lapse if you keep the no lapse guarantee in effect for each month from the Policy Date up to and including the current month. Before you take a cash withdrawal or a loan, or decrease the specified amount, or add, increase or decrease a rider, you should consider carefully the effect it will have on the no lapse guarantee.

See “Minimum Monthly Guarantee Premium” for a discussion of how the minimum monthly guarantee premium is calculated and can change.
REINSTATMENT

We may reinstate a lapsed Policy within five years after the lapse. You may not reinstate the Policy if it has been surrendered for cash surrender value. Any reinstatement must be made during the lifetime of the insured. Before we reinstate the Policy, we will require all of the following:

- Submit a written application for reinstatement to our mailing address or fax your request to our administrative office at 1-727-299-1620. (If you send your request by fax, be sure to use the correct fax number.)
- Submit the insured’s written consent to reinstate.
- Submit evidence of insurability that is satisfactory to us that the insured continues to qualify for the same underwriting class and any substandard rating upon which we based issuance of the Policy.
- If the no lapse period has expired, pay an amount sufficient to provide a net premium equal to any uncollected monthly deductions due up to the time of termination, plus two monthly deductions due in advance at the time of reinstatement, plus an amount sufficient to increase the cash value above the surrender charges that would apply at the time of reinstatement.
- If the no lapse period has not expired, pay the lesser of the premium described directly above, or the total minimum monthly guarantee premium from the Policy date through the month of lapse, plus two months of minimum monthly guarantee premiums, minus premiums previously paid net of any withdrawals, outstanding loans and accrued loan interest.

The cash value of the loan reserve on the reinstatement date will be zero. Your net surrender value on the reinstatement date will equal the cash value at the time your Policy lapsed, plus any net premiums you pay at reinstatement, minus one monthly deduction and any surrender charge (that we would assess if you were to surrender the Policy). The reinstatement date for your Policy will be the Monthiversary on or following the day we approve your application for reinstatement. We may decline a request for reinstatement. We will not reinstate indebtedness (i.e., outstanding loans plus any accrued loan interest at the time your Policy lapsed).

FEDERAL INCOME TAX CONSIDERATIONS

The following summarizes some of the basic federal income tax considerations associated with a Policy and does not purport to be complete or to cover all situations. This discussion is not intended as tax advice. Please consult counsel or other qualified tax advisors for more complete information. We base this discussion on our understanding of the present federal income tax laws as they are currently interpreted by the Internal Revenue Service (the “IRS”). Federal income tax laws and the current interpretations by the IRS may change.

TAX STATUS OF THE POLICY

A Policy must satisfy certain requirements set forth in the Internal Revenue Code (the “Code”) in order to qualify as a life insurance policy for federal income tax purposes and to receive the tax treatment normally accorded life insurance policies under federal tax law. Guidance as to how these requirements are to be applied is limited. Nevertheless, we believe that the Policy should generally satisfy the applicable Code requirements.

In certain circumstances, owners of variable life insurance policies have been considered for federal income tax purposes to be the owners of the assets of the separate account supporting their policies due to their ability to exercise investment control over those assets. Where this is the case, the policyowners have been currently taxed on income and gains attributable to the separate account assets. There is little guidance in this area. We believe that the Policy does not give you investment control over separate account assets.

In addition, the Code requires that the investments of the separate account be “adequately diversified” in order to treat the Policy as a life insurance policy for federal income tax purposes. We intend that the separate account, through the portfolios, will satisfy these diversification requirements.

The following discussion assumes that the Policy will qualify as a life insurance policy for federal income tax purposes.

TAX TREATMENT OF POLICY BENEFITS

In General. We believe that the Policy described in this prospectus is a life insurance policy under Code Section 7702. Section 7702 defines a life insurance policy for federal income tax purposes and places limits on the relationship of the cash value to the death benefit. As life insurance policies, the death benefits of the policies are generally excludable from the gross income of the beneficiaries. In the absence of any guidance from the IRS on the issue, we believe that providing an amount at risk after attained age 99 in the manner provided should be sufficient to maintain the excludability of the death benefit after attained age 99. Lack of specific IRS guidance, however, makes the tax treatment of the death benefit after attained age 99 uncertain. Also, any increase in cash value should generally not be taxable until received by you or your designee. However, if your Policy is a modified endowment contract as defined in Code Section 7702A you may be taxed to the extent of gain in the Policy when you take a Policy loan, pledge or assign the
Policy. Federal, state and local transfer, estate and other tax consequences of ownership or receipt of Policy proceeds depend on your circumstances and the beneficiary’s circumstances. A tax advisor should be consulted on these consequences.

Generally, you will not be deemed to be in constructive receipt of the cash value until there is a distribution. When distributions from a Policy occur, or when loans are taken out from or secured by a Policy (e.g., by assignment), the tax consequences depend on whether the Policy is classified as a MEC. Moreover, if a loan from a Policy that is not a MEC is outstanding when the Policy is surrendered or lapses, the amount of outstanding indebtedness will be considered an amount distributed and will be taxed accordingly.

Modified Endowment Contracts. Under the Code, certain life insurance policies are classified as MECs and receive less favorable tax treatment than other life insurance policies. The rules are too complex to summarize here, but generally depend on the amount of premiums paid during the first seven Policy years or in the seven Policy years following certain changes in the Policy. Changes that would cause a contract to enter a new seven-year test period include, for example, an increase in the death benefit that is not the result of a premium necessary to keep the Policy in-force. Additionally, a reduction in benefits during a seven-year test period could cause a Policy to become a MEC. Due to the Policy’s flexibility, each Policy’s circumstances will determine whether the Policy is classified as a MEC. If you do not want your Policy to be classified as a MEC, you should consult a tax advisor to determine the circumstances, if any, under which your Policy would or would not be classified as a MEC.

Upon issue of your Policy, we will notify you as to whether or not your Policy is classified as a MEC based on the initial premium we receive. If a payment would cause your Policy to become a MEC, you and your registered representative will be notified and we will not apply the premium. At that time, you will need to notify us if you want to continue your Policy as a MEC. Unless you notify us that you do want to continue your Policy as a MEC, we will refund the dollar amount of the excess premium that would cause the Policy to become a MEC.

Distributions (other than Death Benefits) from MECs. Policies classified as MECs are subject to the following tax rules:

- All distributions other than death benefits from a MEC, including distributions upon surrender and cash withdrawals, will be treated first as distributions of gain taxable as ordinary income. They will be treated as tax-free recovery of the owner’s investment in the Policy only after all gain has been distributed. Your investment in the Policy is generally your total premium payments. When a distribution is taken from the Policy, your investment in the Policy is reduced by the amount of the distribution that is tax-free.
- Loans taken from or secured by (e.g., by assignment) or pledges of such a Policy and increases in cash value secured by such loan or pledge are treated as distributions and taxed accordingly. If the Policy is part of a collateral assignment split dollar arrangement, the initial assignment as well as increases in cash value during the assignment may be treated as distributions and considered taxable.
- A 10% additional federal income tax is imposed on the amount included in income except where the distribution or loan is made when you have reached age 59½ or are disabled, or where the distribution is part of a series of substantially equal periodic payments for your life (or life expectancy) or the joint lives (or joint life expectancies) of you and the beneficiary.
- If a Policy becomes a MEC, distributions that occur during the Policy year will be taxed as distributions from a MEC. In addition, the IRS has the authority, but has not yet done so, to issue regulations providing that distributions from a Policy that are made within two years before the Policy becomes a MEC will also be taxed in this manner.

Distributions (other than Death Benefits) from Policies that are not MECs. Distributions from a Policy that is not a MEC are generally treated first as a recovery of your investment in the Policy, and as taxable income after the recovery of all investment in the Policy. However, certain distributions which must be made in order to enable the Policy to continue to qualify as a life insurance policy for federal income tax purposes if Policy benefits are reduced during the first 15 Policy years may be treated in whole or in part as ordinary income subject to tax. Distributions from or loans from or secured by a Policy that is not a MEC are not subject to the 10% additional tax applicable to MECs.

Policy Loans. Loans from or secured by a Policy that is not a MEC are generally not treated as distributions. Instead, such loans are treated as indebtedness. If a loan from a Policy that is not a MEC is outstanding when the Policy is surrendered or lapses, the amount of the outstanding indebtedness will be taxed as if it were a distribution at that time. The tax consequences associated with Policy loans outstanding after the first 10 Policy years with preferred loan rates are less clear and a tax advisor should be consulted about such loans.

Deductibility of Policy Loan Interest. In general, interest you pay on a loan from a Policy will not be deductible. Before taking out a Policy loan, you should consult a tax advisor as to the tax consequences.

Investment in the Policy. Your investment in the Policy is generally the sum of the premium payments you made reduced by a withdrawal or distributions from the Policy that are tax-free.

Withholding. To the extent that Policy distributions are taxable, they are generally subject to withholding for the recipient’s federal income tax liability. The federal income tax withholding rate is generally 10% of the taxable amount of the distribution. Withholding applies only if the taxable amount of all distributions is at least $200 during a taxable year. Some states also require
withholding for state income taxes. With the exception of amounts that represent eligible rollover distributions from Pension Plans and 403(b) arrangements, which are subject to mandatory withholding of 20% for federal tax, recipients can generally elect, however, not to have tax withheld from distributions. If the taxable distributions are delivered to foreign countries, U.S. persons may not elect out of withholding. Taxable distributions to non-resident aliens are generally subject to withholding at a 30% rate unless withholding is eliminated under an international treaty with the United States. The payment of death benefits is generally not subject to withholding.

**Business Uses of the Policy.** The Policy may be used in various arrangements, including nonqualified deferred compensation or salary continuance plans, split dollar insurance plans, executive bonus plans, retiree medical benefit plans and others. The tax consequences of such plans and business uses of the Policy may vary depending on the particular facts and circumstances of each individual arrangement and business use of the Policy. Therefore, if you are contemplating using the Policy in any such arrangement, you should be sure to consult a tax advisor as to tax attributes of the arrangement and in its use of life insurance. In recent years, moreover, Congress and the IRS have adopted new rules relating to nonqualified deferred compensation and to life insurance owned by businesses and life insurance used in split-dollar arrangements. The IRS has recently issued new guidance regarding concerns in the use of life insurance in employee welfare benefit plans, including, but not limited to, the deduction of employer contributions and the status of such plans as listed transactions. Any business contemplating the purchase of a new Policy or a change in an existing Policy should consult a tax advisor. In addition, Section 101(j) of the Internal Revenue Code imposes notice, consent and other provisions on policies owned by employers and certain of their affiliates, owners and employees in order to receive death benefits tax-free and it requires additional tax reporting requirements.

**Alternative Minimum Tax.** There also may be an indirect tax upon the income in the Policy or the proceeds of a Policy under the federal corporate alternative minimum tax, if the policyowner is subject to that tax.

**Living Benefit Rider (an Accelerated Death Benefit).** We believe that the single-sum payment we make under this rider should be fully excludible from the gross income of the beneficiary, except in certain business contexts. You should consult a tax advisor about the consequences of adding this rider to your Policy, or requesting a single-sum payment.

**Continuation of Policy Beyond Attained Age 99.** The tax consequences of continuing the Policy beyond the insured’s attained age 99 are unclear and may include taxation of the gain in the Policy or the taxation of the death benefit in whole or in part. You should consult a tax advisor if you intend to keep the Policy in force beyond the insured’s attained age 99.

**Other Tax Considerations.** The transfer of the Policy or designation of a beneficiary may have federal, state, and/or local transfer and inheritance tax consequences, including the imposition of gift, estate, and generation-skipping transfer taxes. The individual situation of each owner or beneficiary will determine the extent, if any, to which federal, state, and local transfer and inheritance taxes may be imposed and how ownership or receipt of Policy proceeds will be treated for purposes of federal, state and local estate, inheritance, generation-skipping and other taxes. Special Rules for Pension Plans and Section 403(b) Arrangements. If the Policy is purchased in connection with a section 401(a) qualified pension or profit sharing plan, including a section 401(k) plan, or in connection with a section 403(b) plan or program, federal and state income and estate tax consequences could differ from those stated in this prospectus. The purchase may also affect the qualified status of the plan. You should consult a qualified tax advisor in connection with such purchase. Policies owned under these types of plans may be subject to the Employee Retirement Income Security Act of 1974, or ERISA, which may impose additional requirements on the purchase of policies by such plans. You should consult a qualified advisor regarding ERISA.

**Please Note:**

- **Foreign Account Tax Compliance Act (“FATCA”).** The discussion above provides general information regarding U.S. federal income tax consequences to life and annuity purchasers that are U.S. citizens or residents. Purchasers that are not U.S. citizens or residents will generally be subject to U.S. federal withholding tax on taxable distributions from life policies and annuity contracts at a 30% rate, unless a lower treaty rate applies. In addition, such purchasers may be subject to state and/or municipal taxes and taxes that may be imposed by the purchaser’s country of citizenship or residence. FATCA imposed additional reporting and documentation requirements where non-U.S. entities (including foreign corporations, partnerships, and trusts) purchase policies to identify U.S. persons who are beneficial owners of the policies. Additional withholding of U.S. tax may be imposed if such documentation is not provided. In furtherance of FATCA implementation, the U.S. has entered into Inter-Government Agreements (“IGA’s”) with various foreign governments that require an exchange of information between U.S. financial institutions, including Transamerica Premier and the foreign governments regarding purchases of life insurance and annuities by their respective citizens. Prospective purchasers are advised to consult with a qualified tax adviser regarding U.S., state, and foreign taxation with respect to a life insurance policy or an annuity contract purchase.

- In 2001, Congress enacted the Economic Growth and Tax Relief Reconciliation Act of 2001 (“EGTRRA”), which modified the estate, gift and generation-skipping transfer taxes through 2009 and eliminated the estate tax (but not the gift tax) and replaced it with a carryover basis income tax regime for estates of decedents dying in 2010, and also eliminated the
generation-skipping transfer tax for transfers made in 2010. The 2010 Taxpayer Relief Act generally extended the EGTRRA provisions existing in 2009 and reunified the estate and gift transfer taxes for 2011 and 2012. The American Taxpayer Relief Act of 2012 made permanent certain of the changes to the estate, gift and generation-skipping transfer taxes. These provisions were modified again in December, 2017 by H.R. 1 (formerly known as the Tax Cuts and Jobs Act). The estate and gift tax unified credit basic exclusion amount increases to $10,000,000, subject to inflation adjustments (using the C-CPI-U), for taxable years beginning after December 31, 2017, and before January 1, 2026. This recent history of changes in these important tax provisions underscores the importance of seeking guidance from a qualified advisor to help ensure that your estate plan adequately addresses possible transfer taxation of the Policy and its benefits in light of your needs and that of your beneficiaries under all possible scenarios.

**OTHER POLICY INFORMATION**

**SETTLEMENT OPTIONS**

If you surrender the Policy, you may elect to receive the net surrender value in either a lump sum by check or as a series of regular income payments under one of the three settlement options described below. In either event, life insurance coverage ends. Also, when the insured dies, the beneficiary may apply the lump sum death benefit proceeds to one of the same settlement options. If the regular payment under a settlement option would be less than $100, we will instead pay the proceeds in one lump sum. We may make other settlement options available in the future.

Once we begin making payments under a settlement option, you or the beneficiary will no longer have any value in the subaccounts or the fixed account. Instead, the only entitlement will be the amount of the payment specified under the terms of the settlement option chosen. Depending upon the circumstances, the effective date of a settlement option is the surrender date or the insured’s date of death.

Under any settlement option, the dollar amount of each payment will depend on:

- The amount of the surrender on the surrender date or death benefit proceeds on the insured’s date of death.
- The interest rate we credit on those amounts (we guarantee a minimum annual interest rate of 2.0%).
- The mortality tables we use.
- The specific payment option(s) you choose.

**Option 1—Equal Monthly Installments for a Fixed Period**

- We will pay the proceeds, plus interest, in equal monthly installments for a fixed period of your choice, but not longer than 240 months.
- We will stop making payments once we have made all the payments for the period selected.

**Option 2—Equal Monthly Installments for Life (Life Income)**

At your or the beneficiary’s direction, we will make equal monthly installments:

- Only for the life of the payee, at the end of which payments will end; **or**
- For the longer of the payee's life, or for 10 years if the payee dies before the end of the first 10 years of payments; **or**
- For the longer of the payee’s life, or until the total amount of all payments we have made equals the proceeds that were applied to the settlement option.

**Option 3—Equal Monthly Installments for the Life of the Payee and then to a Designated Survivor (Joint and Survivor)**

- We will make equal monthly payments during the joint lifetime of two persons, first to a chosen payee, and then to a co-payee, if living, upon the death of the payee.
- Payments to the co-payee, if living, upon the payee’s death will equal either:
  - The full amount paid to the payee before the payee’s death; **or**
  - Two-thirds of the amount paid to the payee before the payee’s death.
- All payments will cease upon the death of the co-payee.
PAYMENTS WE MAKE

We usually pay the amounts of any surrender, cash withdrawal, death benefit proceeds, or settlement options within seven calendar days after we receive all applicable written notices and/or due proofs of death (in good order) at our administrative office. However, we can postpone such payments if any of the following occurs:

- The NYSE is closed, other than customary weekend and holiday closings, or trading on the NYSE is restricted.
- The SEC permits, by an order, the postponement for the protection of policyowners.
- An emergency exists that would make the disposal of securities held in the separate account or the determination of their value not reasonably practicable.

In addition, pursuant to SEC rules, if the Transamerica BlackRock Government Money Market VP portfolio or the ProFund VP Government Money Market portfolio suspends payment of redemption proceeds in connection with a liquidation of such portfolio or as a result of portfolio liquidity levels, we will delay payment of any transfer, partial withdrawal, surrender, loan, or death benefit from the Transamerica BlackRock Government Money Market subaccount or the ProFund VP Government Money Market subaccount until the portfolio pays redemption proceeds.

If you have submitted a recent check or draft, we have the right to defer payment of surrenders, cash withdrawals, death benefit proceeds, or payments under a settlement option until such check or draft has been honored. We also reserve the right to defer payment of transfers, cash withdrawals, death benefit proceeds, or surrenders from the fixed account for up to six months.

If mandated under applicable law, we may be required to reject a premium payment and/or block a policyowner’s account and thereby refuse to pay any request for transfers, withdrawals, surrenders, loans or death benefits until instructions are received from the appropriate regulators. We may also be required to provide additional information about you or your account to governmental regulators.

SPLIT DOLLAR ARRANGEMENTS

You may enter into a split dollar arrangement with another owner or another person(s) whereby the payment of premiums and the right to receive the benefits under the Policy (i.e., net surrender value of insurance proceeds) are split between the parties. There are different ways of allocating these rights.

For example, an employer and employee might agree that under a Policy on the life of the employee, the employer will pay the premiums and will have the right to receive the net surrender value. The employee may designate the beneficiary to receive any insurance proceeds in excess of the net surrender value. If the employee dies while such an arrangement is in effect, the employer would receive from the insurance proceeds the amount that he would have been entitled to receive upon surrender of the Policy and the employee’s beneficiary would receive the balance of the proceeds.

No transfer of Policy rights pursuant to a split dollar arrangement will be binding on us unless in writing and received by us in good order at our mailing address. Split dollar arrangements may have tax consequences. You should consult a tax advisor before entering into a split dollar arrangement.

The Sarbanes-Oxley Act (the “Act”) was enacted in 2002. The Act prohibits, with limited exceptions, publicly-traded companies, including non-U.S. companies that have securities listed on exchanges in the United States, from extending, directly or through a subsidiary, many types of personal loans to their directors or executive officers. It is possible that this prohibition may be interpreted as applying to split-dollar life insurance policies for directors and executive officers of such companies, since such insurance arguably can be viewed as involving a loan from the employer for at least some purposes.

Although the prohibition on loans of publicly-traded companies was generally effective as of July 30, 2002, there is an exception for loans outstanding as of the date of enactment, as long as there is no material modification to the loan terms and the loan is not renewed after July 30, 2002. Any affected business contemplating the payment of a premium on an existing Policy, or the purchase of a new Policy, in connection with a split-dollar life insurance arrangement should consult legal counsel.

In addition, the IRS issued guidance that affects the tax treatment of split-dollar arrangements and the Treasury Department issued final regulations that would significantly affect the tax treatment of such arrangements. The IRS guidance and the final regulations affect all split dollar arrangements, not just those involving publicly traded companies. Consult your qualified tax advisor with respect to the effect of this guidance on your split dollar policy.

POLICY TERMINATION

Your Policy will terminate and all benefits under it will cease on the earliest of the following:
● The date the Policy lapses;
● The date we receive (in good order) your written request to surrender or terminate; or
● The date of the insured’s death.

ASSIGNMENT OF THE POLICY

You may assign your Policy by filing a written request with us. We will not be bound by any assignment until we record it in our records. Unless otherwise specified by you, the assignment will then take effect on the date the assignment form is received in good order by the Company and accepted in our administrative office. We assume no responsibility for the validity or effect of any assignment of the Policy or of any interest in it. Any death benefit which becomes payable to an assignee will be payable in a single sum and will be subject to proof of the assignee’s interest and the extent of the assignment. To terminate the assignment, we will need a release of assignment form dated and completed by the assignee. If a corporation, we require a corporate resolution noting the authorized person(s).

SUPPLEMENTAL BENEFITS (RIDERS)

The following supplemental benefits (riders) are available and may be added to your Policy. Monthly charges for these riders are deducted from the cash value as part of the monthly deductions. The riders available with the Policies do not build cash value and provide benefits that do not vary with the investment experience of the separate account. These riders may not be available in all states; certain benefits and features may vary by state and may be available under a different name in some states. Adding these supplemental benefits to an existing Policy, or canceling them, may have tax consequences; you should consult a tax advisor before doing so.

We may discontinue offering riders at any time without notice, unless the rider specifically states otherwise. Some riders may only be elected at the time of application. Once a rider is elected it cannot be terminated without your consent (or by operation of law) if all terms and conditions are fully satisfied.

LIVING BENEFIT RIDER (AN ACCELERATED DEATH BENEFIT)

This rider allows us to pay all or a portion of the death benefit once we receive proof, in good order, at our mailing address that the insured is ill and has a life expectancy of one year or less. A doctor must certify the insured’s life expectancy.

We will pay a single-sum benefit equal to:

● The death benefit on the date we pay the single-sum benefit; multiplied by
● The percentage of the death benefit you elect to receive (“election percentage”); divided by
● 1 + i (“i” equals the current yield on 90-day Treasury bills or the Policy loan interest rate (currently 2.75%), whichever is greater) (“discount factor”); minus
● Any indebtedness at the time we pay the single-sum benefit, multiplied by the election percentage.

The maximum terminal illness death benefit used to determine the single-sum benefit as defined above is equal to:

● The death benefit available under the Policy once we receive satisfactory proof that the insured is ill; plus
● The benefit available under any PIR Plus in force.

A single-sum benefit may not exceed $500,000.

You elect the election percentage. It may not be greater than 100%.

The rider terminates at the earliest of:

● The date the Policy terminates.
● The date a settlement option takes effect.
● The date we pay a single-sum benefit.
● The date you terminate the rider.

We will not pay a benefit under the rider if the insured’s terminal condition results from self-inflicted injuries that occur during the period specified in your Policy’s suicide provision.

We do not assess an administrative charge for this rider; if the rider is exercised, however, we do reduce the single sum benefit by a discount factor to compensate us for expected income lost due to the early payment of the death benefit. The terms of the rider vary depending on a state’s insurance law requirements.

For example, suppose before the owner elects the single sum benefit, a Policy has a $400,000 death benefit and a $10,000 loan balance. Suppose that the current yield on 90-day Treasury bills is 6.00% and the Policy loan interest rate is 2.75%. Because the
greater of these is 6%, that is the interest rate that will be used to discount the single sum benefit. The owner elects to accelerate 50% of the death benefit, so the single sum benefit equals $183,679.25, which is ($400,000 x 0.50/ 1.06) - ($10,000 x 0.50). After the acceleration, the remaining death benefit is $200,000, which is 50% of $400,000, and all Policy values, including the loan balance, will be reduced by 50%.

**Note:** Before adding this rider to a Policy or requesting payment under the rider, you should consult a tax advisor to discuss the tax consequences of doing so.

**Primary Insured Rider Plus ("PIR Plus")**

Under the PIR Plus, we provide term insurance coverage on the primary insured on a different basis from the coverage in your Policy.

**Features of PIR Plus:**

- The rider increases the Policy’s death benefit by the rider’s face amount.
- The rider may be purchased for issue ages 0-85.
- The minimum purchase amount for the rider is $25,000. There is no maximum purchase amount.
- We do not assess any additional surrender charge for the rider.
- Generally the rider coverage costs less than the insurance under the Policy, but it has no cash value and terminates at attained age 100, and it does not provide a guarantee that current cost of insurance rates in the first three Policy years will remain fixed.
- You may cancel or reduce your rider coverage without decreasing your Policy’s specified amount.
- You may generally decrease your Policy’s specified amount without reducing your rider coverage.

Subject to the following conditions, on any Monthiversary while this rider is in force, you may convert this rider to a new Policy on the primary insured’s life without evidence of insurability.

**Conditions to convert the rider:**

- Your request must be in writing and sent to our mailing address, in good order.
- The primary insured has not reached his/her 86th birthday.
- The new policy is any permanent insurance policy that we currently offer for conversions.
- We may allow an increase to the Policy’s specified amount if the Base Policy and all of the riders in force allow such an increase.
- The amount of the insurance under the new policy or the amount of the increase will equal the specified amount in force under the rider as long as it meets the minimum specified amount requirements of a Base Policy.
- We will base your premium on the primary insured’s rate class under the rider.

**Termination of the rider:**

The rider will terminate on the earliest of:

- The Policy anniversary on or following the primary insured’s 100th birthday; or
- The date the Policy terminates; or
- The date you fully convert this rider; or
- The Monthiversary when the rider terminates upon the owner’s written request.

It may cost you more to keep a higher specified amount under the Base Policy, because the specified amount may have a cost of insurance that is higher than the cost of the same amount of coverage under your PIR Plus. Any changes to the coverage of this rider may affect your minimum monthly guarantee premium. Please refer to the applicable fee tables for your Policy to determine the charges for this rider. You should consult your registered representative to determine if you would benefit from PIR Plus. We may discontinue offering PIR Plus at any time. We may also modify the terms of this rider for new policies.
OTHER INSURED RIDER

This rider may insure the spouse (or a non-spouse Other Insured where required by state law) and/or dependent children of the primary insured. Please note that if a non-spouse is the Other Insured there may be adverse tax consequences. Subject to the terms of the rider, we will pay the specified amount of the rider to the primary insured for Policies applied for before September 22, 2008 and issued before January 1, 2009, or to the selected beneficiary for 2001 C.S.O. policies (those Policies issued on or after January 1, 2009). Subject to the terms of the rider, we will pay the specified amount of the rider when we receive proof (in good order at our mailing address) that the Other Insured’s death occurred while this rider was in force. For issue ages 0-85, our minimum specified amount for this rider is $10,000. The maximum specified amount is the lesser of $1,000,000 or the total amount of coverage on the primary insured. The maximum number of Other Insured Riders that is allowed on any one Policy is five (5). Please refer to the applicable fee tables for your Policy to determine the respective charges for this rider. Subject to the following conditions, on any Monthiversary while the rider is in force, you may convert it to a new policy on the Other Insured’s life (without evidence of insurability).

Conditions to convert the rider:

- Your request must be in writing, in good order, and sent to our mailing address.
- The Other Insured has not reached his/her 86th birthday.
- The new policy is any permanent insurance policy that we currently offer for conversion.
- Subject to the minimum specified amount required for the new policy, the amount of the insurance under the new policy will equal the face amount in force under the rider as long as it meets the minimum specified amount requirements of the original Policy.
- We will base the premium for the new policy on the Other Insured’s underwriting class under the rider.

Termination of the rider:

The rider will terminate on the earliest of:

- The Policy anniversary on or following the Other Insured’s 100th birthday; or
- The date the Policy terminates for any reason except for the death of the primary insured; or
- 31 days after the death of the primary insured; or
- The date of conversion of this rider; or
- The Monthiversary when the rider terminates upon the owner’s written request.

CHILDREN'S INSURANCE RIDER

This rider provides insurance on the primary insured’s children who are between the ages of 15 days and 18 years old on the effective date of the rider or when later added to the rider due to birth or legal adoption. The coverage for any insured child will terminate on the Monthiversary following that child’s 25th birthday (or that child’s death, if sooner).

Our minimum face amount for this rider is $5,000 and the maximum face amount is $20,000. We will pay a death benefit once we receive proof, in good order, at our mailing address that the insured child died while the rider was in force for that child. At each insured child’s age 25, this rider may be converted to a new policy for five times the face amount of the rider. If the primary insured dies while the rider is in force, we will terminate the rider 31 days after the death, and we will offer a separate life insurance policy to each insured child for an amount equal to the face amount of the rider.

ACCIDENTAL DEATH BENEFIT RIDER

Available to primary insureds issue ages 15-59, the minimum specified amount for this rider is $10,000. The maximum specified amount available for the rider is the lesser of (i) $150,000 or (ii) 150% of the Policy's specified amount.

Subject to certain limitations, we will pay the specified amount if the death of the primary insured results solely from accidental bodily injury where:

- The death is caused by external, violent, and accidental means.
- The death occurs within 90 days of the accident.
- The death occurs while the rider is in force.

The rider will terminate on the earliest of:

- The Policy anniversary on or following the primary insured’s 70th birthday; or
● The date the Policy terminates; or
● The Monthiversary when the rider terminates upon the owner’s written request.

**DISABILITY WAIVER OF MONTHLY DEDUCTIONS RIDER**

Subject to certain conditions, we will waive the Policy’s monthly deductions while the primary insured is disabled. You may purchase this rider if the primary insured’s issue age is between 15 and 55 at the time the rider is purchased. This rider is not available together with the Disability Waiver of Premium Rider.

Before we waive any monthly deductions, we must receive proof, in good order, at our mailing address that:

- The primary insured is totally disabled;
- The primary insured’s total disability began before the Policy anniversary on or following the primary insured’s 60th birthday; and
- The primary insured’s total disability has existed continuously for at least six months.

We will not waive any deduction that becomes due more than one year before we receive written notice of your claim, after the primary insured’s recovery from disability, or after termination of this rider. While the primary insured is totally disabled and receiving benefits under this rider, no grace period will begin for the Policy provided that the cash value minus loans and accrued loan interest remains positive. It is possible that additional premium payments will be required to keep the Policy in force while the waiver of monthly deductions benefit is being paid.

**Termination of the rider:**

The rider will terminate on the earliest of:

- The Policy anniversary on or following the primary insured’s 60th birthday, unless the primary insured is totally disabled; or
- The date of recovery from disability (with respect to benefits accruing during the continuance of an existing total disability after the Policy anniversary on or following the primary insured’s 60th birthday); or
- The date the Policy terminates; or
- The Monthiversary when this rider is terminated upon the owner’s written request.

If we are paying benefits under the rider on the Policy anniversary after the insured’s 60th birthday, then the rider will not terminate and benefits will continue until the date the primary insured is no longer totally disabled.

**DISABILITY WAIVER OF PREMIUM RIDER**

Subject to certain conditions, we will apply the waiver of premium benefit, as shown on the Policy schedule page, as if it is a premium payment into the Policy, while the primary insured is totally disabled, as defined in the rider. The waiver of premium benefit is generally equal to the annual planned premium for the Policy, but the maximum payment is the lesser of $12,000 or the maximum annual premium payable under the Guideline Premium Test. We will allocate the resulting net premium into the Policy’s cash value. You may purchase this rider if the primary insured’s issue age is between 15 and 55. This rider is not available in combination with the Disability Waiver of Monthly Deductions Rider.

Before paying a benefit, we must receive proof, in good order at our mailing address that:

- The primary insured is totally disabled.
- The primary insured became totally disabled before the Policy anniversary on or following the primary insured’s 60th birthday.
- The primary insured’s total disability has existed continuously for at least six months.

Upon meeting the requirements above, we will also make a retroactive payment equal to six months of benefits under the rider. We will apply the benefit each month on the Monthiversary. We may not pay any benefit that becomes due more than one year before we receive written notice of your claim, after the primary insured’s recovery from disability, or after termination of this rider. It is possible that additional premium payments will be required to keep the Policy in force while the waiver of premium benefit is being paid.

**Termination of the rider:**

The rider will terminate on the earliest of:

- The Policy anniversary on or following the primary insured’s 60th birthday, unless the primary insured is totally disabled; or
- The later of the date of recovery from the disability or the Policy anniversary on or following the insured’s 100th birthday (with respect to benefits accruing during the continuance of an existing total...
disability after the Policy anniversary on or following the primary insured’s 60th birthday; or
● The date the Policy terminates; or
● The Monthiversary when this rider terminates upon the owner’s written request.

INFLATION FIGHTER RIDER LEVEL PREMIUM

This rider provides scheduled annual increases to the Policy’s specified amount, starting on the first Policy anniversary and continuing each Policy anniversary until the Policy’s 20th anniversary, without an additional application or evidence of insurability. The rider is available only at issue of the Policy for issue ages 0-65, and only if Death Benefit Option A is chosen on the application. If you select the Inflation Fighter Rider Level Premium, we will not recalculate your minimum monthly guarantee premium with each increase in specified amount generated by the rider. You must elect this rider on the application. The rider is not available to insureds in a substandard rating class.

Features of the rider:

● The Policy’s initial specified amount must be less than $1,000,000.
● Any change to the Policy’s death benefit option will cause the rider to terminate and annual specified amount increases to stop.
● Any withdrawal or requested decrease in specified amount of the Policy will cause the rider to terminate and annual scheduled specified amount increases to stop.
● If you decline any scheduled specified amount increase under the rider, the rider will terminate and further scheduled specified amount increases will stop.
● Future scheduled percentage increases under the rider apply only to the Policy’s specified amount on the Policy date plus any previous scheduled specified amount increases under the rider. Increases under the rider do not apply to increases in specified amount requested by you after the Policy date.
● The Policy’s surrender charge period and surrender charges apply separately to each scheduled increase in specified amount. Upon a surrender of the Policy, total surrender charges will be the sum of any surrender charges applicable to the Policy and to each annual increase amount effected under the rider.
● The no lapse period for the Policy will continue to be measured from the Policy date, and will not change each time a scheduled increase in specified amount is effected under the rider.
● Each time a scheduled increase in specified amount is made under the rider, the tests we apply to qualify the Policy as life insurance under Code Section 7702, and for MEC purposes will be recalculated.
● Scheduled annual increases in specified amount generated by this rider will increase the cost of insurance charges and increase the amount and duration of the monthly per unit charges and surrender charges under the Policy. Each new layer of surrender charges and monthly per unit charges resulting from the scheduled annual increase in specified amount will be based on the amount of increase, the insured’s issue age at time of increase and the Policy duration from date of increase. Each new layer of cost of insurance charge is based on, among other factors, the insured’s issue age and the duration of the Policy at the time of the increase.
● Banding of specified amounts for purposes of applying cost of insurance rates and monthly per unit charges is determined by adding the Policy’s specified amount and the sum of the specified amounts created by operation of the rider. The resulting cost of insurance rates and the monthly per unit charges, according to the appropriate specified amount band, will then apply to both the Policy’s specified amount and to each of the specified amount increases generated by the rider.
Any requested decreases in specified amount are applied on a “last-in-first-out” basis, such that the last increase in specified amount created by operation of the rider will be eliminated first, and so on.

Termination of the rider: The rider will terminate on the earliest of the following:

- The processing date of a requested decrease in the specified amount of the Policy.
- The date an automatic increase, under the terms of the rider, is declined by the owner.
- The day following the 20th anniversary of the Policy.
- A cash withdrawal from the Policy.
- Any change in death benefit option.
- The date the insured dies.
- The date the Policy terminates for any reason other than the death of the insured.
- The date we receive your written request at our mailing address to terminate the Policy or the rider.

Under the rider, the Policy’s specified amount will increase on a compounded basis by 3.53%. As a courtesy, you will receive a notice of the date and amount of each scheduled increase from us on or prior to each Policy anniversary. You may, at that time, decline in writing to us an increase within 45 days of the date of the notice. If you decline a scheduled increase in specified amount, the rider will terminate and further scheduled increases under the rider will be canceled.

ADDITIONAL INFORMATION

UNCLAIMED AND ABANDONED PROPERTY

Every state has unclaimed property laws that generally provide for escheatment to the state of unclaimed property (including proceeds of annuity, life and other insurance policies) under various circumstances. In addition to the state unclaimed property laws, we may be required to escheat property pursuant to regulatory demand, finding, agreement or settlement. To help prevent such escheatment, it is important that you keep your contact and other information on file with us up to date, including the names, contact information and identifying information for owners, insureds, annuitants, beneficiaries and other payees. Such updates should be communicated in a form and manner satisfactory to us.

SENDING FORMS AND TRANSACTION REQUESTS IN GOOD ORDER

We cannot carry out your instructions to process a transaction relating to the Policy until we have received your instructions in good order at our mailing address (or our administrative office or website, as appropriate). "Good order" means the actual receipt by us of the instructions relating to a transaction in writing or, when appropriate, by telephone or facsimile, or electronically, along with all forms, information and supporting legal documentation (including any required spousal or joint owner's consents) we require in order to effect the transaction. To be in “good order,” instructions must be sufficiently clear so that we do not need to exercise any discretion to follow such instructions.

THE POLICY (NOTE: THIS POLICY IS NOT AVAILABLE FOR NEW SALES)

Distribution and Principal Underwriting Agreement We have entered into a principal underwriting agreement with our affiliate, TCI, for the distribution and sale of the Policies. We reimburse TCI for certain expenses it incurs in order to pay for the distribution of the Policies.

We have discontinued new sales of the Policies. You may, however, continue to make premium payments to fund your Policy pursuant to its terms, and exercise other rights and options under your Policy—such as reallocating your Policy value among investment options, making partial withdrawals, surrendering your Policy, and making changes in ownership of your Policy.

Compensation to Broker-Dealers Selling the Policies. The Policies are offered to the public through broker-dealers (“selling firms”) that are licensed under the federal securities laws; the selling firm and/or its affiliates is/are also licensed under state insurance laws. The selling firms have entered into written selling agreements with us and with TCI as principal underwriter for the Policies. We pay commissions through TCI to the selling firms for their sales of the Policies.
A limited number of affiliated and unaffiliated broker-dealers, including Transamerica Financial Advisors, Inc. (“TFA”), may also be paid commissions and overrides to “wholesale” the Policies, that is, to provide sales support and training to sales representatives at selling firms. We may also provide compensation to a limited number of broker-dealers for providing ongoing service in relation to Policies that have already been purchased.

The selling firms are paid commissions for the promotion and sale of the Policies according to one or more schedules. The amount and timing of commissions may vary depending on the selling agreement. The sales commission paid to broker-dealers during 2018 was, on average, 53.3% of all premiums paid during the first Policy year, plus 3% of all premiums made during Policy years 2–10. We will pay an additional trail commission of up to 0.30% of the Policy's subaccount value (excluding the fixed account) on the Policy anniversary if the cash value (minus amounts attributable to loans) equals at least $5,000. Additional sales commissions may also be payable on premiums paid as a result of an increase in specified amount. Some selling firms may be required to return first year commissions (less surrender charge) if the Policy is not continued through the first two Policy years.

To the extent permitted by rules of the Financial Industry Regulatory Authority (“FINRA”), Transamerica Premier, TFA, and other affiliated parties may pay (or allow other broker-dealers to provide) promotional incentives or payments in the form of cash or non-cash compensation or reimbursement to some, but not all, selling firms and their sales representatives. These arrangements are described further below.

The sales representative who sells you the Policy typically receives a portion of the compensation we (and our affiliates) pay to his or her selling firm, depending on the agreement between the selling firm and its sales representative and the firm’s internal compensation program. These programs may include other types of cash and non-cash compensation and other benefits. Ask your sales representative for further information about the compensation your sales representative and the selling firm that employs your sales representative, may receive in connection with your purchase of a Policy. Also inquire about any compensation arrangements that we and our affiliates may have with the selling firm, including the conflicts of interests that such arrangements may create.

You should be aware that a selling firm or its sales representatives may receive different compensation or incentives for selling one product over another. In some cases, these differences may create an incentive for the selling firm or its sales representatives to recommend or sell this Policy to you. You may wish to take such incentives into account when considering and evaluating any recommendation relating to the Policies.

Special Compensation for Affiliated Wholesaling and Selling Firms. Our parent company provides paid-in capital to TCI and pays the cost of TCI’s operating and other expenses, including costs for facilities, legal and accounting services, and other internal administrative functions.

Transamerica Premier’s main distribution channel is TFA, an affiliate, which sells Transamerica Premier products. Transamerica Premier covers the cost of TFA’s various facilities, third-party services and internal administrative functions, including employee salaries, sales representative training and employee benefits that are provided directly to TFA. These facilities and services are necessary for TFA’s administration and operation, and Transamerica Premier is compensated by TFA for these expenses based on TFA’s usage. In addition, Transamerica Premier and other affiliates pay for certain sales expenses of TFA, including the costs of preparing and producing prospectuses and sales promotional materials for the Policy.

Sales representatives and their supervisors at certain affiliated firms may receive, directly or indirectly, additional cash benefits and non-cash compensation or reimbursements from us or our affiliates. Additional compensation or reimbursement arrangements may include payments in connection with the firm’s conferences or seminars, sales or training programs for invited selling representatives and other employees, seminars for the public, trips (such as travel, lodging and meals in connection therewith), entertainment, merchandise and other similar items, and payments, loans or loan guaranties to assist a firm or representative in connection with systems, operating, marketing, and other business expenses. The amounts may be significant and may provide us with increased access to the sales representatives.

In addition, supervisors and/or sales representatives of those affiliated firms who meet certain productivity standards may be eligible for additional compensation. Sales of the Policies by affiliated selling firms may help sales representatives and/or their managers qualify for certain cash or non-cash benefits, and may provide such persons with special incentive to sell our Policies. For example, certain sales representatives, general agents, marketing directors and supervisors may be eligible to participate in a voluntary stock purchase plan that permits participants to purchase stock of Aegon N.V. (Transamerica Premier’s ultimate parent) by allocating a portion of the commissions they earn to purchase such shares. A portion of the contributions of commissions by the representatives may be matched by the firm. Certain sales representatives may also be eligible to participate in a stock option and award plan. Registered representatives who meet certain production goals will be issued options on the stock of Aegon N.V.

Additional Compensation that We Pay to Selected Selling Firms. We may pay certain selling firms additional cash amounts in order to receive enhanced marketing services and increased access to their sales representatives. In exchange for providing us with access to their distribution network, such selling firms may receive additional compensation or reimbursement for, among other things, the hiring and training of sales personnel, marketing, sponsoring of conferences and seminars, and/or other services they
provide to us and our affiliates. To the extent permitted by applicable law, we and other parties may allow other non-cash incentives and compensation to be paid to these selling firms.

These special compensation arrangements are not offered to all selling firms and the terms of such arrangements are not the same for all selling firms and may be based on past sales of the Policies or other criteria. Overrides were offered for certain products as incentives to our affiliate, TFA, in 2018.

No specific charge is assessed directly to policyowners or the separate account to cover commissions and other incentives or payments described above. We do intend to recoup commissions and other sales expenses and incentives we pay, however, through fees and charges deducted under the Policy and other corporate revenue.

**Cyber Security Risks**

**Our operations support complex transactions and are highly dependent on the proper functioning of information technology and communication systems. Any failure of our information technology or communications systems may result in a material adverse effect on our results of operations and corporate reputation.**

Any failure of or gap in the systems and processes necessary to support complex transactions and avoid systems failure, fraud, information security failures, processing errors, cyber intrusion, loss of data and breaches of regulation may lead to a materially adverse effect on our results of operations and corporate reputation. In addition, we must commit significant resources to maintain and enhance its existing systems in order to keep pace with applicable regulatory requirements, industry standards and customer preferences. If we fail to maintain secure and well-functioning information systems, we may not be able to rely on information for product pricing, compliance obligations, risk management and underwriting decisions. In addition, we cannot assure investors or consumers that interruptions, failures or breaches in security of these processes and systems will not occur, or if they do occur, that they can be timely detected and remediated. The occurrence of any of these events may have a materially adverse effect on our businesses, results of operations and financial condition.

**A computer system failure or security breach may disrupt our business, damage our reputation and adversely affect our results of operations, financial condition and cash flows.**

We rely heavily on computer and information systems and internet and network connectivity to conduct a large portion of our business operations. This includes the need to securely store, process and transmit confidential information, including personal information, through a number of complex systems. In many cases this also includes transmission and processing to or through commercial customers, business partners and third-party service providers. The introduction of new technologies, computer system failures, cyber-crime attacks or security or privacy breaches may materially disrupt our business operations, damage our reputation, result in regulatory and litigation exposure, investigation and remediation costs, and materially and adversely affect our results of operations, financial condition and cash flows.

The information security risk that we face includes the risk of malicious outside forces using public networks and other methods, including social engineering and the exploitation of targeted offline processes, to attack our systems and information. It also includes inside threats, both malicious and accidental. For example, human error and lack of sufficiently automated processing can result in improper information exposure or use. We also face risk in this area due to its reliance in many cases on third-party systems, all of which may face cyber and information security risks of their own. Third-party administrators or distribution partners used by us or our subsidiaries may not adequately secure their own information systems and networks, or may not adequately keep pace with the dynamic changes in this area. Potential bad actors that target us and our applicable third parties may include, but are not limited to, criminal organizations, foreign government bodies, political factions, and others.

In recent years information security risk has increased sharply due to a number of developments in how information systems are used by companies such as us, but also by society in general. Threats have increased as criminals and other bad actors become more organized and employ more sophisticated techniques. At the same time companies increasingly make information systems and data available through the internet, mobile devices or other network connections to customers, employees and business partners, thereby expanding the attack surface that bad actors can exploit.

Large, global financial institutions such as us have been, and will continue to be subject to information security attacks for the foreseeable future. The nature of these attacks will also continue to be unpredictable, and in many cases may arise from circumstances that are beyond our control. If we fail to adequately invest in defensive infrastructure, technology and processes or to effectively execute against its information security strategy, it may suffer material adverse consequences.

To date the highest impact information security incidents that we have experienced are believed to have been the result of
e-mail phishing attacks targeted at our business partners and commercial customers. This in turn led to unauthorized use of valid our website credentials to engage in fraudulent transactions and improper data exfiltration. Additionally, we have also faced other types of attacks Although to our knowledge these events have thus far not been material in nature, our management believes that significant investment will be required to establish and maintain adequate information security systems that are capable of addressing the possibility of these types of attacks, as well as for the possibility of more significant and sophisticated information security attacks, in the future. There is no guarantee that the measures that we take will be sufficient to stop all types of attacks or mitigate all types of information security or privacy risks.

We maintain cyber liability insurance to help decrease the impact of cyber-attacks and information security events, subject to the terms and conditions of the policy, however such insurance may not be sufficient to cover all applicable losses that we may suffer.

The Transamerica Chief Information Security Officer oversees the company’s information security program, and provides reporting up to company management and, directly or indirectly, to the Board of Directors, as well as Aegon’s Global Chief Information Security Officer.

A breach of data privacy or security obligations may disrupt our business, damage our reputation and adversely affect financial conditions and results of operations.

Pursuant to applicable laws, various government agencies and independent administrative bodies have established numerous rules protecting the privacy and security of personal information and other confidential information held by us. For example, certain of our businesses are subject to laws and regulations enacted by U.S. federal and state governments, the E.U. or other non-U.S. jurisdictions and/or enacted by various regulatory organizations relating to the privacy and/or security of the information of customers, employees or others. The New York Department of Finance Services (NYDFS), pursuant to its cybersecurity regulation, requires financial institutions regulated by the NYDFS, including certain Aegon subsidiaries, to, among other things, satisfy an extensive set of minimum cyber security requirements, including but not limited to governance, management, reporting, policy, technology and control requirements. Numerous other U.S. laws also impose various information security and privacy related obligations with respect to various Aegon subsidiaries operating in the U.S., including but not limited to the Gramm-Leach-Bliley Act and related state laws (GLBA), and the Health Insurance Portability and Accountability Act (HIPAA), among many others. Other legislators and regulators with jurisdiction over our businesses are considering potential enhanced information security risk management and privacy rules and regulations. A number of Transamerica’s companies are also subject to contractual restrictions with respect to the information of our clients and business partners. A number of our systems, employees and business partners have access to, and routinely process, the personal information of consumers. We rely on various processes and controls to protect the confidentiality, integrity and availability of personal information and other confidential information that is accessible to, or in the possession of, us, our systems, employees and business partners. It is possible that an employee, business partner or system could, intentionally or unintentionally, inappropriately disclose or misuse personal or confidential information. Our data or data in our possession could also be the subject of an unauthorized cyber intrusion or cybersecurity attack. If we fail to maintain adequate processes and controls or if we or our business partners fail to comply with relevant laws and regulations, policies and procedures, misappropriation or intentional or unintentional inappropriate disclosure or misuse of personal information or other confidential information could occur. Such control inadequacies or non-compliance could cause disrupted operations and misstated or unreliable financial data, materially damage our reputation or lead to increased regulatory scrutiny or civil or criminal penalties or litigation, which, in turn, could have a material adverse effect on our business, financial condition and results of operations. In addition, we analyse personal information and customer data to better manage our business, subject to applicable laws and regulations and other restrictions. It is possible that additional regulatory or other restrictions regarding the use of such techniques may be imposed. Additional privacy and security obligations have been imposed by various governments with jurisdiction over Aegon or its subsidiaries in recent years, and more such obligations are likely to be imposed in the near future. Such restrictions and obligations could have material impacts on our business, financial conditions and/or results of operations.

For a complete description regarding Transamerica’s policies for its websites, including the Privacy Policy and Terms of Use for such websites, please visit: www.transamerica.com/individual/privacy-policy and www.transamerica.com/individual/terms-of-use.

LEGAL PROCEEDINGS

We, like other life insurance companies, are subject to regulatory and legal proceedings, including class action lawsuits, in the ordinary course of our business. Such legal and regulatory matters include proceedings specific to us and other proceedings generally applicable to business practices in the industry in which we operate. In some lawsuits and regulatory proceedings involving insurers, substantial damages have been sought and/or material settlement payments have been made. Although the outcome of any litigation or regulatory proceeding cannot be predicted with certainty, at the present time, we believe that there are no pending or
threatened proceedings or lawsuits that are likely to have a material adverse impact on the separate account, on TCI’s ability to perform under its principal underwriting agreement, or on our ability to meet our obligations under the Policy.

The Company was the subject of inquiries and remains under audits and market conduct examinations with a focus on the handling of unreported claims and abandoned property. The audits and related examination activity may result in additional payments to beneficiaries, escheatment of funds deemed abandoned, and administrative penalties. The Company previously implemented changes in the procedures for the identification of unreported claims and handling of escheatable property to comply with the terms of regulatory agreements and newly adopted laws and regulations. The Company does not believe that any regulatory actions or agreements that result from these audits and examinations will have a material adverse impact on our ability to meet our obligations.

**FINANCIAL STATEMENTS**

The financial statements of Transamerica Premier and the separate account are included in the SAI.

Additional information regarding the investment performance of the portfolios appears in the fund prospectuses, which accompany this prospectus.
## Glossary

**accounts**  
The options to which you can allocate your money. The accounts include the fixed account and the subaccounts in the separate account.

**administrative office**  
Our administrative office address is 570 Carillon Parkway, St. Petersburg, Florida, 33716-1294. Our phone number is 1-800-851-9777; our facsimile numbers are 1-727-299-1648 (for subaccount transfers only) and 1-727-299-1620 (for all other fax requests). Our administrative office serves as the recipient of all website (www.premier.transamerica.com), telephonic and facsimile transactions, including, but not limited to transfer requests and premium payments made by wire transfer and through electronic credit and debit transactions (e.g., payments through direct deposit, debit transfers, and forms of e-commerce payments). Our hours are Monday – Friday from 8:30 a.m. – 7:00 p.m. Eastern Time. **Please do not send any checks, claims, correspondence or notices to this office; send them to the mailing address.**

**attained age**  
The issue age of the person insured, plus the number of completed years since the Policy date (for the initial specified amount) or the date of each increase in specified amount.

**Base Policy**  
The Transamerica® Freedom Elite Builder II variable life insurance policy without any supplemental riders.

**beneficiary(ies)**  
The person or persons you select to receive the death benefit proceeds from the Policy. You name the primary beneficiary and contingent beneficiary(ies).

**cash value**  
At the end of any valuation period, the sum of your Policy’s value in the subaccounts and the fixed account. If there is a Policy loan outstanding, then the cash value includes any amounts held in our fixed account to secure the Policy loan.

**death benefit proceeds**  
The amount we will pay to the beneficiary(ies) on the insured’s death. We will reduce the death benefit proceeds by the amount of any outstanding loan amount, including any accrued loan interest and, if the insured dies during the grace period, any charges that are due and unpaid.

**face amount**  
The dollar amount of coverage stated in any rider that you may add to your Policy.

**fixed account**  
An allocation option other than the separate account to which you may allocate net premiums and cash value. We guarantee that any amounts you allocate to the fixed account will earn interest at a declared rate. The fixed account is part of our general account. **The fixed account is not available to you if your Policy was applied for before September 22, 2008 and was issued before January 1, 2009 in the State of New Jersey.**

**free look period**  
The period during which you may return the Policy and receive a refund as described in this prospectus. The length of the free look period varies by state. The free look period is listed in the Policy.

**funds**  
Investment companies which are registered with the U.S. Securities and Exchange Commission. The Policy allows you to invest in the portfolios of the funds through our subaccounts.

**good order**  
An instruction that is received by the Company, that is sufficiently complete and clear, along with all forms, information and supporting legal documentation (including any required spousal or joint owner’s consents) so that the Company does not need to exercise any discretion to follow such instruction. All orders to process a withdrawal request, a loan request, a request to surrender your Policy, a fund transfer request, or a death benefit claim must be in good order.

**in force**  
While coverage under the Policy or a supplemental rider, if any, is active and the insured’s life remains insured.

**initial premium**  
The amount you must pay before insurance coverage begins under the Policy. The initial premium is shown on the schedule pages of your Policy.

**indebtedness**  
Outstanding loan payments plus accrued interest at the time your Policy lapsed.
insured  The person whose life is insured by the Policy.

issue age  The insured’s age on his or her birthday on or prior to the Policy date. When you increase the Policy’s specified amount of insurance coverage, the issue age for the new layer of specified amount coverage is the insured’s age on his or her birthday on or before the date that the increase in specified amount takes effect. This age may be different from the attained age on other layers of specified amount coverage.

lapse  When life insurance coverage ends and the Policy terminates because you do not have enough net surrender value in the Policy to pay the monthly deductions, the surrender charge and any outstanding loan amount, including accrued loan interest, and you have not made a sufficient payment by the end of a grace period.

loan reserve account  A part of the fixed account to which amounts are transferred as collateral for Policy loans.

mailing address  Our mailing address is 4333 Edgewood Road, N.E., Cedar Rapids, Iowa, 52499-0001. All claims, correspondence and notices must be sent to this address. Premium payments and loan repayments made by check may also be sent to PO Box 742583, Cincinnati, OH 45274-2583.

maximum fixed account value  The maximum amount that may be allocated to the fixed account at any time without prior approval is the amount that would cause the fixed account to be $250,000, exclusive of loan reserve requirements. (This restriction does not apply to transfers to the fixed account necessary in the exercise of conversion rights).

minimum monthly guarantee premium  The amount shown on the Policy schedule page that we use during the no lapse period to determine whether a grace period will begin. We will adjust the minimum monthly guarantee premium if you change death benefit options, increase or decrease the specified amount, or add, increase or decrease a rider, and you may need to pay additional premiums in order to keep the no lapse guarantee in place. A Policy with the Inflation Fighter Rider Level Premium initially has higher minimum monthly guarantee premiums than a Base Policy, but the minimum monthly guarantee premium does not increase annually. A grace period will begin whenever your net surrender value is not enough to meet monthly deductions and the no lapse guarantee is no longer in effect.

Monthiversary  This is the day of each month when we determine Policy charges and deduct them from cash value. It is the same date each month as the Policy date. If there is no valuation date in the calendar month that coincides with the Policy date, the Monthiversary is the next valuation date.

monthly deductions  The monthly Policy charge, plus the monthly cost of insurance, plus the monthly per unit charge, plus the monthly charge for any riders added to your Policy, all of which are deducted from the Policy’s cash value on each Monthiversary.

mortality and expense risk charge  This charge is a daily deduction from each subaccount that is taken before determining the unit value of that subaccount.

net premium  The part of your premium that we allocate to the fixed account or the subaccounts. The net premium is equal to the premium you paid minus the premium expense charge.

net surrender value  The amount we will pay you if you surrender the Policy while it is in force. The net surrender value on the date you surrender is equal to: the cash value, minus any surrender charge as of such date, minus any outstanding loan amount and minus any accrued loan interest.

no lapse date  For a Policy with issue ages 0-60, the no lapse date is the 20th Policy anniversary or the insured’s attained age 65, whichever is earlier. For a Policy with issue ages 61-85, the no lapse date is the 5th Policy anniversary. The no lapse date is specified in your Policy.

no lapse period  The period of time between the Policy date and the no lapse date during which the Policy will not lapse as long as certain conditions are met.

NYSE  The New York Stock Exchange.

planned periodic premium  A premium payment you make in a level amount at a fixed interval over a specified period of time.
Policy date: The date generally when our underwriting process is complete, full life insurance coverage goes into effect, the initial premium payment has been received, and we begin to take the monthly deductions. The Policy date is shown on the schedule pages of your Policy. If you request, we may backdate a Policy by assigning a Policy date earlier than the date the Policy is issued. We measure Policy months, years, and anniversaries from the Policy date.

portfolio: One of the separate investment portfolios of a fund.

premium expense charge: The charge that is deducted from each premium payment before determining the net premium that will be credited to the cash value.

premiums: All payments you make under the Policy other than loan repayments.

reallocation account: That portion of the fixed account where we hold the net premium(s) from the record date until the reallocation date.

reallocation date: The date we reallocate all cash value held in the reallocation account to the fixed account and /or subaccounts you selected on your application. We place your net premium in the reallocation account only if your state requires us to return the full premium in the event you exercise your free look right. In those states we set the reallocation date to coincide with the free look period that is applicable to your Policy plus a margin of five days for Policy delivery. In all other states, the reallocation date is the later of the Policy date or the record date.

record date: The date we record your Policy on our books and your Policy is issued. The record date is generally the Policy date, unless the Policy is backdated.

separate account: The WRL Series Life Account. It is a separate investment account that is divided into subaccounts. We established the separate account to receive and invest net premiums under the Policy and other variable life insurance policies we issue.

specified amount (may be referred to as “face amount” in riders): The initial specified amount of life insurance that you have selected is shown on the Base Policy’s schedule pages that you receive when the Policy is issued. The in force specified amount is the initial specified amount, adjusted for any increases or decreases in the Base Policy’s specified amount (including any increase in specified amount generated by the Inflation Fighter Rider Level Premium). Other events such as a request to increase or decrease the specified amount, change in death benefit option or a cash withdrawal (if you choose Option A or if you choose Option C death benefit and the insured is attained age 71 or greater) may also affect the specified amount in force.

subaccount: A subdivision of the separate account that invests exclusively in shares of one investment portfolio of a fund.

surrender charge: If, during the first 10 Policy years (or during the 10-year period subsequent to an increase in specified amount), you fully surrender the Policy, then we will deduct a surrender charge from your cash value.

termination: When the insured’s life is no longer insured under the Policy or any rider, and neither the Policy (nor any rider) is in force.

valuation date: Each day the New York Stock Exchange is open for normal trading. Transamerica Premier is open for business whenever the New York Stock Exchange is open. Please Note: Any day that Transamerica Premier is open for business, but the New York Stock Exchange is not open for normal trading, is not considered a valuation date.

valuation period: The period of time over which we determine the change in the value of the subaccounts. Each valuation period begins at the close of normal trading on the New York Stock Exchange (usually 4:00 p.m. Eastern Time on each valuation date) and ends at the close of normal trading of the New York Stock Exchange on the next valuation date.

we, us, our, the Company (Transamerica Premier): Transamerica Premier Life Insurance Company.
| written notice | The written notice you must sign and send us to request or exercise your rights as owner under the Policy. To be complete and in good order, it must: (1) be in a form we accept; (2) contain the information and documentation that we determine we need to take the action you request; and (3) be received at our mailing address. |

| you, your (owner or policyowner) | The person entitled to exercise all rights as owner under the Policy. |
APPENDICES A-1, A-1(A) & B-1
For Policies Applied For On or After September 22, 2008
(Based on the 2001 C.S.O. Tables)
### FOR POLICIES APPLIED FOR ON OR AFTER SEPTEMBER 22, 2008

#### APPENDIX A-1: SURRENDER CHARGE PER THOUSAND OF SPECIFIED AMOUNT LAYER

(BASED ON THE SEX AND RATE CLASS OF THE INSURED)

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<td>57.00</td>
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<td>57.00</td>
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FOR POLICIES APPLIED FOR ON OR AFTER SEPTEMBER 22, 2008

APPENDIX A-1(a): SURRENDER CHARGE FACTORS

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<th>Factor for Issue Ages</th>
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<td>0.25</td>
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<tr>
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* The factor on any date other than a Policy anniversary or anniversary of an increase in specified amount will be determined proportionately using the factor at the end of the year prior to surrender and the factor at the end of the year of surrender.

Surrender Charge Examples For Policies Applied For On or After September 22, 2008: Assume a male non-tobacco user purchases the Policy at issue age 30 with a specified amount of $100,000. The Policy is surrendered at the end of Policy year 5. The surrender charge per $1,000 of specified amount is $16.95. This is multiplied by the surrender charge factor of 0.68.

\[
\text{The surrender charge} = \frac{\text{the surrender charge per } $1,000 (\$16.95)}{\text{x the number of thousands of initial specified amount (100)}} \times \text{the surrender charge factor (0.68)} = \$1,152.60.
\]
These charts show the surrender charge and annualized monthly per unit charge associated with the Inflation Fighter Rider Level Premium. These are based on a male, issue age 30, preferred elite rate class with an initial specified amount of $300,000.

The chart below shows the Base Policy surrender charge and the surrender charge that applies to each scheduled annual increase. The Base Policy and each of the scheduled annual increases have a surrender charge that applies for 10 Policy years from the issue date or the date of the scheduled increase. The surrender charge declines rapidly over the first 10 Policy years, increases over the next 11 years, and grades down to zero over the next nine years.

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<th>Age</th>
<th>Specified Amount</th>
<th>Total Surrender Charge (in Dollars)</th>
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<td>31</td>
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<td>32</td>
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<td>4,843</td>
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<tr>
<td>4</td>
<td>33</td>
<td>332,905</td>
<td>4,569</td>
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<tr>
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<td>34</td>
<td>344,657</td>
<td>4,187</td>
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<td>35</td>
<td>356,823</td>
<td>3,694</td>
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<tr>
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<tr>
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<td>40</td>
<td>424,408</td>
<td>1,488</td>
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<tr>
<td>12</td>
<td>41</td>
<td>439,390</td>
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<td>42</td>
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<tr>
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<td>43</td>
<td>470,958</td>
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<td>46</td>
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The chart below shows the current Base Policy annualized monthly per unit charge and the annualized monthly per unit charge that applies to each scheduled annual increase. The Base Policy and each of the scheduled increases have a monthly per unit charge that applies for 10 Policy years from the issue date or the date of the scheduled increase. The monthly per unit charge increases over the first 10 Policy years, has a significant drop at the start of year 11 then increases until the end of year 21. After year 21 the monthly per unit charges decrease each year until they become zero in years 31 and beyond.

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APPENDICES A-2 & A-2(A)
For Policies Applied For Before September 22, 2008 and Issued Before January 1, 2009
(Based on the 1980 C.S.O. Tables)
FOR POLICIES APPLIED FOR BEFORE SEPTEMBER 22, 2008 AND ISSUED BEFORE JANUARY 1, 2009

APPENDIX A-2: SURRENDER CHARGE PER THOUSAND OF SPECIFIED AMOUNT LAYER

(BASED ON THE SEX AND RATE CLASS OF THE INSURED)

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## APPENDIX A-2 (a): SURRENDER CHARGE FACTORS

### SURRENDER CHARGE FACTORS

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* The factor on any date other than a Policy anniversary or anniversary of an increase in specified amount will be determined proportionately using the factor at the end of the year prior to surrender and the factor at the end of the year of surrender.

### Surrender Charge Example

Assume a male non-tobacco user purchases the Policy at issue age 30 with a specified amount of $100,000. The Policy is surrendered at the end of Policy year 5. The surrender charge per $1,000 of specified amount is $17.06. This is multiplied by the surrender charge factor of .68.

The surrender charge = The surrender charge per $1,000 ($17.06) x The number of thousands of initial specified amount (100) x The surrender charge factor (.68) = $1,160.08.
PROSPECTUS BACK COVER

PERSONALIZED ILLUSTRATIONS OF POLICY BENEFITS

To help you understand how your Policy values could vary over time under different sets of assumptions, we will provide you, without charge and upon request, with certain personalized hypothetical illustrations showing the death benefit, net surrender value and cash value. These hypothetical illustrations will be based on the age and insurance risk characteristics of the insured persons under your Policy and such factors as the specified amount band, death benefit option, premium payment amounts, and hypothetical rates of return (within limits) that you request. The illustrations are not a representation or guarantee of investment returns or cash value.

INQUIRIES

To learn more about the Policy, you should read the SAI dated the same date as this prospectus. The SAI has been filed with the SEC and is incorporated herein by reference.

For a free copy of the SAI, for other information about the Policy, and to obtain personalized illustrations, please contact your registered representative or send your request to our mailing address at:

Transamerica Premier Life Insurance Company
4333 Edgewood Rd. NE
Cedar Rapids, Iowa 52499
1-800-851-9777-0001
Facsimile: 1-727-299-1620 (1-727-299-1648 for subaccount transfers only)
(Monday - Friday from 8:30 a.m. - 7:00 p.m. Eastern Time)
www.premier.transamerica.com

More information about the Registrant (including the SAI) may be reviewed and copied at the SEC’s Public Reference Room in Washington, D.C. For information on the operation of the Public Reference Room, please contact the SEC at 202-551-8090. You may also obtain copies of reports and other information about the Registrant on the SEC’s website at http://www.sec.gov and copies of this information may be obtained, upon payment of a duplicating fee, by writing the Public Reference Section of the SEC at 100 F Street, NE, Washington, D.C. 20549-2001. The Registrant’s file numbers are listed below.

TCI serves as the principal underwriter for the Policies. More information about TCI is available at http://www.finra.org or by calling 1-800-289-9999. You also can obtain an investor brochure from the Financial Industry Regulatory Authority (“FINRA”) describing its Public Disclosure Program.

SEC File No. 333-199047/811-4420
05/2019