YOUR COST

The cost of this life insurance is based upon the member's and spouse's gender, amount of insurance requested, usage of tobacco/nicotine products, health status and attained age on the date coverage is issued. Premium contributions will vary depending upon the options chosen. Only Nonsmokers meeting the highest underwriting standards will qualify for these "Preferred" rates. Other Nonsmokers may qualify for the higher "Select" or "Standard" rates. (Note: Smokers may only qualify for "Standard" rates.) Upon approval of your application, you will be notified of the rate classification for each approved person. For standard rates or other benefit levels not listed, visit IEEEInsurance.com. Click on "Personal Insurance" and select the coverage of your choice to get a free, no-obligation quote.

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Current 2026-2027 "Preferred", "Select" & "Standard" Annual Premium Contributions† Per $1,000 Benefit Amount

Amounts of $100,000 - $249,000

Member/Spouse Issue Age	Male			Female*		
	Preferred	Select	Standard	Preferred	Select	Standard
20	$1.14	$1.50	$2.46	$0.97	$1.21	$1.80
21	1.14	1.50	2.46	0.97	1.21	1.80
22	1.14	1.50	2.46	0.97	1.21	1.80
23	1.14	1.50	2.46	0.97	1.21	1.80
24	1.14	1.50	2.46	0.97	1.21	1.80
25	1.14	1.50	2.46	0.97	1.21	1.80
26	1.14	1.50	2.46	0.97	1.21	1.84
27	1.14	1.50	2.49	0.97	1.21	1.90
28	1.14	1.50	2.51	0.97	1.21	1.97
29	1.14	1.50	2.54	0.97	1.21	2.05
30	1.14	1.50	2.61	0.97	1.21	2.12
31	1.14	1.51	2.72	0.97	1.23	2.19
32	1.14	1.53	2.84	1.00	1.28	2.25
33	1.14	1.56	3.00	1.02	1.31	2.31
34	1.14	1.59	3.17	1.04	1.37	2.41
35	1.14	1.63	3.35	1.07	1.44	2.53
36	1.19	1.68	3.52	1.10	1.50	2.71
37	1.26	1.76	3.69	1.12	1.57	2.92
38	1.35	1.83	3.90	1.16	1.64	3.17
39	1.45	1.94	4.15	1.20	1.74	3.42
40	1.57	2.09	4.50	1.25	1.83	3.67
41	1.69	2.25	4.97	1.32	1.94	3.92
42	1.85	2.47	5.55	1.40	2.04	4.18
43	2.03	2.72	6.19	1.50	2.17	4.43
44	2.20	2.97	6.88	1.61	2.31	4.73
45	2.38	3.24	7.57	1.72	2.47	5.05
46	2.56	3.49	8.26	1.84	2.66	5.41
47	2.74	3.74	8.98	1.97	2.88	5.80
48	2.92	3.99	9.74	2.11	3.11	6.22
49	3.14	4.33	10.55	2.26	3.36	6.68
50	3.42	4.75	11.40	2.43	3.62	7.16
51	3.74	5.28	12.31	2.62	3.87	7.65
52	4.11	5.91	13.30	2.82	4.12	8.18
53	4.53	6.64	14.32	3.04	4.40	8.74
54	5.02	7.42	15.40	3.29	4.76	9.34

† Payable quarterly, semiannually, annually or via monthly Electronic Funds Transfer (EFT).

* Male rates apply to all coverage issued to Montana residents, regardless of a person's sex. The current annual premium contribution for all eligible children is $6.00 for $10,000.00 of life insurance.

Rates may vary due to rounding.

Note: Premiums are guaranteed to remain level for the first 20 years of coverage. Then, if still eligible, you may reapply for 20-year level rates in effect for a subsequent 20-year term; rates for the subsequent term would be determined based on your then-current age, health and tobacco/nicotine use status and guaranteed for 20 years. If you're not approved for a subsequent 20-year term of guaranteed rates, or do not apply for a subsequent 20-year term, coverage will continue in force on a nonguaranteed rate basis with increasing premiums as the insured ages.

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Current 2026-2027 "Preferred," "Select" & "Standard" Annual Premium Contributions† Per $1,000 Benefit Amount

Amounts of $250,000 - $499,000

Member/Spouse Issue Age	Male			Female*		
	Preferred	Select	Standard	Preferred	Select	Standard
20	$0.80	$1.15	$1.98	$0.65	$0.89	$1.40
21	0.80	1.15	1.98	0.65	0.89	1.40
22	0.80	1.15	1.98	0.65	0.89	1.40
23	0.80	1.15	1.98	0.65	0.89	1.40
24	0.80	1.15	1.98	0.65	0.89	1.40
25	0.80	1.15	1.98	0.65	0.89	1.40
26	0.80	1.15	1.98	0.65	0.89	1.44
27	0.80	1.15	2.00	0.65	0.89	1.49
28	0.80	1.15	2.02	0.65	0.89	1.55
29	0.80	1.15	2.05	0.65	0.89	1.62
30	0.80	1.15	2.11	0.65	0.89	1.68
31	0.80	1.15	2.20	0.66	0.91	1.74
32	0.80	1.17	2.31	0.67	0.95	1.79
33	0.80	1.19	2.45	0.69	0.99	1.85
34	0.80	1.22	2.59	0.71	1.03	1.93
35	0.80	1.26	2.75	0.73	1.09	2.04
36	0.83	1.31	2.90	0.75	1.15	2.19
37	0.86	1.37	3.05	0.78	1.20	2.38
38	0.91	1.44	3.23	0.81	1.27	2.59
39	0.97	1.53	3.45	0.85	1.35	2.81
40	1.05	1.65	3.75	0.90	1.44	3.03
41	1.15	1.80	4.16	0.96	1.52	3.25
42	1.27	1.99	4.66	1.04	1.62	3.47
43	1.40	2.21	5.22	1.12	1.73	3.69
44	1.55	2.42	5.82	1.22	1.85	3.95
45	1.70	2.66	6.42	1.32	1.99	4.23
46	1.86	2.87	7.02	1.43	2.15	4.54
47	2.04	3.09	7.65	1.55	2.34	4.88
48	2.23	3.32	8.31	1.69	2.55	5.25
49	2.43	3.61	9.01	1.83	2.76	5.65
50	2.64	3.97	9.75	1.99	2.99	6.06
51	2.85	4.44	10.54	2.16	3.20	6.49
52	3.05	4.98	11.40	2.33	3.42	6.95
53	3.28	5.61	12.29	2.52	3.66	7.44
54	3.57	6.29	13.23	2.74	3.97	7.96

† Payable quarterly, semiannually, annually or via monthly Electronic Funds Transfer (EFT).

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Rates may vary due to rounding.

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Current 2026-2027 "Preferred," "Select" & "Standard" Annual Premium Contributions† Per $1,000 Benefit Amount

Amounts of $500,000 - $2,000,000

Member/Spouse Issue Age	Male			Female*		
	Preferred	Select	Standard	Preferred	Select	Standard
20	$0.74	$1.09	$1.92	$0.59	$0.83	$1.34
21	0.74	1.09	1.92	0.59	0.83	1.34
22	0.74	1.09	1.92	0.59	0.83	1.34
23	0.74	1.09	1.92	0.59	0.83	1.34
24	0.74	1.09	1.92	0.59	0.83	1.34
25	0.74	1.09	1.92	0.59	0.83	1.34
26	0.74	1.09	1.92	0.59	0.83	1.38
27	0.74	1.09	1.94	0.59	0.83	1.43
28	0.74	1.09	1.96	0.59	0.83	1.49
29	0.74	1.09	1.99	0.59	0.83	1.56
30	0.74	1.09	2.05	0.59	0.83	1.62
31	0.74	1.09	2.14	0.60	0.85	1.68
32	0.74	1.11	2.25	0.61	0.89	1.73
33	0.74	1.13	2.39	0.63	0.93	1.79
34	0.74	1.16	2.53	0.65	0.97	1.87
35	0.74	1.20	2.69	0.67	1.03	1.98
36	0.77	1.25	2.84	0.69	1.09	2.13
37	0.80	1.31	2.99	0.72	1.14	2.32
38	0.85	1.38	3.17	0.75	1.21	2.53
39	0.91	1.47	3.39	0.79	1.29	2.75
40	0.99	1.59	3.69	0.84	1.38	2.97
41	1.09	1.74	4.10	0.90	1.46	3.19
42	1.21	1.93	4.60	0.98	1.56	3.41
43	1.34	2.15	5.16	1.06	1.67	3.63
44	1.49	2.36	5.76	1.16	1.79	3.89
45	1.64	2.60	6.36	1.26	1.93	4.17
46	1.80	2.81	6.96	1.37	2.09	4.48
47	1.98	3.03	7.59	1.49	2.28	4.82
48	2.17	3.26	8.25	1.63	2.49	5.19
49	2.37	3.55	8.95	1.77	2.70	5.59
50	2.58	3.91	9.69	1.93	2.93	6.00
51	2.79	4.38	10.48	2.10	3.14	6.43
52	2.99	4.92	11.34	2.27	3.36	6.89
53	3.22	5.55	12.23	2.46	3.60	7.38
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