

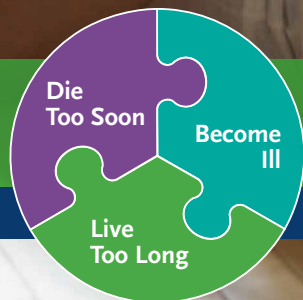


National Life
Group®

Experience Life®

Living Benefits

THERE'S MORE TO LIFE



Products issued by

Life Insurance Company of the Southwest®

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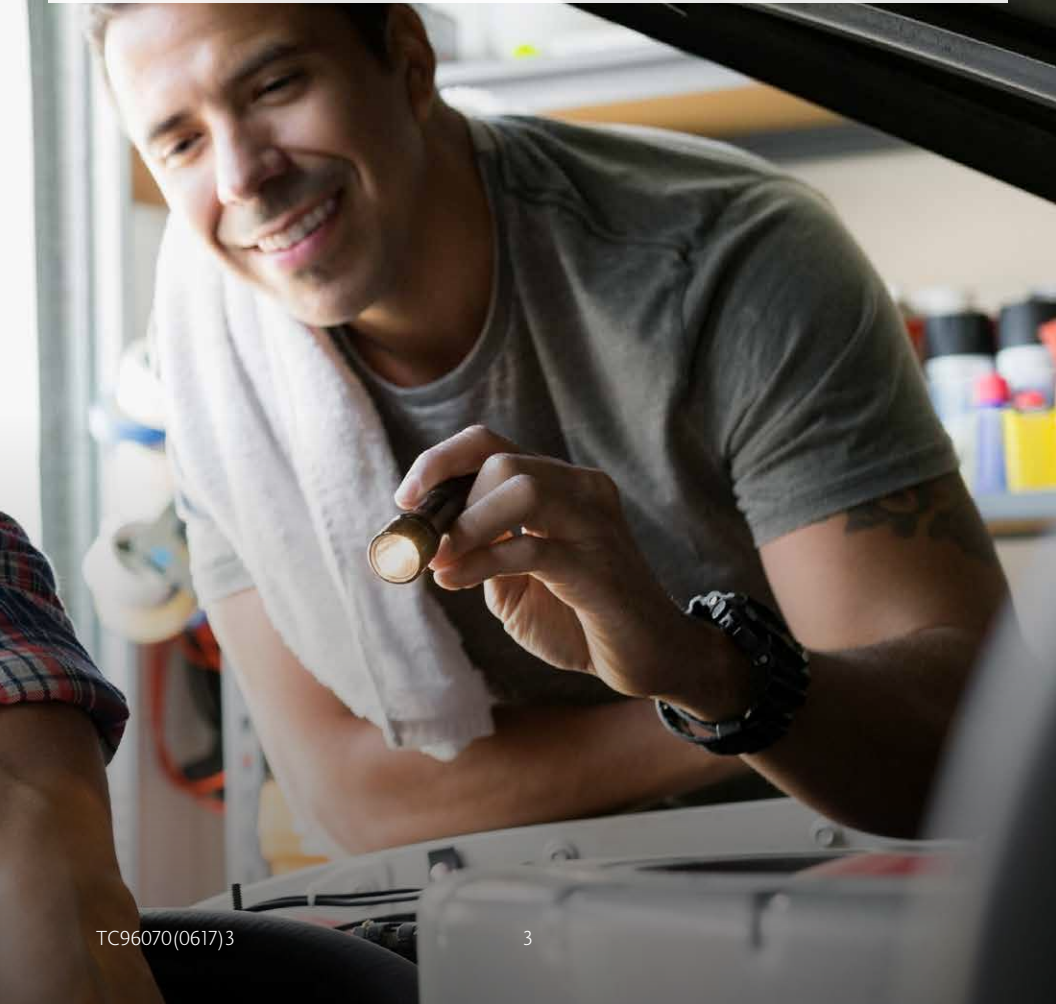


Life Happens

Plan For Today...

Life insurance is a powerful financial tool that can be used to protect and secure your family's future if you should die too soon.

...Protect Tomorrow



Breathe Easier... With Living Benefits

Life insurance you don't have to die to use

Accelerated Benefits Riders are optional, no-additional cost riders that can allow you to access all or part of your death benefit, while living, if you experience a qualifying terminal, chronic, or critical illness, or critical injury.

The use of the benefit is unrestricted with the exception that ABR proceeds for chronic illness in the state of Massachusetts can only be used to pay for expenses incurred for Qualified Long-Term Care services.*

Since the benefit is unrestricted, once you qualify, you can use the benefit for any reason. Benefits might be used for, but are not limited to:

- Household expenses
- Adult Day Care
- Home modifications
- Regular bills
- Nursing home care
- Quality of life expenditures

* Qualified Long-Term Care services: The necessary diagnostic, preventative, therapeutic, curing, treating, mitigating and rehabilitative services, and maintenance or personal care services that are required by a chronically ill individual and are provided pursuant to a plan of care prescribed by a licensed health care practitioner.





LIVING BENEFITS

Terminal Illness

What qualifies?

Generally, if you have been diagnosed with a terminal illness that will result in death within 24 months of certification of the illness by a physician.

Receiving your benefit

The benefit payment will be a lump sum. There is no waiting period or annual benefit limit, but there is a lifetime limit on the amount of benefits you can receive across all Accelerated Benefits Riders.

Here if you need it

You can elect to either:

- Request the full acceleration, on a discounted basis, and use the lump-sum as you wish.
- Choose to leave a portion of the policy's death benefit intact and receive a partial benefit.
- Choose to leave the entire policy intact for your beneficiary.

Please refer to State Specific Information and other disclosures at the end of this brochure for exceptions and important information.

Chronic Illness

What qualifies?

A doctor has certified, within the past 12 months, that you are unable to perform two out of six “activities of daily living” for a period of at least 90 consecutive days without assistance, or that you are cognitively impaired.

Activities of Daily Living

1. Bathing
2. Continence
3. Dressing
4. Eating
5. Toileting
6. Transferring

Receiving your benefit

Generally, the rider needs to be in force for a period of two years. There is an annual limit on the amount of benefits you can receive. There is also a lifetime limit on the amount of benefits you can receive across all Accelerated Benefits Riders.

Here if you need it

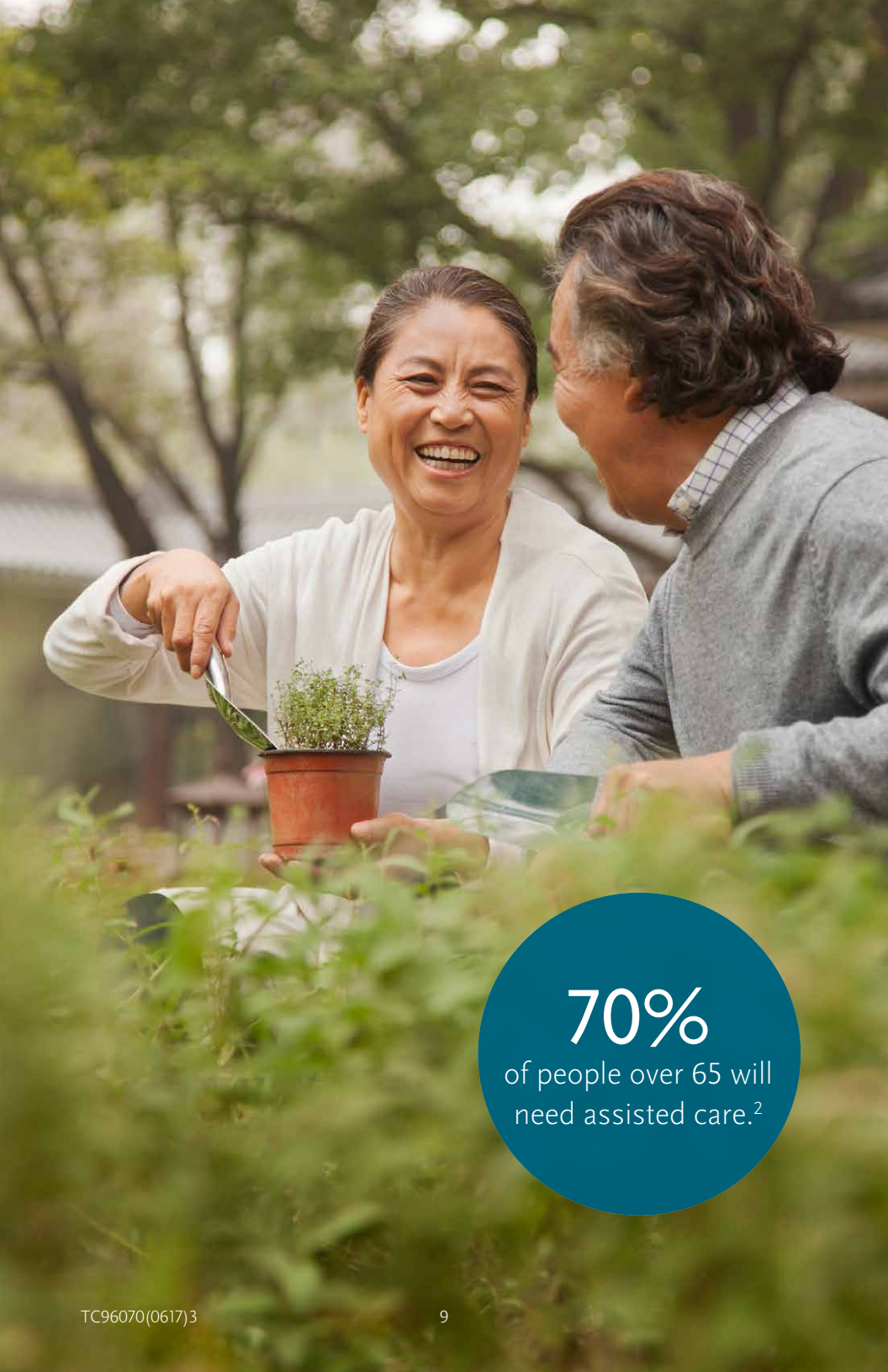
Note that you do not have to be in a licensed facility to receive payments, and that you can apply for benefits every 12 months. Benefits can be used for any reason (with 1 state exception), and do not need to be used for medical expenses.

If you should need it, and you qualify, after the waiting period you can:

- Accelerate portions of your death benefit every year to receive benefit payments.
- Leave the policy intact for your beneficiary.

2 Medicare, US Dept. of Health and Human Services, 2015

Please refer to State Specific Information and other disclosures at the end of this brochure for exceptions and important information.



70%
of people over 65 will
need assisted care.²



LIVING BENEFITS

Critical Illness or Critical Injury

What qualifies?

Critical Illness includes:

- ALS (Lou Gehrig's disease)
- Aorta Graft Surgery
- Aplastic Anemia
- Blindness
- Cancer
- Cystic Fibrosis
- End Stage Renal Failure
- Heart Attack
- Heart Valve Replacement

- Major Organ Transplant
- Motor Neuron Disease
- Stroke
- Sudden Cardiac Arrest

Critical Injury includes:

- Coma
- Paralysis
- Severe Burns
- Traumatic Brain Injury



The average
length of a hospital
stay is

4.6 days

Centers for Disease Control
and Prevention, 2015

Approximately
\$34 billion

is spent every year
treating strokes.

Centers for Disease Control
and Prevention, 2015

Receiving your benefit

The discounted benefit you receive for the critical illness or critical injury rider takes into consideration four different categories dependent on the severity of the illness:

- Minor
- Moderate
- Severe
- Life Threatening

The highest payout will result from the Life Threatening category.

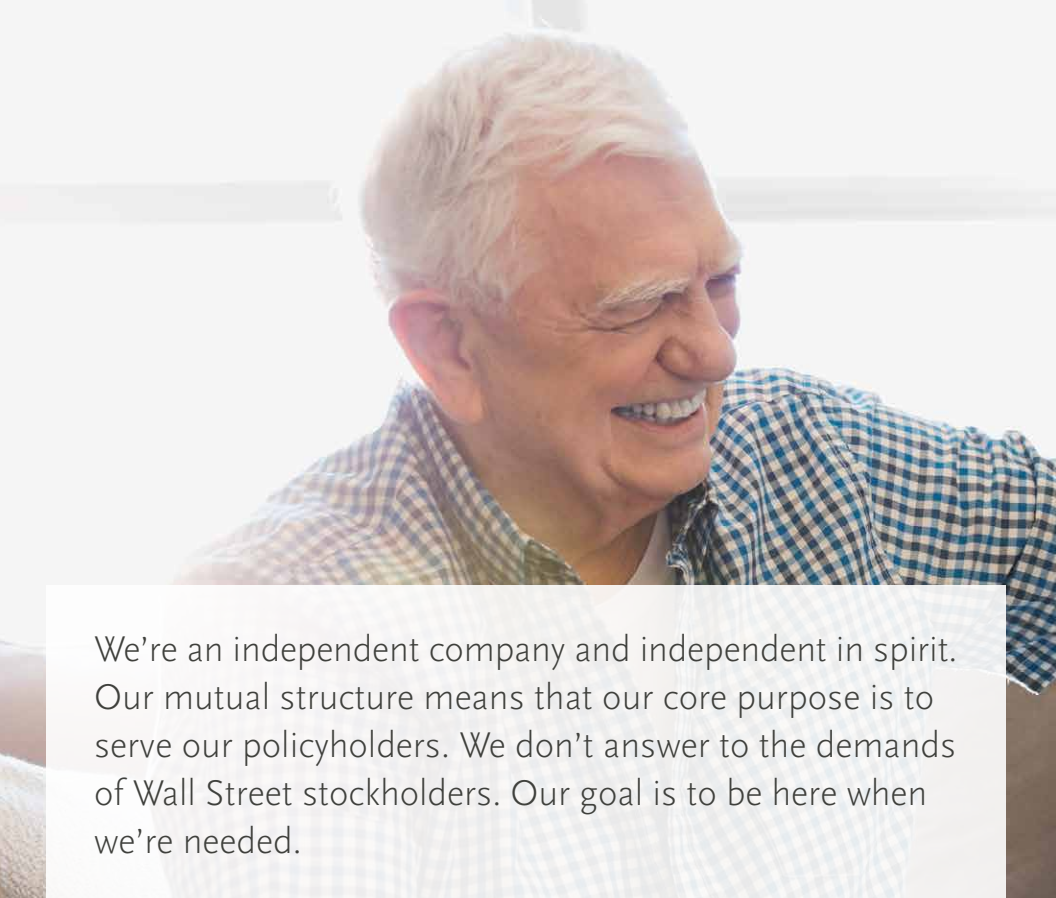
Generally, the rider needs to be in force for 30 days prior to diagnosis in order to accelerate. There is no annual limit, but there is a lifetime limit on the amount of benefits you can receive from all Accelerated Benefits Riders.

Here if you need it

You can elect to either:

- Request the full acceleration, on a discounted basis, and use the lump-sum as you wish.
- Choose to leave a portion of the policy's death benefit intact and receive a partial benefit.
- Choose to leave the entire policy intact for your beneficiary.

Please refer to State Specific Information and other disclosures at the end of this brochure for exceptions and important information.



We're an independent company and independent in spirit. Our mutual structure means that our core purpose is to serve our policyholders. We don't answer to the demands of Wall Street stockholders. Our goal is to be here when we're needed.

It's how we're built.



But it's not about us
– It's about you.

Caring, Planning and **Protecting**
what matters most.

**Figuring out life's puzzles
...we're here to help.**

State Specific Information

In some states, the definition of “terminally ill” may require a 12 month life expectancy instead of 24. Depending on what state you are in and what product you have, the waiting period may vary, the qualifiers may vary, or the Rider may not be available. Other state specific information may apply as well, so make sure to ask your agent.

Massachusetts: Chronic Accelerated Benefits may only be used for Qualified Long-Term Care services. Qualified Long-Term Care services: the necessary diagnostic, preventative, therapeutic, curing, treating, mitigating and rehabilitative services, and maintenance or personal care services that are required by a chronically ill individual and are provided pursuant to a plan of care prescribed by a licensed health care practitioner.

The Critical Illness ABR in the state of MA has some specific differences. There is no waiting period, but there is a two-year waiting period if a qualifying event directly results from self-inflicted injury or attempted suicide.

Qualifying conditions in MA:

1. Coronary artery disease resulting in acute myocardial infarction or requiring surgery.
2. End-stage renal disease.
3. Major organ transplant.
4. Permanent neurological deficit resulting from cerebral vascular accident.
5. Diagnosis of an invasive malignancy characterized by uncontrolled growth and spread of malignant cells and the invasion tissue. Cancer does not include:
 - Stage A prostate cancer.
 - Any skin cancer, except invasive malignant melanoma into the dermis or deeper.
 - Pre-malignant lesions, benign tumors or polyps.
 - Carcinoma in-situ.

The riders referenced in this brochure are available on:

LSW Income Builder Universal Life Insurance, form series 8796(0210)/8797(0210)/ICC10-8796(0210)/ICC10-8797(0210) and various other permanent and term life insurance policies issued and underwritten by Life Insurance Company of the Southwest.

Please note that for term life insurance, the ability to accelerate the death benefit will end when the life insurance policy is terminated.

Following are the form series numbers for the LSW Life Insurance Riders referenced in this brochure: Terminal Illness Rider (ABR), form series 8052, ICC10-8844; Chronic Illness Rider (ABR), form series 8095, 8766, ICC10-8844; Critical Illness Rider (ABR), form series 8165, 20287; Critical Injury Rider, form series 20288.

For costs and complete details of the coverage, write or call your agent or company. None of the information in this piece is intended as tax or legal advice. Please consult with your Attorney or Accountant prior to acting upon any of the information contained herein.

Riders are optional, may be subject to underwriting, exclusions and/or limitations and may not be available in all states or on all products. Receipt of accelerated benefits reduces the Death Benefit and cash value (if any) otherwise payable under the policy, may be a taxable event and may affect your eligibility for public assistance programs, such as medical assistance (Medicaid), Aid to Families with Dependent Children, and Supplemental Security Income. Please consult your personal tax advisor to determine the tax status of any benefits paid under this rider and with social service agencies concerning how receipt of such a payment will affect you, your spouse and your family's eligibility for public assistance. This rider is intended for favorable tax treatment under Section 101(g) of the Internal Revenue Code (26 U.S.C. Sec. 101(g)). Whether such benefits qualify depends on factors such as your life expectancy at the time benefits are accelerated and how benefits are used.

There is no restriction placed on the use of the accelerated benefit with the exception that ABR proceeds for chronic illness in the state of Massachusetts can only be used to pay for expenses incurred for Qualified Long-Term Care services. The actual payment you receive will be less than the portion of the death benefit accelerated because the benefits are paid prior to death. Values are based on a current interest rate and mortality rates. There is an initial administrative fee at the time the rider is exercised. We currently limit the amount of death benefit that may be accelerated under all contracts made over the entire lifetime of the insured to \$1,500,000 for terminal or chronic, and \$1,000,000 for critical. We reserve the right to change this limit in the future; however the limit will never be less than \$500,000. Other restrictions, limitations and waiting periods may apply.

Our Terminal Illness riders allow for the payment of a portion of an insured's death benefit, on a discounted basis, if the insured has an illness or chronic condition which can reasonably be expected to result in death in 24 months or less. There is no additional premium for this rider.

Our Chronic Illness and Covered Chronic Illness riders allow for the payment of a portion of an insured's death benefit, on a discounted basis, if the insured is Chronically Ill. A chronic illness is defined as one that leaves you unable to perform, without substantial assistance, two of the six normal activities of daily living for a period of at least 90 consecutive days due to a loss of functional capacity or requires substantial supervision to protect oneself (LSW only - for a period of 90 consecutive days) from threats to health and safety due to severe cognitive impairment. The six activities of daily living include bathing, continence, dressing, eating, toileting, and transferring. There is no additional premium for this rider.

Our Critical Illness Riders allows for the payment of a portion of an insured's death benefit, on a discounted basis, if the insured is Critically Ill. Covered critical illnesses are ALS (Lou Gehrig's disease), aorta graft surgery, aplastic anemia, blindness, cancer, cystic fibrosis, end stage renal failure, heart attack, heart valve replacement, major organ transplant, motor neuron disease, stroke, sudden cardiac arrest. Our Critical Injury Riders allow for the payment of a portion of an insured's death benefit, on a discounted basis, if the insured experiences one of the following critical injuries: coma, paralysis, severe burns or traumatic brain injury. Covered Critical illness in the state of MA includes: Coronary artery disease resulting in acute infarction vascular or requiring surgery; End-stage Renal Disease; Major organ transplant; Permanent neurological deficit resulting from cerebral vascular accident; Diagnosis of an invasive malignancy characterized by the uncontrolled growth and spread of malignant cells and the invasion of tissue. Cancer does not include: Stage A Prostate Cancer; Any skin cancer, except invasive malignant melanoma into the dermis or deeper; Pre-malignant lesions, benign tumors, or polyps; and Carcinoma in-situ. There is no additional premium for this rider.

Accelerated Benefits Riders (ABR) vs. Long-term Care (LTC) Insurance

Certain states require advertising for ABRs to provide a comparison to the benefits provided by LTC insurance. However, Accelerated Benefits provided by the ABR riders are not long-term care insurance, and are not intended to be the same as, or an alternative to, long-term care insurance.

This is a life insurance benefit that also gives you the option to accelerate some or all of the death benefit in the event that you meet the criteria for a qualifying event described in the policy. This policy or certificate does not provide long-term care insurance subject to California long-term care insurance law. This policy or certificate is not a California Partnership for Long-Term Care program policy. This policy or certificate is not a Medicare supplement (policy or certificate).

ABR Riders are supplemental benefits that can be added to a life insurance policy and are not suitable unless you also have a need for life insurance. Receipt of benefits may reduce or eliminate the availability of other policy riders and benefits. Benefits available are calculated at time of claim based on the age of the policy and our expectation of your future mortality. The amount of Accelerated Benefit available will depend on your life policy's death benefit value when ABR benefits are claimed. For policies in good standing, if ABR benefits are not used, policy death benefits and other rider benefits are still available.

Long-term care (LTC) insurance is not life insurance, and as such, has no death benefit or cash value. LTC insurance benefits are specified at the time of the contract. LTC benefits are paid as a form of expense reimbursement for qualified longterm care expenses. By comparison, since ABR benefits can be used for any reason, they are paid once qualifications are met, and do not require you to provide receipt of specific expenses to qualify for the benefit. LTC premiums vary based on the level and length of benefit chosen by the policyholder. Premiums are paid on a recurring basis, and failure to pay premiums will generally lapse the policy. If LTC benefits are not claimed, they are typically forfeited. LTC insurance policies may offer non-forfeiture benefits for additional premium.

This is a solicitation of insurance. An insurance agent may contact you.

No bank or credit union guarantee Not a deposit Not FDIC/NCUA insured May lose value
Not insured by any federal or state government agency

Guarantees are dependent upon the claims-paying ability of the issuing company.