

SERFF Tracking Number: EMCN-125711306 State: Arkansas
 Filing Company: EMC National Life Company State Tracking Number: 39508
 Company Tracking Number:
 TOI: L09I Individual Life - Flexible Premium Sub-TOI: L09I.001 Single Life
 Adjustable Life
 Product Name: Universal Life Policy
 Project Name/Number: /

Filing at a Glance

Company: EMC National Life Company

Product Name: Universal Life Policy

TOI: L09I Individual Life - Flexible Premium

Adjustable Life

Sub-TOI: L09I.001 Single Life

Filing Type: Form

SERFF Tr Num: EMCN-125711306 State: ArkansasLH

SERFF Status: Closed

State Tr Num: 39508

Co Tr Num:

State Status: Approved-Closed

Co Status:

Reviewer(s): Linda Bird

Author: Daryl Schoenfeld

Disposition Date: 07/08/2008

Date Submitted: 07/02/2008

Disposition Status: Approved

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile: Authorized

Project Number:

Date Approved in Domicile: 06/25/2008

Requested Filing Mode: Review & Approval

Domicile Status Comments: Filed and approved.

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 07/08/2008

State Status Changed: 07/08/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Attached for your review and approval is our new Universal Life Policy ELP003 (7-08), et al. This is a new policy that will replace our 1980 CSO based UL policy forms. It was approved by the Iowa Insurance Division June 25, 2008.

The policy and riders will be offered by our licensed representatives to individual applicants and to individual applicants in the non-group worksite market. It will be an illustrated policy. This filing does not contain any possibly controversial

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items that may deviate from normal company or industry standards.

Please inform us of your approval. Thank you.

Company and Contact

Filing Contact Information

Daryl Schoenfeld, Assistant Secretary
 4095 NW Urbandale Drive
 Urbandale, IA 50322-7914

Dschoenfeld@emcni.com
 (515) 345-4094 [Phone]

Filing Company Information

EMC National Life Company
 4095 NW Urbandale Drive
 Urbandale, IA 50322-7914
 (515) 645-4000 ext. 4094[Phone]

CoCode: 62928
 Group Code:
 Group Name:
 FEIN Number: 42-0868851

State of Domicile: Iowa
 Company Type: L and Health
 State ID Number:

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? No
 Fee Explanation:
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
EMC National Life Company	\$50.00	07/02/2008	21217977

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Linda Bird	07/08/2008	07/08/2008

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Linda Bird	07/08/2008	07/08/2008	Daryl Schoenfeld	07/08/2008	07/08/2008

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice		Yes
Supporting Document	Application		No
Supporting Document	Health - Actuarial Justification		No
Supporting Document	Outline of Coverage		No
Supporting Document	Actuarial Memorandum		No
Supporting Document	Illustration Certification		Yes
Supporting Document	Certificate of Compliance		Yes
Form	Universal Life Policy		Yes
Form	Additional Insured Benefit Rider		Yes
Form	Term Insurance Rider for Children		Yes
Form	Accidental Death Benefit Rider		Yes

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Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 07/08/2008
Submitted Date 07/08/2008

Respond By Date

Dear Daryl Schoenfeld,

This will acknowledge receipt of the captioned filing.

Objection 1

- Certification/Notice (Supporting Document)

Comment: Filings of "universal life" type contracts are subject to Regulation 34. Please assure us that you are in compliance with Regulation 34. If cost of insurance may be changed by the company subject to a maximum and/or accumulation rates may be changed by the company subject to a minimum, then the contract must comply with Bulletin 11-83.

Please feel free to contact me if you have questions.

Sincerely,

Linda Bird

Response Letter

Response Letter Status Submitted to State
Response Letter Date 07/08/2008
Submitted Date 07/08/2008

Dear Linda Bird,

Comments:

Response 1

Comments: Here is a certificate for compliance with Regulation 34 and Bulletin 11-83.

Related Objection 1

Applies To:

- Certification/Notice (Supporting Document)

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Comment:

Filings of "universal life" type contracts are subject to Regulation 34. Please assure us that you are in compliance with Regulation 34. If cost of insurance may be changed by the company subject to a maximum and/or accumulation rates may be changed by the company subject to a minimum, then the contract must comply with Bulletin 11-83.

Changed Items:

Supporting Document Schedule Item Changes

Satisfied -Name: Certificate of Compliance

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Sincerely,
Daryl Schoenfeld

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Form Schedule

Lead Form Number: ELP003 (7-08)

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	ELP003 (7-08)	Policy/Cont	Universal Life Policy ract/Fratern al Certificate	Initial		52	ELP003(7-08).pdf
	ELR004 (7-08)	Certificate	Additional Insured Amendmen t, Insert Page, Endorseme nt or Rider	Initial		52	ELR004(7-08).pdf
	ELR005 (7-08)	Certificate	Term Insurance Amendmen t, Insert Page, Endorseme nt or Rider	Initial		52	ELR005(7-08).pdf
	ELR006 (7-08)	Certificate	Accidental Death Amendmen t, Insert Page, Endorseme nt or Rider	Initial		52	ELR006(7-08).pdf



EMC[®] National Life Company

P.O. Box 9202 ■ Des Moines, IA 50306-9202 ■ 1.800.232.5818 ■ www.EMCNationalLife.com

INSURED	JOHN DOE	July 01, 2008	DATE OF ISSUE
POLICY NUMBER	SAMPLE	\$50,000	SPECIFIED AMOUNT

EMC National Life Company (called “the Company”) will pay the beneficiary the death proceeds upon receipt of due proof of the insured’s death. This promise is made in consideration of the payment of premiums and is subject to the provisions of this policy.

The Company will also provide the other rights and benefits in accordance with the terms of this policy.

THIRTY DAY RIGHT TO EXAMINE POLICY

RIGHT TO CANCEL. At any time within 30 days after receipt of the policy by the owner, this policy may be returned by the owner for cancellation by delivering it or mailing it to the Company or an authorized agent of the Company. Such delivery or mailing of the policy by the owner will void the policy from the date of issue. The parties will be in the same position as if no policy or contract had been issued. Any premium paid for the policy will be refunded to the owner.

READ YOUR POLICY CAREFULLY. This policy is a legal contract between the owner and the Company.

Signed for EMC National Life Company, Urbandale, Iowa, on the date of issue.



Alan Hausinger
President



Jennifer L. Mercer-Stimowski
Secretary

UNIVERSAL LIFE POLICY

Flexible Premium Adjustable Life Insurance Policy • Death Proceeds Payable at Death
• Flexible Premiums During the Lifetime of the Insured • Non-Participating.

ALPHABETIC GUIDE TO YOUR CONTRACT

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EMC NATIONAL LIFE COMPANY

POLICY SPECIFICATIONS

INSURED: JOHN DOE
DATE OF ISSUE: JULY 01, 2008 POLICY NUMBER: SAMPLE
SEX OF INSURED: MALE SPECIFIED AMOUNT: \$50,000
AGE OF INSURED: 35 DEATH BENEFIT OPTION: 1
(LEVEL DEATH BENEFIT)
PREMIUM INTERVAL: ANNUAL PLANNED PERIODIC PREMIUM: \$457.00
MINIMUM ANNUAL
PREMIUM: \$217.00

THE MINIMUM SPECIFIED AMOUNT IS \$10,000
MONTHLY POLICY FEE: \$5.00
ANNUAL EXPENSE CHARGE PER \$1,000 OF INITIAL SPECIFIED AMOUNT
DURING THE FIRST THIRTY POLICY YEARS: \$ 0.8400
MONTHLY CHARGE IS THE ABOVE RATE DIVIDED BY 12.
PERCENT OF PREMIUM EXPENSE CHARGE ON PREMIUMS PAID: 6% ALL YEARS

SCHEDULE OF BENEFITS AND RIDERS

POLICY BENEFITS	AMOUNT	EFFECTIVE DATE	RATE CLASS	EXPIRY
BASIC POLICY	\$50,000	JULY 01, 2008	N	DEATH

NOTE: IT IS POSSIBLE THAT COVERAGE WILL EXPIRE PRIOR TO THE DEATH OF THE INSURED WHERE SUBSEQUENT PREMIUMS ARE INSUFFICIENT TO CONTINUE COVERAGE.

**TABLE OF GUARANTEED MAXIMUM MONTHLY INSURANCE
RATES PER \$1000 FOR STANDARD RATE CLASS**

(FOR SUBSTANDARD CLASSES TAKE RATING ON PAGE 3 TIMES THE RATES LISTED BELOW.)

Age	Male Nontobacco	Male Tobacco	Female Nontobacco	Female Tobacco	Age	Male Nontobacco	Male Tobacco	Female Nontobacco	Female Tobacco
0	0.06002		0.03501		61	0.88254	1.59389	0.70068	1.31958
1	0.03834		0.02584		62	0.99136	1.77191	0.75957	1.42562
2	0.02750		0.01917		63	1.11047	1.96316	0.82187	1.53436
3	0.02000		0.01667		64	1.23485	2.15488	0.89013	1.65176
4	0.01750		0.01583		65	1.36453	2.34279	0.96604	1.77873
5	0.01750		0.01500		66	1.49611	2.52513	1.04878	1.91701
6	0.01834		0.01583		67	1.63389	2.70963	1.14092	2.07094
7	0.01834		0.01750		68	1.77958	2.89889	1.24332	2.23977
8	0.01834		0.01750		69	1.94350	3.10771	1.35520	2.42616
9	0.01917		0.01750		70	2.13517	3.34755	1.48167	2.63715
10	0.02000		0.01834		71	2.36857	3.64316	1.62623	2.87380
11	0.02334		0.02084		72	2.64233	3.98816	1.78470	3.13201
12	0.02834		0.02250		73	2.93178	4.33735	1.95803	3.41459
13	0.03334		0.02584		74	3.24405	4.71735	2.15060	3.71134
14	0.04335		0.02834		75	3.58552	5.14198	2.36255	4.02415
15	0.05502		0.03001		76	3.97236	5.61555	2.59577	4.36380
16	0.06419		0.03251		77	4.42467	6.16691	2.85478	4.73153
17	0.07253		0.03417		78	4.95336	6.80411	3.13808	5.13040
18	0.07670	0.09506	0.03584	0.04251	79	5.55015	7.51177	3.45032	5.56179
19	0.07837	0.10257	0.03751	0.04668	80	6.22109	8.29273	3.83999	6.10285
20	0.07921	0.10841	0.03751	0.04918	81	6.95716	9.13132	4.32148	6.76953
21	0.07921	0.11342	0.03918	0.05252	82	7.74449	10.00372	4.83438	7.46219
22	0.07921	0.11926	0.04001	0.05502	83	8.61347	10.94457	5.37661	8.17591
23	0.08004	0.12510	0.04001	0.05752	84	9.59129	12.02241	5.98569	8.92620
24	0.08088	0.13178	0.04168	0.06086	85	10.69345	13.26261	6.60777	9.62620
25	0.08338	0.13929	0.04251	0.06586	86	11.92416	14.63048	7.34937	10.44315
26	0.08672	0.14681	0.04585	0.07003	87	13.27646	16.11092	8.27510	11.46858
27	0.08838	0.15098	0.04751	0.07420	88	14.74027	17.68481	9.26367	12.50868
28	0.08672	0.15182	0.05002	0.07921	89	16.30607	19.33695	10.26023	13.47256
29	0.08588	0.15098	0.05252	0.08421	90	17.89757	20.96678	11.00219	14.02590
30	0.08505	0.15015	0.05502	0.08922	91	19.49638	22.54981	11.71833	14.48266
31	0.08421	0.15098	0.05836	0.09589	92	21.20724	24.20857	12.92017	15.47853
32	0.08505	0.15349	0.06169	0.10257	93	23.05252	25.96113	14.57917	16.90997
33	0.08755	0.15850	0.06586	0.11091	94	25.04434	27.87491	16.69575	18.94988
34	0.08922	0.16434	0.07087	0.12176	95	27.06773	29.84960	19.06591	21.42649
35	0.09339	0.17102	0.07670	0.13261	96	29.09469	31.77084	21.47261	23.86020
36	0.09756	0.18105	0.08254	0.14347	97	31.31290	33.84758	23.07494	25.34029
37	0.10340	0.19274	0.08755	0.15265	98	33.74873	36.10016	23.95877	25.94136
38	0.11091	0.20694	0.09172	0.16184	99	36.43252	38.54896	25.82519	27.58357
39	0.11759	0.22282	0.09673	0.17186					
40	0.12677	0.24205	0.10257	0.18272	100	39.08352	40.90943	28.31934	29.86060
41	0.13762	0.26546	0.10924	0.19525	101	41.51094	42.98363	31.12152	32.39777
42	0.15098	0.29306	0.11676	0.21112	102	44.17630	45.22388	34.32817	35.24975
43	0.16685	0.32569	0.12594	0.22867	103	47.11034	47.64578	37.98547	38.43866
44	0.18439	0.36252	0.13679	0.24957	104	50.33183	50.49926	42.17259	42.28387
45	0.20360	0.39937	0.14931	0.27382	105	53.86989	54.03324	46.84849	46.95888
46	0.22282	0.43623	0.16434	0.30226	106	57.80265	57.96198	51.93333	52.04123
47	0.23870	0.46725	0.18188	0.33741	107	62.19404	62.35122	57.45219	57.56079
48	0.25124	0.49073	0.20110	0.37927	108	67.12722	67.27862	63.47854	63.58619
49	0.26713	0.52093	0.22282	0.42618	109	72.70105	72.85059	70.20951	70.31629
50	0.28804	0.56037	0.24706	0.47647	110	79.04542	79.19118	77.55774	77.66344
51	0.31481	0.61159	0.27466	0.53183	111	86.34199	86.48395	85.31627	85.42263
52	0.34745	0.67377	0.30561	0.59143	112	94.82807	94.96889	93.46722	93.57113
53	0.38513	0.74863	0.33824	0.65612	113	104.84870	104.98283	102.75161	102.85272
54	0.43288	0.83788	0.37257	0.72507	114	116.90202	117.03541	115.99484	116.09555
55	0.48654	0.93314	0.41193	0.79829	115	131.78802	131.92145	130.83910	130.94219
56	0.54190	1.03189	0.45467	0.87664	116	150.85896	150.99367	149.61993	149.71699
57	0.59563	1.12316	0.49995	0.95591	117	176.72718	176.85861	175.19879	175.29399
58	0.64940	1.21030	0.54694	1.03864	118	215.44528	215.57171	208.13729	208.23469
59	0.71246	1.31280	0.59479	1.12738	119	287.20762	287.36310	262.57774	262.66411
60	0.78903	1.43921	0.64520	1.21961	120	400.00000	400.00000	400.00000	400.00000

POLICY SPECIFICATIONS

CONTINUED

The cash value is equal to the fund value less the following surrender charge:

POLICY YEAR	SURRENDER CHARGE
1	\$921.50
2	\$921.50
3	\$921.50
4	\$921.50
5	\$921.50
6	\$737.00
7	\$552.50
8	\$368.00
9	\$183.50

Surrender charges in policy years ten and after are zero. The cash value is never less than zero.

Surrender charges for any increase made in the specified amount will be shown in a new page 3B.

FOR INSURED JOHN DOE
EFFECTIVE DATE OF SCHEDULE 07/01/08

POLICY SAMPLE

I. POLICY PROVISIONS

A. VALUES DURING THE LIFETIME OF THE INSURED

This policy has a cash value. The owner can use these values:

1. To provide retirement income (see Benefit Payment Options on page 11);
2. As collateral for a loan or as the basis for a policy loan to the extent provided in this policy (see Loan Value on page 10);
3. To keep some insurance protection in force, even if premium payments cease (see Continuation of Insurance on page 10); or
4. To obtain cash by surrender of the policy (see Surrender Value on page 9).

B. DEATH PROCEEDS

The death proceeds are payable to the beneficiary at the death of the insured.

The death proceeds are equal to

1. The death benefit as defined below; plus
2. Any premiums paid following the monthly deduction date immediately preceding the date of death of the insured; less
3. Any policy loan and loan interest to the date of death.

The death benefit is either

Death Benefit Option 1. The fund value is included in the specified amount. The death benefit will be the greater of

1. The specified amount on the date of death, or
2. The fund value on the date of death times the following factor.

ATTAINED AGE AT DATE OF DEATH							
	FACTOR		FACTOR		FACTOR		FACTOR
0-40	2.50	54	1.57	68	1.17	82	1.05
41	2.43	55	1.50	69	1.16	83	1.05
42	2.36	56	1.46	70	1.15	84	1.05
43	2.29	57	1.42	71	1.13	85	1.05
44	2.22	58	1.38	72	1.11	86	1.05
45	2.15	59	1.34	73	1.09	87	1.05
46	2.09	60	1.30	74	1.07	88	1.05
47	2.03	61	1.28	75	1.05	89	1.05
48	1.97	62	1.26	76	1.05	90	1.05
49	1.91	63	1.24	77	1.05	91	1.04
50	1.85	64	1.22	78	1.05	92	1.03
51	1.78	65	1.20	79	1.05	93	1.02
52	1.71	66	1.19	80	1.05	94	1.01
53	1.64	67	1.18	81	1.05	95+	1.00

Death Benefit Option 2. The fund value is not included in the specified amount. The death benefit will be the greater of

1. The fund value on the date of death, plus the specified amount on the date of death, or
2. The fund value on the date of death times the factor in the above table.

The attained age at date of death in the above table is the insured's age last birthday at the beginning of the policy year of death.

The death benefit option and specified amount are shown on page 3 of the policy.

The Company will pay interest on lump sum death proceeds from the insured's death until the date the proceeds are paid. Interest will be at the rate then being paid on benefit payment option 5, but never less than that required by state law.

C. ANNUAL REPORT

At least once each year, the Company will send a report to the owner showing

- (a) All premiums paid and charges made since the last report;
- (b) The current fund value and cash value;
- (c) Any partial withdrawals since the last report; and
- (d) Any policy loan.

II. GENERAL PROVISIONS

A. THE CONTRACT

This policy and attached application make up the entire contract. Any statements made in the application will be considered representations and not warranties, except in the case of fraud. No statement, unless made in the application, will be used to void this policy or to defend against a claim.

B. MISSTATEMENT OF AGE OR SEX

If the age or sex of the insured has been misstated, the benefits under this policy will be adjusted. The benefits under this policy will be those that would have been purchased by the most recent cost of insurance rate, using the correct age and sex.

C. INCONTESTABILITY

The Company may not claim this policy is void or deny payment of the death proceeds after the policy has been in force during the insured's lifetime for two years from the date of issue except due to failure to pay premiums.

If this policy is reinstated, the statements in the application for reinstatement will be incontestable after the policy has been in force during the insured's lifetime for two years from the effective date of the reinstatement. Any contest of the reinstatement of this policy will be based on the application for reinstatement.

Any increase in the specified amount will be incontestable only after such increases have been in force during the lifetime of the insured for two years from the effective date of such increase.

D. SUICIDE

This policy's death proceeds will not be paid if the insured dies by suicide, while sane or insane, within two years of the date of issue (or within one year of the date of issue in Colorado, Missouri or North Dakota). Instead, the Company will return all premiums paid, less any partial surrenders paid and any policy loan and loan interest.

Any increase in death proceeds resulting from an increase in specified amount will not be paid if the insured dies by suicide, while sane or insane, within two years of the effective date of such increase (or within one year of the date of increase in Colorado, Missouri or North Dakota). Instead, the Company will return an amount equal to the cost of insurance for such increase in specified amount.

E. ALTERATIONS

Only the President, a Senior Vice-President, the Secretary, a Vice-President, an Assistant Vice-President, or an Assistant Secretary of the Company has the power to change or waive any provision of this policy on behalf of the Company. Any changes or waivers must be in writing.

F. DOCUMENTATION

All elections, changes, and requests must be made in a form satisfactory to the Company. The Company shall not be liable for any action taken before an election, change, or request is received at the home office. The Company reserves the right to require return of the policy for

1. Surrender;
2. Payment of benefits; or
3. Endorsement of a change requested by the owner.

III. PREMIUMS

A. PAYMENT OF PREMIUMS

This policy is effective and the first premium is due on the date of issue. Planned periodic premiums are shown on page 3 of the policy. Planned periodic premiums are premiums the owner intends to pay on a regular basis.

After the first premium has been paid, subsequent premiums can be paid at any time. If the owner chooses to be billed directly in order to make premium payments, the owner is subject to Company billing rules and can make changes in billing frequency and amount by writing to the Company at its home office.

Premiums should be sent to the Company at its home office. The person paying the premium will be given a receipt on request.

B. NO-LAPSE PROVISION

This provision applies during the first ten policy years. During this period, this policy will not enter the grace period on a monthly deduction day if the monthly premium requirement has been met. The monthly premium requirement is met on any monthly deduction day if the sum of the premiums paid since the date of issue, less any partial surrenders, less the current loan balance, if any, equals or exceeds one-twelfth (1/12) of the minimum annual premium multiplied by the number of months elapsed since the issue date of the policy.

A requested change in benefits provided by the policy may necessitate a recalculation of the applicable required minimum annual premium for a no-lapse provision as determined by the Company.

C. PREMIUM LIMITATIONS

We reserve the right to refuse to accept any premium which would disqualify your policy for favorable tax treatment under any applicable section of the Internal Revenue Code. If premiums paid during any policy year exceed the maximum permitted under the Code, we will return the excess premiums with interest to you within 60 days after the end of the policy year. We will not return any premiums required to keep this policy in force to the end of the policy year.

D. GRACE PERIOD

A grace period of 61 days will be provided under this policy. Except as provided in the no-lapse provision above, this policy will enter the grace period when the surrender value on the monthly deduction day is not sufficient to cover the monthly deduction described in the Fund Value and Fund Value Benefit section. Notice of the amount to keep the policy in force will be mailed to the last known address of the owner and any assignee of record. If such amount is not paid within the grace period, all coverage under this policy will terminate without value at the end of the 61 day period. However, in no event will such termination be effective until 31 days after such notice has been mailed. If a death occurs during the grace period, any overdue monthly deductions will be deducted from the proceeds.

E. REINSTATEMENT

The owner may reinstate this policy within five years of termination in a rate class as determined by the Company at the time of reinstatement provided:

1. It has not been surrendered for its surrender value;
2. Evidence is presented which satisfies the Company that the insured is insurable under the Company's rules then in effect;
3. A minimum premium sufficient to keep the policy in force for three months from the date of reinstatement is paid; and
4. Continuation of the charge as outlined in the Monthly Deduction section if a total of 360 charges were not made prior to reinstatement.

F. TERMINATION

All coverage under this policy will terminate when any one of the following events occurs:

1. The owner surrenders this policy for its surrender value;
2. The insured dies; or
3. The grace period ends.

IV. FUND VALUE AND FUND VALUE BENEFIT

A. NET PREMIUM

Net premium is the premium paid, less the percent of premium expense.

B. PERCENT OF PREMIUM EXPENSE

The percent of premium expense is shown on page 3.

C. MONTHLY DEDUCTION DAY

The date of issue is the effective date of the initial specified amount under this policy. Policy days, months and years are determined from the date of issue.

The monthly deduction day means the day of any calendar month which coincides with the date of issue.

D. FUND VALUE

The fund value on the date of issue will be the initial net premium for this policy, less the monthly deduction for the month following the date of issue.

The fund value on a monthly deduction day will be calculated as (a) plus (b) plus (c) minus (d) minus (e) where

- (a) Is the fund value on the preceding monthly deduction day;
- (b) Is one month's interest on item (a);
- (c) Is the net premiums received since the preceding monthly deduction day. Interest will be credited from the day such premiums are received at the Company until the current monthly deduction day;
- (d) Is the monthly deduction for the month following the monthly deduction day;
- (e) Is partial surrenders.

E. MONTHLY DEDUCTION

The monthly deduction for a policy month will be calculated as (a) plus (b) plus (c) where

- (a) Is the cost of insurance plus the cost of additional benefits provided by rider for the policy month;
- (b) Is a monthly policy fee;
- (c) Is a monthly expense charge per \$1,000.00 shown on page 3, multiplied by the specified amount divided by 1000. If the first 360 months is interrupted by a lapse that is later reinstated, no matter when, the charge will continue until a total of 360 such charges have been made.

F. COST OF INSURANCE

1. The cost of insurance for the policy is calculated as (a) multiplied by the result of (b) minus (c) where
 - (a) Is the cost of insurance rate as described in the cost of insurance rate section;
 - (b) Is the insured's death benefit divided by 1.0024663. If the death benefit is option 1, then the fund value will be first considered a part of the initial specified amount. If the fund value exceeds the initial specified amount, it will then be considered a part of additional specified amount resulting from increases in the order of the increases; and
 - (c) Is the fund value prior to the cost of insurance deductions.
2. The cost of insurance for any rider is calculated as shown in the rider.

G. COST OF INSURANCE RATE

1. The cost of insurance rate for the policy is based on the insured's issue age, policy duration, sex and rate class.
2. The monthly guaranteed cost of insurance rates shown on page 3A are based on the 2001 Commissioners' Standard Ordinary (CSO) Age Last Birthday (ALB) Ultimate Mortality Tables, sex and smoker distinct.
3. Monthly cost of insurance rates will be determined by the Company based on its expectation as to future mortality experience. The monthly cost of insurance rates will not be greater than those shown on page 3A. Any change in cost of insurance rates will apply to all individuals of the same class as the insured.
4. The monthly cost of insurance rate for any rider is shown in the rider.

H. INTEREST RATE

The guaranteed interest rate applied in the calculation of fund values is .24663 percent per month, compounded monthly. This is equivalent to 3 percent per year compounded yearly. Interest in excess of the guaranteed rate may be applied in the calculation of fund values at such increased rates and in such manner as the Company may determine.

I. SURRENDER VALUE

This policy may be surrendered on any monthly deduction day during the lifetime of the insured upon written request by the owner for the surrender value.

The surrender value is the cash value less any policy loan and loan interest. The cash value of this policy is the fund value less the surrender charge shown on page 3B. This cash value does not include the cash value of any riders.

The Company will pay the surrender value in cash or apply part or all of it under a benefit payment option. If this policy is surrendered, all insurance in force under this policy will terminate. The cash value within 30 days after the end of the policy year will not be less than the value at the end of the year.

On any day other than a monthly deduction day, the cash value will be determined by the Company with due allowance for the time elapsed and premiums received.

The owner may partially surrender this policy after this policy has been in force for one year. No more than one partial surrender may be made in any policy year. The minimum partial surrender allowed is \$500.00. The partial surrender may not exceed the surrender value (less \$500.00). A \$25.00 fee will be charged against each partial surrender. The specified amount will be reduced by the amount of the partial surrender if death benefit option 1 is in effect. The specified amount remaining in force after a partial surrender may not be less than the minimum specified amount permitted under this policy and shown on page 3.

J. CONTINUATION OF INSURANCE

The insurance under this policy will continue until the end of the grace period for the monthly deduction day on which the surrender value will not cover the monthly deduction for the following month. This provision will not continue any rider beyond its termination date as specified in the rider.

K. DEFERMENT

The Company may delay payment of the surrender value or any partial surrender except for a surrender to pay premiums for up to six months from the date surrender is requested.

L. COMPUTATION OF VALUES

The minimum basis of all calculations of present values, single premiums, reserves, and cash values is the 2001 Commissioners' Standard Ordinary (CSO) Age Last Birthday (ALB) Ultimate Mortality Tables, sex and smoker distinct, with interest at 3% per year. The reserves are always equal to or greater than the cash value.

A detailed statement of the method of calculating policy values has been filed with the proper insurance official of the state in which this policy is delivered. Policy values shall not be less than the values required by the statute of the state in which this policy is delivered.

V. POLICY LOANS

A. TERMS OF LOAN

The Company will loan on the sole security of this policy an amount not exceeding the loan value. The owner may obtain a policy loan with this policy as the sole security.

The interest rate on policy loans will be 7.4% annually, payable in advance. Any interest not paid when due will be added to the loan principal and will bear interest at the same rate. Interest will be charged from the date of the loan to the date payment is received by the Company.

The Company may delay making a policy loan, except for a loan to pay premiums, for up to six months after the date the loan is requested.

B. LOAN VALUE

The loan value of this policy will not exceed the cash value of this policy on the preceding monthly deduction day less monthly deductions to the next premium due date. From this loan value the Company will deduct

1. Interest in advance to the end of the policy year, and
2. Any existing loan.

C. TERMINATION OF POLICY

If at any time the policy loan and loan interest equal or exceed the loan value, the amount of the loan in excess of the loan value must be paid in addition to the required premium for the no-lapse provision. If such amount is not paid, this policy will terminate without further value. However, in no event will such termination be effective until 31 days after a notice has been mailed to the last known address of the owner and any assignee of record.

D. REPAYMENT

A policy loan may be repaid in full or in part at the home office while this policy is in force prior to the death of the insured. Any amounts paid to the Company in repayment of the loan are not subject to expense charges. Amounts received by the Company will be applied as premium payments unless the Company is specifically instructed to apply such amounts as repayment of the loan. A partial repayment may not be less than \$20.00.

VI. POLICY CHANGE PROVISIONS

At any time after the first policy year, the specified amount may be changed upon the owner's written request, subject to the following conditions:

1. All requests for an increase in insurance, if allowed by the Company, must be applied for on a supplemental application and shall be subject to evidence of insurability satisfactory to the Company.
2. Surrender charges for any increase in specified amount will be shown on a new page 3B.
3. Any decrease will become effective on the monthly deduction day coinciding with or next following receipt of the request by the Company. Any such decrease shall reduce insurance in the following order:
 - (a) First against insurance with the most recent effective date;
 - (b) Against the next most recent increases successively; and
 - (c) Last against the initial specified amount.

The total specified amount remaining in force after any requested decrease must be at least as great as the minimum specified amount shown on page 3.

4. If the death benefit option is option 1, the owner may request in writing that the death benefit option be changed to option 2. In this event, the specified amount will be reduced to equal the death benefit less the fund value as of the effective date of change. Such effective date will be the monthly deduction day that coincides with or next follows the day the Company receives the request for change.
5. If the death benefit option is option 2, the owner may request in writing that the death benefit option be changed to option 1. In this event, the specified amount itself is not changed but the death benefit is decreased as of the effective date of the change. Such effective date will be the monthly deduction day that coincides with or next follows the day the Company receives the request for change.

Any time a policy change occurs, the owner will receive a new page 3 showing the change in coverage, and any expense charges related to the change which occurred and the effective date of such change.

VII. BENEFIT PAYMENT OPTIONS

A. PAYMENT

Any amount payable at the death of the insured or upon surrender of this policy will be paid in one lump sum unless otherwise provided. All or part of this sum may be applied under any benefit payment option.

B. ELECTION OF BENEFIT PAYMENT OPTION

1. BY OWNER -
During the lifetime of the insured, the owner may elect any benefit payment option. The owner may change any election unless the right to change the manner of payment has been given up.
2. BY BENEFICIARY -
At the time proceeds are payable, a beneficiary may elect or change any benefit payment option if
 - (a) The proceeds are available to the beneficiary in one sum; or
 - (b) The right to change has been provided by a previous policy owner.

C. BENEFIT PAYMENT OPTIONS

1. INCOME FOR A SELECTED PERIOD - The Company will make payments for a selected period not exceeding 30 years. Interest at a rate set by the Company, but never less than 2½% a year, will be applied to determine the amount of the payment. Unless the election provides otherwise, the commuted value may be withdrawn. The interest rate used to commute the remaining payments will be the same as that used to determine the amount of the payment. The following table shows minimum payments per \$1,000 of proceeds.

TABLE FOR OPTION 1					
No. of Years	Annually	Monthly	No. of Years	Annually	Monthly
1	\$1000.00	\$84.28	16	\$74.73	\$6.30
2	506.17	42.66	17	71.15	6.00
3	341.60	28.79	18	67.97	5.73
4	259.33	21.86	19	65.13	5.49
5	210.00	17.70	20	62.58	5.27
6	177.12	14.93	21	60.28	5.08
7	153.65	12.95	22	58.19	4.90
8	136.07	11.47	23	56.29	4.74
9	122.40	10.32	24	54.55	4.60
10	111.47	9.39	25	52.95	4.46
11	102.54	8.64	26	51.48	4.34
12	95.11	8.02	27	50.12	4.22
13	88.83	7.49	28	48.87	4.12
14	83.45	7.03	29	47.70	4.02
15	78.80	6.64	30	46.61	3.93

2. INCOME FOR A SELECTED AMOUNT - The Company will pay a selected amount until the proceeds are exhausted. Interest at a rate set by the Company, but never less than 2½% a year, will be applied. The balance may be withdrawn at any time, unless the election provides otherwise.

3. LIFE INCOME - The Company will make payments during a person's lifetime. A minimum guaranteed period of 5, 10, 15 or 20 years may be used. No withdrawal of proceeds is permitted during the life of the annuitant. Payments will be in an amount determined by the Company, but not less than the amount shown in the following table. Minimum payments for ages not shown in the table will be furnished on request.

TABLE FOR OPTION 3					
Minimum Monthly Payment Per \$1,000 of Proceeds					
Age Nearest Birthday					
Age		Number of Years Guaranteed			
Male	Female	5 Years	10 Years	15 Years	20 Years
55	60	\$5.03	\$4.90	\$4.69	\$4.41
56	61	5.15	5.01	4.77	4.47
57	62	5.28	5.12	4.86	4.53
58	63	5.42	5.23	4.94	4.59
59	64	5.56	5.35	5.03	4.64
60	65	5.72	5.48	5.12	4.70
61	66	5.87	5.61	5.21	4.75
62	67	6.04	5.74	5.30	4.80
63	68	6.22	5.87	5.39	4.85
64	69	6.40	6.01	5.48	4.90
65	70	6.59	6.16	5.56	4.94
66	71	6.79	6.30	5.65	4.98
67	72	7.00	6.45	5.73	5.02
68	73	7.23	6.60	5.82	5.05
69	74	7.46	6.76	5.90	5.09
70	75	7.70	6.91	5.97	5.12
71	76	7.95	7.07	6.05	5.14
72	77	8.22	7.23	6.12	5.17
73	78	8.50	7.38	6.18	5.19
74	79	8.78	7.54	6.24	5.20
75	80	9.08	7.69	6.30	5.22

4. **JOINT AND SURVIVOR LIFE INCOME** - The Company will make payments during the lifetime of two persons, with the same payments continuing until the death of the survivor. This option includes a minimum guaranteed period of 10 years. No withdrawal of proceeds is permitted during the life of either annuitant. Payments will be in an amount determined by the Company, but not less than the amount shown in the following table. Minimum payments for ages not shown in the table will be furnished on request.

TABLE FOR OPTION 4						
Minimum Monthly Payments Per \$1,000 of Proceeds						
Age Nearest Birthday						
Male						
Age		50	55	60	65	70
Female						
	Age	55	60	65	70	75
40	45	\$3.41	\$3.49	\$3.56	\$3.61	\$3.64
45	50	3.58	3.70	3.79	3.87	3.93
50	55	3.75	3.91	4.05	4.17	4.26
51	56	3.78	3.95	4.11	4.23	4.34
52	57	3.82	4.00	4.16	4.30	4.41
53	58	3.85	4.04	4.21	4.37	4.49
54	59	3.88	4.08	4.27	4.43	4.57
55	60	3.91	4.12	4.32	4.50	4.65
56	61	3.94	4.16	4.38	4.57	4.73
57	62	3.97	4.21	4.43	4.64	4.81
58	63	4.00	4.25	4.49	4.71	4.90
59	64	4.02	4.29	4.54	4.78	4.98
60	65	4.05	4.32	4.60	4.85	5.07
61	66	4.08	4.36	4.65	4.92	5.16
62	67	4.10	4.40	4.70	4.99	5.24
63	68	4.13	4.43	4.75	5.06	5.33
64	69	4.15	4.47	4.80	5.13	5.42
65	70	4.17	4.50	4.85	5.19	5.51
70	75	4.26	4.65	5.07	5.51	5.94

5. **PROCEEDS LEFT AT INTEREST** - The Company will hold the proceeds on deposit. Interest payments will be made annually, semi-annually, quarterly or monthly, as elected. The payee may withdraw all or part of the remaining proceeds and interest. Interest at a rate set by the Company, but never less than 2½% a year, will be applied.

D. OTHER BENEFIT PAYMENT ARRANGEMENTS

The proceeds may be paid in any other manner approved by the Company.

E. DEATH OF PAYEE

If any payments remain to be paid under a benefit payment option at the death of the payee, payment will be made to a contingent payee, if named, or to the estate of the payee.

F. CONDITIONS

All of the following restrictions will apply to the benefit payment options, unless the Company agrees otherwise.

1. Any amount payable to an assignee will be paid in one lump sum.
2. The amount applied must be at least \$10,000 and result in periodic payments of at least \$50.
3. The benefit payment options are not available if the proposed payee is a corporation, estate, or other entity which is not a natural person.
4. To the extent permitted by law, proceeds will not be subject to claims of a beneficiary's creditors.
5. The payee may not assign, transfer, or encumber any payment.
6. For benefit payment options which involve a life income, one of the persons on whose life the payments are based must be the owner, insured, or beneficiary. The Company may require evidence of age, sex, and continuing survival.

G. ADDITIONAL DEPOSIT PRIVILEGE

If surrender values are used under a benefit payment option, the Company will accept an additional amount under that option. The following conditions will apply:

1. The insured must have attained age 55;
2. This policy must have been in effect at least three years; and
3. The additional amount must not exceed the amount of surrender value applied under the benefit payment option.

VIII. BENEFICIARY

A. DESIGNATION OF BENEFICIARY

The beneficiary is as named in the application or in the most recent change of beneficiary.

B. CHANGE OF BENEFICIARY

While the insured is alive the owner may change the beneficiary unless otherwise provided in the previous designation. A change of beneficiary will automatically revoke any previous designation. A change of beneficiary may be made by filing a written request in a form satisfactory to the Company at its home office. A designation will not be in effect unless filed; but, if filed, it will be effective the date signed, subject to any payment made or action taken by the Company before we are notified of this change. If more than one beneficiary is named without stating their respective interests they will share equally.

C. DEATH OF BENEFICIARY

Unless otherwise provided in the beneficiary designation:

1. If any beneficiary dies before the insured, his interest will pass to any other beneficiary(ies) as designated.
2. If no beneficiary survives the insured, the proceeds will be paid in one sum to the owner, if living, otherwise to the owner's spouse, if any, or if there is no such spouse, to the owner's estate.
3. If all irrevocable beneficiaries have died, the owner may name a new beneficiary during the lifetime of the insured.

IX. OWNERSHIP AND ASSIGNMENT

A. OWNERSHIP

Unless an owner is named in the application or by a change of ownership, the insured is the owner. The owner may exercise every right and enjoy every privilege provided by this policy. These rights and privileges end at the insured's death.

If the owner is someone other than the insured and the owner dies, the insured becomes the owner unless a contingent owner has been named.

The consent of any irrevocable beneficiary is needed to exercise any policy right except the right to

1. Change the frequency of premium payments; or
2. Reinstate this policy.

An irrevocable beneficiary designation may change this provision.

B. ASSIGNMENT AND CHANGE OF OWNERSHIP

The owner can change ownership by writing to the Company at its home office.

An assignment as security for a loan will not cause a change of ownership. However, the rights of any owner, beneficiary or other payee will be subject to the terms of the assignment.

No assignment or change of ownership will be binding on the Company unless it is in writing and received by the Company at its home office. The Company will not be responsible for determining the validity of any assignment.

X. PROJECTION OF BENEFITS AND VALUES

The Company will provide a projection of illustrative future death benefits and cash values upon written request by the owner and payment of a fee. The fee payable will be the one then in effect for this projection but the fee will never exceed \$25. The illustration will be based on:

1. Assumptions as to the specified amount and planned premium payments as may be specified by the owner;
and
2. Such other assumptions as are necessary and specified by the Company and/or the owner.

EMC NATIONAL LIFE COMPANY
ADDITIONAL INSURED BENEFIT RIDER

I. BENEFIT

While this policy and rider are in force, we will pay the additional insured benefit as shown on page 3 of the policy, after we receive due proof of the additional insured's death.

II. DEFINITION OF ADDITIONAL INSURED

"Additional insured" means each person so named in the application for this rider.

III. BENEFICIARY

The additional insured's beneficiary will be the beneficiary named in the application or in the most recent change of beneficiary. If no beneficiary is specifically designated for the additional insured, the proceeds will be paid in one sum to the additional insured's spouse, if any, or if there is no such spouse, to the additional insured's estate.

IV. SURVIVOR PROVISION

If the death of the insured occurs or the policy matures while this rider is in effect, coverage for any additional insureds may continue as individual policies. The suicide and/or contestable periods will not start anew on the individual policies. If any additional insured dies at the same time, or within 30 days of the death of the insured, a death benefit will be paid as if the new individual policy had been issued. The first premiums for the new policy will be deducted from the proceeds, if needed. Benefits for the same death will not be paid under both the additional insured rider and the new individual policy.

V. CONVERSION PROVISION

A. CONVERSION PROVISION

This rider may be converted, without evidence that the additional insured is insurable at the time of conversion, for a new policy on the additional insured, subject to the following:

1. This policy is in force with no premium in default;
2. You request the conversion during the level term period, or age 75, whichever is earlier; and
3. The premium for the new policy is paid.

B. CHARACTERISTICS OF THE NEW POLICY

The following provisions apply to the new policy:

1. The new policy will be a permanent plan as designated by the Company on the date of issue of the new policy;
2. The death benefit will be the amount of insurance at the time the request for conversion is received;
3. The date of issue will be the date of conversion;
4. The premium rate will be the Company's rate for the new policy on the date of conversion, and at the attained age and class of the additional insured on the date of conversion; and
5. Other benefit riders will be issued with the new policy only with the consent of the Company and subject to the Company's rules in effect at the date the new policy is issued.

VI. TERMINATION

This rider will end:

1. If the owner of the policy files a written request to cancel this rider;
2. If this policy terminates;
3. At the death of the insured, at which time coverage under this rider may continue as an individual policy for any additional insured in accordance with Section IV, Survivor Provision;
4. If the additional covered insured dies;
5. If the rider is converted to a different plan of insurance; or
6. At the end of the term period shown on page 3.

VII. COST OF RIDER

The cost for this rider will be deducted from the fund value of the policy at the same time and in the same manner as the cost of insurance under the policy. The cost of this rider is shown on page 3 of the policy. The cost will cease when the rider ends.

VIII. EFFECTIVE DATE

The issue date of this rider is the effective date of the policy. If this rider is added after the policy is issued, the effective date will be shown on an endorsement.

IX. GENERAL PROVISIONS

A. SUICIDE

If any additional insured commits suicide, while sane or insane, within two years from this additional insured benefit rider's issue date (or within one year of the date of issue of this rider in Colorado, Missouri or North Dakota), our liability will be limited to the premium paid for this rider.

B. MISSTATEMENT OF AGE

If the age of the additional insured has been misstated, the benefits under this rider will be those which the premiums paid would have purchased for the correct age.

C. INCONTESTABILITY

We will not contest the validity of this rider after it has been in force during the lifetime of the additional insured for two years from its effective date.

D. REINSTATEMENT

This rider may be reinstated according to the terms of the policy. Evidence of insurability satisfactory to us may be required for the additional insured.

E. CONTRACT PROVISIONS

The proceeds will be paid in one sum unless otherwise approved by us. The settlement options of the policy are not applicable to any amount payable under this rider. This benefit does not change the loan or nonforfeiture value of the policy.

F. COMPUTATION OF VALUES

Values are computed on the basis of the appropriate mortality tables within the Commissioners' 2001 Standard Ordinary Mortality Tables. Values are computed assuming age last birthday and deaths occurring at the end of the policy year. Interest is calculated at a rate less than or equal to the maximum required by law. Overall values are greater than or equal to the values required by law.

G. CONFORMITY WITH STATE STATUTES

On the date of issue of the rider, if any provisions of this rider are in conflict with the laws of the state in which the owner resides on that date, then those provisions are amended to conform to the minimum requirements of such laws.

H. INTERPRETATION

This rider is a part of the policy to which it is attached. Unless stated otherwise, all provisions of the policy also apply to this rider. If there is a conflict between the terms of the policy and the terms of this rider, the rider controls.

Signed for the Company at its home office.



Alan D. Huisinga, President

EMC NATIONAL LIFE COMPANY
TERM INSURANCE RIDER FOR CHILDREN

I. BENEFIT

While this policy and rider are in force, and upon receipt of due proof of the death of a covered child, we will pay to the beneficiary the death benefit shown on page 3 of the policy.

II. DEFINITION OF COVERED CHILD

For purposes of this rider, covered child is defined as a child named in the application or born to the insured or legally adopted after the date of the application. A covered child must be 14 days old before coverage begins. No covered child will be insured who is age 18 or older on or before the date of this application.

After the issue date of this rider, coverage is automatically provided on children meeting the above requirements.

In determining the age of a covered child, it is assumed the covered child was born at 12:01 a.m. standard time on the date and at the place the covered child was born.

III. PAID-UP BENEFIT AT THE DEATH OF THE INSURED

A. PAID-UP BENEFIT

If the insured dies while this rider is in force, we will waive all future premiums for the insurance on the covered child. The waiver will apply until the insurance on the covered child expires or is converted.

B. OWNERSHIP OF PAID-UP INSURANCE

A covered child of legal age will be the owner of the paid-up insurance on the covered child's life. If a covered child is not of legal age, the legal guardian of the covered child will be the owner of the paid-up insurance on the covered child.

C. SURRENDER VALUE OF THE PAID-UP INSURANCE

The surrender value of this paid-up insurance will be the net single premium used to purchase paid-up life insurance and is computed on the basis of the appropriate mortality tables within the Commissioners' 2001 Standard Ordinary Mortality Tables. This is computed assuming age last birthday and deaths occurring at the end of the policy year. Interest is calculated using a rate less than or equal to the maximum required by law.

IV. BENEFICIARY

The beneficiary provision under the policy will not apply to this rider unless the owner stated otherwise. If no beneficiary is specifically designated for the covered child, the benefit at the death of a covered child will be paid as follows:

1. To the insured, if the insured is living at the time the covered child dies; or
2. To the estate of the insured, if the insured is not living at the time the covered child dies.

V. CONVERSION PRIVILEGE FOR INSURANCE ON THE COVERED CHILD

A. CONVERSION PRIVILEGE

The insurance on the life of a covered child may be converted to a new policy on the covered child if an application is received by us

1. On or 60 days prior to the 25th birthday of the covered child; or
2. Within 60 days after the date of the marriage of such covered child, provided the marriage is before the covered child's 25th birthday.

The amount of insurance under the new policy shall not exceed five times the amount of insurance on the life of the covered child provided by this rider. We will not require evidence that the covered child is insurable at the time of conversion. This rider must be in force with no premium in default. The premium for the new policy must be paid.

B. CONVERSION PRIVILEGE UPON TERMINATION OF RIDER

If this rider terminates because the policy terminates as provided therein, the insurance on the life of a covered child may be converted to a new policy on the life of the covered child. The application for conversion must be made within 60 days of policy termination. If the covered child is under age 15, an adult parent or legal guardian must sign the application for conversion.

During the 60-day period allowed for conversion, insurance will continue under this rider until a new policy is issued. We will not require evidence that the covered child is insurable at the time of conversion. The amount of insurance shall not exceed the amount of insurance on the covered child under this rider. The premium for the new policy must be paid.

C. CHARACTERISTICS OF THE NEW POLICY

The following provisions apply to the new policy:

1. The new policy will be a permanent plan as designated by us on the date of issue of the new policy;
2. The date of issue will be the date of conversion;
3. The premium rate will be our rate on the date of conversion for the plan selected at the attained age, gender and class of the covered child; and
4. The suicide and /or contestability period will not start anew on the new policy; however, a new suicide and contestable period will apply to new benefits not contained in the original policy, or to any increase in benefits in the new policy.
5. Benefit riders may be added only with our consent and subject to our rules at the time the new policy is issued.

VI. TERMINATION

Other than insurance on a covered child that is continued on the death of the insured, coverage provided under this rider will end on the occurrence of any of the following:

1. If the cost of insurance for this rider or for the policy to which it is attached is not paid before the end of the grace period stated in the policy.
2. Marriage of the covered child.
3. On the covered child's 25th birthday.
4. On the policy anniversary following the 65th birthday of the insured.
5. The date the policy to which this rider is attached terminates through surrender, conversion, maturity or nonpayment of premium.

This rider can be cancelled at any time by the owner, by writing to us at our Home Office.

VII. COST OF RIDER

The cost for this rider will be deducted from the fund value of the policy at the same time and in the same manner as the cost of insurance under the policy. The cost of this rider is shown on page 3 of the policy. The cost will cease when the rider ends.

VIII. EFFECTIVE DATE

The issue date of this rider is the effective date of the policy. If this rider is added after the policy is issued, the effective date will be shown on an endorsement.

IX. GENERAL PROVISIONS

A. SUICIDE

If a covered child commits suicide, while sane or insane, within two years from this covered child rider's date of issue (or within one year of the date of issue of this rider in Colorado, Missouri or North Dakota), our liability will be limited to the premium paid for this rider.

B. MISSTATEMENT OF AGE

If the age of a covered child has been misstated, the benefits under this rider will be those which the premiums paid would have purchased for the correct age.

C. INCONTESTABILITY

We will not contest the validity of this rider after it has been in force during the lifetime of the insured or any covered child for two years from its effective date.

D. REINSTATEMENT

This rider may be reinstated according to the terms of the policy. Evidence of insurability satisfactory to us may be required for each covered child.

E. CONTRACT PROVISIONS

The proceeds will be paid in one sum unless otherwise approved by us. The settlement options of the policy are not applicable to any amount payable under this rider. This benefit does not change the loan or nonforfeiture value of the policy.

F. COMPUTATION OF VALUES

Values are computed on the basis of the appropriate mortality tables within the Commissioners' 2001 Standard Ordinary Mortality Tables. Values are computed assuming age last birthday and deaths occurring at the end of the policy year. Interest is calculated at a rate less than or equal to the maximum required by law. Overall values are greater than or equal to the values required by law.

G. CONFORMITY WITH STATE STATUTES

On the date of issue of the rider, if any provisions of this rider are in conflict with the laws of the state in which you reside on that date, then those provisions are amended to conform to the minimum requirements of such laws.

H. INTERPRETATION

This rider is a part of the policy to which it is attached. Unless stated otherwise, all provisions of the policy also apply to this rider. If there is a conflict between the terms of the policy and the terms of this rider, the rider controls.

Signed for the Company at its home office.



Alan D. Huisinga, President

EMC NATIONAL LIFE COMPANY
ACCIDENTAL DEATH BENEFIT RIDER

I. ACCIDENTAL DEATH BENEFIT

While this policy and rider are in force, we will pay to the beneficiary the accidental death benefit shown on page 3 of the policy. This amount will be paid in addition to the death proceeds of the policy.

II. DEFINITION OF ACCIDENTAL DEATH

“Accidental death” means a sudden, unexpected and unintended death resulting from accidental bodily injury or injuries that occur on or after the effective date of the policy and this rider and while coverage is in force. The injury or injuries must be independent of disease or bodily or mental infirmity or any other causes.

III. COMMON CARRIER DEATH BENEFIT

While this policy and rider are in force, we will pay a common carrier death benefit in addition to the accidental death benefit. The amount of the common carrier death benefit will be the face amount shown on page 3 of the policy. If the face amount shown on page 3 of the policy is more than \$50,000, we will pay only \$50,000 for the common carrier death benefit.

This benefit is payable when the accidental death is caused while the insured is riding as a fare-paying passenger in any type of transportation open to the public. The company providing the transportation must be licensed as an individual or company to provide transportation to the general public. Public transportation includes taxicabs, buses, streetcars, trains, airplanes and other types of transportation.

IV. RISKS NOT COVERED

The accidental death benefit or the common carrier death benefit provided by this rider will not be paid if the insured’s death is caused directly by any of the following causes:

1. Suicide or attempted suicide, while sane or insane.
2. Illness or disease, including medical or surgical treatment.
3. Intoxication or while under the influence of alcohol, drugs or any narcotic (including an overdose) unless administered on the advice of a physician and taken according to the physician’s instructions. The term “intoxication” refers to that condition as defined by law and decisions of the jurisdiction in which the accidental death or common carrier death occurred.
4. Bacterial infection, except through a wound sustained in an accident.
5. Operating, riding in or descending from any type of aircraft if the insured person
 - a. is a pilot, officer, or member of the crew or has any duties aboard the aircraft; or
 - b. is giving or receiving any kind of training or instruction.
6. Insurrection, war or act of war whether declared or undeclared.
7. Service in the armed forces of any country at war, whether declared or undeclared.
8. Committing or attempting to commit a felony, or being engaged in an illegal occupation.

V. TERMINATION

This rider will terminate on the earliest of the following:

1. If the cost of the rider or for the policy to which it is attached is not paid before the end of the grace period stated in the policy.
2. The policy anniversary following the insured’s 65th birthday.
3. The date the insured dies.
4. The date the policy terminates.

This rider can be cancelled at any time by the owner, by writing to us at our home office.

VI. COST OF RIDER

The cost for this rider will be deducted from the fund value of the policy at the same time and in the same manner as the cost of insurance under the policy. The cost of this rider is shown on page 3 of the policy. The cost will cease when the rider ends.

VII. EFFECTIVE DATE

The issue date of this rider is the effective date of the policy. If this rider is added after the policy is issued, the effective date will be shown on an endorsement.

VIII. GENERAL

A. CONTRACT PROVISIONS

The settlement options of the policy are not applicable to any amount payable under this rider. This benefit does not change the loan or nonforfeiture value of the policy.

B. CONFORMITY WITH STATE STATUTES

On the date of issue of the rider, if any provisions of this rider are in conflict with the laws of the state in which you reside on that date, then those provisions are amended to conform to the minimum requirements of such laws.

C. INTERPRETATION

This rider is a part of the policy to which it is attached. Unless stated otherwise, all provisions of the policy also apply to this rider. If there is a conflict between the terms of the policy and the terms of this rider, the rider controls.

Signed for the Company at its home office.



Alan D. Huisinga, President

SERFF Tracking Number: EMCN-125711306 State: Arkansas
Filing Company: EMC National Life Company State Tracking Number: 39508
Company Tracking Number:
TOI: L09I Individual Life - Flexible Premium Sub-TOI: L09I.001 Single Life
Adjustable Life
Product Name: Universal Life Policy
Project Name/Number: /

Supporting Document Schedules

Review Status:

Satisfied -Name: Certification/Notice

06/25/2008

Comments:

Certifications attached.

Attachments:

AR Readability Certificate.pdf

AR Certificate of Compliance.pdf

Review Status:

Satisfied -Name: Illustration Certification

06/27/2008

Comments:

Certificate Attached.

Attachment:

ELP003 (7-08) Illustration Certification.pdf

Review Status:

Satisfied -Name: Certificate of Compliance

07/08/2008

Comments:

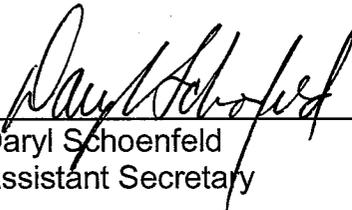
Attachment:

AR Regulation 34.pdf

**READABILITY
CERTIFICATION**

I certify to the best of my knowledge that form ELP003 (7-08), et al. is readable based on the factors specified in Sections 66-3251 to 66-3258 of the Arkansas Statutes. The Flesch Scores are as follows:

<u>Form Number</u>	<u>Flesch Score</u>
ELP003 (7-08)	52.0
ELR004 (7-08)	52.5
ELR005 (7-08)	52.0
ELR006 (7-08)	51.5



Daryl Schoenfeld
Assistant Secretary

July 1, 2008

Date

STATE OF ARKANSAS
CERTIFICATE OF COMPLIANCE

I hereby certify that this submission complies with the Arkansas Rule and Regulation 19 which relates to eliminating the act of denying benefits or coverage on the basis of sex or marital status in the terms and conditions of insurance contracts or underwriting criteria, as applicable.

I hereby certify that this submission complies with the Arkansas Rule and Regulation 49 which relates to providing Life and Health Guaranty Association notices, as applicable.

I hereby certify that this submission complies with the Arkansas Statutes – Insurance Laws 23-79-138 which relates to required policy information on every policy of life insurance, accident and health insurance issued, as applicable.



Daryl Schoenfeld
Assistant Secretary

July 1, 2008

Date

ILLUSTRATION CERTIFICATION

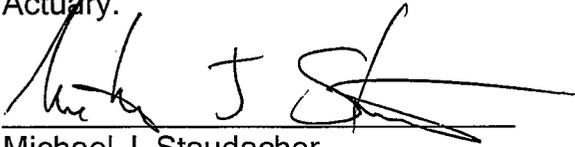
I, Mark C. Rowley, Illustration Actuary, hereby certify that the EMC National Life Company policy form ELP003 (7-08) being illustrated meets the following requirements:

1. The illustration scale is not more favorable than the lesser of:
 - i. The disciplined current scale; or
 - ii. The currently payable scale.
2. We are using the 2008 generally-recognized expense table in determining assumed expenses for testing the disciplined current scale.
3. The currently payable scale applicable to business issued within the previous five years and within the scope of this certification has not been reduced for reasons other than changes in the experience factors underlying the disciplined current scale.
4. Nonguaranteed elements illustrated for new policies are consistent with those illustrated for similar in force policies.
5. Nonguaranteed elements illustrated for both new and in force policies are consistent with the nonguaranteed elements actually being paid, charged or credited to the same or similar forms.
6. The illustration is self-supporting.
7. The illustration (except for policies that never develop non-forfeiture values) is not lapse-supported.
8. The disciplined current scale used in the illustrations conform to Actuarial Standards of Practice #24.



Mark C. Rowley, FSA, MAAA
Illustration Actuary

I, Michael J. Staudacher, Vice President, Marketing Support, hereby certify the illustration format used for policy form ELP003 (7-08) meets the requirements of the Illustration Regulation and EMC National Life Company has provided its agents with the information regarding the expense allocation method used by EMC National Life Company in its illustrations. Furthermore, the scales used in the insurer-authorized illustrations are those scales certified by the Illustration Actuary.



Michael J. Staudacher
Vice President, Marketing Support

ARKANSAS
CERTIFICATE OF COMPLIANCE

REGULATION 34
AND
BULLETIN 11-83

Universal Life Policy ELP003 (7-08). et al.

I hereby certify that this EMC National Life Company Universal Life Policy
complies with Arkansas Insurance Regulation 34 and we have reviewed and
comply with the guidelines of Bulletin 11-83.


Daryl Schoenfeld
Assistant Secretary

July 8, 2008