

SERFF Tracking Number: MANU-126060083 State: Arkansas
Filing Company: John Hancock Life Insurance Company (U.S.A.) State Tracking Number: 41813
Company Tracking Number: 09MAJULX & 09MECVR
TOI: L09I Individual Life - Flexible Premium Sub-TOI: L09I.001 Single Life
Adjustable Life
Product Name: 09MAJULX & 09MECVR
Project Name/Number: 09MAJULX & 09MECVR/09MAJULX & 09MECVR

Filing at a Glance

Company: John Hancock Life Insurance Company (U.S.A.)

Product Name: 09MAJULX & 09MECVR SERFF Tr Num: MANU-126060083 State: Arkansas
TOI: L09I Individual Life - Flexible Premium SERFF Status: Closed-Approved- State Tr Num: 41813
Adjustable Life Closed
Sub-TOI: L09I.001 Single Life Co Tr Num: 09MAJULX & State Status: Approved-Closed
09MECVR

Filing Type: Form Reviewer(s): Linda Bird
Authors: Helene Landow, Karren Disposition Date: 03/18/2009
Phair, Grace Pisciola, Debbie Tom,
Jacqueline Lau
Date Submitted: 03/12/2009 Disposition Status: Approved-Closed

Implementation Date Requested: Implementation Date:
State Filing Description:

General Information

Project Name: 09MAJULX & 09MECVR
Project Number: 09MAJULX & 09MECVR
Requested Filing Mode: Review & Approval

Explanation for Combination/Other:
Submission Type: New Submission
Overall Rate Impact:
Filing Status Changed: 03/18/2009

Deemer Date:
Submitted By: Debbie Tom
Filing Description:

ARKANSAS
N.A.I.C. # 904-65838
SERFF Tracking # MANU-126060083
Date of Submission: March 12, 2009

Status of Filing in Domicile: Authorized
Date Approved in Domicile:
Domicile Status Comments: Exempt in
Michigan
Market Type: Individual
Group Market Size:
Group Market Type:
Explanation for Other Group Market Type:
State Status Changed: 03/18/2009
Created By: Debbie Tom
Corresponding Filing Tracking Number:

SERFF Tracking Number: MANU-126060083 State: Arkansas
Filing Company: John Hancock Life Insurance Company (U.S.A.) State Tracking Number: 41813
Company Tracking Number: 09MAJULX & 09MECVR
TOI: L09I Individual Life - Flexible Premium Sub-TOI: L09I.001 Single Life
Adjustable Life
Product Name: 09MAJULX & 09MECVR
Project Name/Number: 09MAJULX & 09MECVR/09MAJULX & 09MECVR

Analyst: Grace Pisciola

Filing Description:

Policy: Form 09MAJULX - Flexible Premium Adjustable Life Insurance Policy, Non-Participating
Supplementary Benefits: Form 09MECVR - Enhanced Cash Value Rider

We are submitting the above forms for your approval. The forms are filed in accordance with the applicable statutes and regulations of your jurisdiction. The forms will be laser printed, subject only to minor variations in paper stock, color, fonts, duplexing and positioning. These are new forms and do not replace any currently approved forms. The forms will be effective on the date of approval and will be marketed to various market sectors.

No part of this filing contains any unusual or controversial items that deviate from normal Company or industry standards.

POLICY

Form 09MAJULX, Flexible Premium Adjustable Life Insurance Policy is a non-participating single life policy, which will be marketed primarily to the general market. The policy will be sold on a Fully Underwritten basis, and Guaranteed Issue. The minimum Total Face amount is \$250,000. The policy provides two death benefit options and is underwritten on both a standard and substandard basis. The issue ages for the policy are 0 to 90, with a minimum issue age of 20 for smokers. The issue ages for guaranteed issue is 20-65. The policy provides two premium test option for qualification as life insurance for tax purposes under the Internal Revenue Code: Guideline Premium Test or Cash Value Accumulation Test. The premium test election is made at the time of application and cannot be changed after the policy is issued. Flexible premiums may be paid until the life insured's attained age 121. When we receive a premium payment, we deduct a Premium Charge and credit the net premium to the Guaranteed Interest Account. The Guaranteed Interest Account is credited at rates determined by us, which are guaranteed to never be less than an effective rate of 3%.

We make monthly deductions to cover the cost of insurance and other policy charges. If the policy is still in force at the life insured's attained age 121, interest will continue to be credited but monthly deductions will cease. Any Supplemental Face Amount will be terminated at age 121, thereby reducing the Death Benefit by such amount. Policy loans are available on a variable interest rate basis as specified in the policy

Reserves and non-forfeiture values are based on the 2001 Commissioner's Standard Ordinary Sex Distinct ANB Aggregate Ultimate Mortality Tables with substandard ratings as applicable. We also use these tables as the basis for determining maximum cost of insurance rates as shown on Page 4 of the policy. For policies subject to the Norris Decision that are purchased by a qualified pension or profit-sharing plan, we issue the policy on a unisex basis with the maximum cost of insurance rates based on the Commissioners 2001 Standard Ordinary Male Morality Table, with

SERFF Tracking Number: MANU-126060083 State: Arkansas
Filing Company: John Hancock Life Insurance Company (U.S.A.) State Tracking Number: 41813
Company Tracking Number: 09MAJULX & 09MECVR
TOI: L09I Individual Life - Flexible Premium Sub-TOI: L09I.001 Single Life
Adjustable Life
Product Name: 09MAJULX & 09MECVR
Project Name/Number: 09MAJULX & 09MECVR/09MAJULX & 09MECVR

substandard ratings as applicable. An Actuarial Memorandum and a Statement of the Method of Calculating Reserves are enclosed.

The main application form which will be used with this policy is NB5000US (12/2007) Application for Life Insurance, which was approved by your state on February 11, 2008 under SERFF Tracking # MANU-125381606.

SUPPLEMENTARY BENEFITS

Form 09MECVR, Enhanced Cash Value Rider, is an enhanced cash value rider which provides a benefit equal to a specified percentage of the cumulative premiums paid (as described in the enclosed Policy Specifications – Supplementary Benefits page). The benefit will be added to the surrender value at time of policy surrender. The rider can be added to the policy only at issue. A separate Actuarial Memorandum is enclosed for the above rider.

Other previously and subsequently approved riders may be made available with this policy. Note that the policy Section 1, under the Other Benefits and Specification heading, will include a complete listing of all riders applied for and issued with the policy.

Marketing materials, which have yet to be developed for this product, will be submitted to your Department to the extent necessary under insurance laws, unless you indicate otherwise.

P.S. At present, there is no advertising or sales material available for this product.

Enclosures: Actuarial Memorandums and Reserve Statement

Statement of Variability

Filing Fee (EFT)

Readability Certificate

Certificate of Compliance with Standard Non-Forfeiture and Valuation

John Doe Application

Compliance Certification re Unfair Sex Discrimination

Compliance Certification re Ark. Code Ann. 23-79-138 and Regulation 49

Company and Contact

Filing Contact Information

Grace Pisciola, Senior Contract Analyst grace_pisciola@jhancock.com
P.O. Box 600 416-926-5903 [Phone]
Buffalo, NY 14201-0600 416-926-3121 [FAX]

Filing Company Information

SERFF Tracking Number: MANU-126060083 State: Arkansas
 Filing Company: John Hancock Life Insurance Company (U.S.A.) State Tracking Number: 41813
 Company Tracking Number: 09MAJULX & 09MECVR
 TOI: L09I Individual Life - Flexible Premium Sub-TOI: L09I.001 Single Life
 Adjustable Life
 Product Name: 09MAJULX & 09MECVR
 Project Name/Number: 09MAJULX & 09MECVR/09MAJULX & 09MECVR
 John Hancock Life Insurance Company CoCode: 65838 State of Domicile: Michigan
 (U.S.A.)
 P. O. Box 600 Group Code: 904 Company Type: insurance/financial
 Contracts and Compliance Group Name: State ID Number:
 Buffalo, NY 14201-0600 FEIN Number: 01-0233346
 (416) 926-3000 ext. [Phone]

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
John Hancock Life Insurance Company (U.S.A.)	\$50.00	03/12/2009	26353675

SERFF Tracking Number: MANU-126060083 State: Arkansas
Filing Company: John Hancock Life Insurance Company (U.S.A.) State Tracking Number: 41813
Company Tracking Number: 09MAJULX & 09MECVR
TOI: L09I Individual Life - Flexible Premium Sub-TOI: L09I.001 Single Life
Adjustable Life
Product Name: 09MAJULX & 09MECVR
Project Name/Number: 09MAJULX & 09MECVR/09MAJULX & 09MECVR

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Linda Bird	03/18/2009	03/18/2009

SERFF Tracking Number: MANU-126060083 *State:* Arkansas
Filing Company: John Hancock Life Insurance Company (U.S.A.) *State Tracking Number:* 41813
Company Tracking Number: 09MAJULX & 09MECVR
TOI: L09I Individual Life - Flexible Premium *Sub-TOI:* L09I.001 Single Life
Adjustable Life
Product Name: 09MAJULX & 09MECVR
Project Name/Number: 09MAJULX & 09MECVR/09MAJULX & 09MECVR

Disposition

Disposition Date: 03/18/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: MANU-126060083 State: Arkansas
 Filing Company: John Hancock Life Insurance Company (U.S.A.) State Tracking Number: 41813
 Company Tracking Number: 09MAJULX & 09MECVR
 TOI: L09I Individual Life - Flexible Premium Sub-TOI: L09I.001 Single Life
 Adjustable Life
 Product Name: 09MAJULX & 09MECVR
 Project Name/Number: 09MAJULX & 09MECVR/09MAJULX & 09MECVR

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Health - Actuarial Justification		No
Supporting Document	Outline of Coverage		No
Supporting Document	09MAJULX and 09MECVR - Actuarial Memorandum and Reserve Statement		No
Supporting Document	Statement of Variability		Yes
Form	Flexible Premium Adjustable Life Insurance Policy, Non-Participating		Yes
Form	Enhanced Cash Value Rider		Yes

SERFF Tracking Number: MANU-126060083 State: Arkansas
 Filing Company: John Hancock Life Insurance Company (U.S.A.) State Tracking Number: 41813
 Company Tracking Number: 09MAJULX & 09MECVR
 TOI: L09I Individual Life - Flexible Premium Sub-TOI: L09I.001 Single Life
 Adjustable Life
 Product Name: 09MAJULX & 09MECVR
 Project Name/Number: 09MAJULX & 09MECVR/09MAJULX & 09MECVR

Form Schedule

Lead Form Number:

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	09MAJULX	Policy/Cont Flexible Premium ract/Fratern Adjustable Life al Insurance Policy, Certificate Non-Participating	Initial		49.000	09MAJULX ar.pdf
	09MECVR	Policy/Cont Enhanced Cash ract/Fratern Value Rider al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		49.000	09MECVR _gen_.pdf



John Hancock Life Insurance Company (U.S.A.)
A Stock Company

LIFE INSURED **[John J. Doe]**
POLICY NUMBER [12 345 678]
PLAN NAME [Majestic ULX]

FLEXIBLE PREMIUM ADJUSTABLE LIFE INSURANCE POLICY

ADJUSTABLE DEATH BENEFIT

BENEFIT PAYABLE ON LIFE INSURED'S DEATH

FLEXIBLE PREMIUMS PAYABLE TO AGE 121 DURING THE LIFE INSURED'S LIFETIME

NON-PARTICIPATING (NOT ELIGIBLE FOR DIVIDENDS)

Subject to the conditions and provisions of this policy while the policy is in force, and upon the death of the Life Insured, John Hancock Life Insurance Company (U.S.A.) ("the Company") agrees to pay the Insurance Benefit to the beneficiary in a lump sum, and to provide the other benefits, rights, and privileges, if any, of the policy. The Insurance Benefit is described in Section 6. If the Company makes other plans of payment available other than a lump sum, then a beneficiary may request written election of any such other plans in lieu of a lump sum.

READ YOUR POLICY CAREFULLY. It is a contract between you and us.

RIGHT TO RETURN POLICY. If for any reason you are not satisfied with your policy, you may return it for cancellation by delivering or mailing it to us or to the agent who sold it. If this policy does not replace another policy, you may return it within TEN days after receiving it, or if it replaces another policy, you may return it within TWENTY days after receiving it. We will refund in full the payment made. The policy will be void from the beginning.

Signed for the Company by:


President


Secretary

Policy Provisions

Section

1. Policy Specifications
2. Table of Rates
3. Definitions
4. Qualification as Life Insurance
5. Total Face Amount
6. Insurance Benefit
7. Interest On Proceeds
8. Premiums
9. Grace Period
10. Policy Termination
11. Reinstatement
12. Coverage at and after Age 121
13. Policy Value
14. Loan Account and Guaranteed Interest Account
15. Loans
16. Surrenders and Withdrawals
17. Owner and Beneficiary
18. Assignment
19. Misstatements
20. Suicide
21. Incontestability
22. The Contract
23. Right to Postpone Payment of Benefits
24. Claims Of Creditors
25. Reports To Owner
26. How Values Are Computed

1. POLICY SPECIFICATIONS

Life Insured	[JOHN DOE]	Plan Name	[Majestic ULX]
Age at Policy Date	[35]	Policy Number	[12 345 678]
[Sex]	[MALE]	Issue Date	[May 1, 2009]
Risk Classification	[Standard] [Non Smoker]	Policy Date	[May 1, 2009]
Additional Ratings	[not applicable]		
Owner, Beneficiary	As designated in the application or subsequently changed		
Death Benefit Option at Issue	[Option 1]		
Life Insurance Qualification Test Elected	[Guideline Premium Test]		
		Base Face Amount at Issue	[\$500,000]
		Supplemental Face Amount at Issue	[\$600,000]
		Total Face Amount at Issue	[\$1,100,000]

Governing Law [Arkansas]

PREMIUMS AT ISSUE

Premium Mode	[Annual]
Planned Premium	\$ [11,400.00 per year]
Minimum Initial Premium	[\$1,004.41]

Notice: This policy provides life insurance coverage for the lifetime of the Life Insured if sufficient premiums are paid. Premium payments in addition to the Planned Premium shown may need to be made to keep this policy and coverage in force. Keeping the policy and coverage in force will be affected by factors such as: changes in the current cost of insurance rates; administrative charge and premium charge; the amount, timing and frequency of premium payments; the interest rate being credited to the Guaranteed Interest Account; changes to the Death Benefit Option; changes in the Total Face Amount; loan activity; withdrawals; and deductions for any applicable Supplementary Benefit riders that are attached to, and made a part of, this policy. Also refer to the Grace Period and Policy Termination provisions in Sections 9 and 10.

1. POLICY SPECIFICATIONS (continued) – Policy [12 345 678]

SCHEDULE OF SUPPLEMENTAL FACE AMOUNTS

Supplemental Face Amount At Issue	\$ [600,000]
Maximum Increasing Supplemental Face Amount	[\$1,050,000]
Maximum Total Supplemental Face Amount	[\$1,650,000]

<u>Effective at Beginning of Policy Year</u>	<u>Supplemental Face Amount Increases</u>	<u>Total Supplemental Face Amount</u>
1	\$0	\$600,000
2	\$50,000	\$650,000
3	\$50,000	\$700,000
4	\$75,000	\$775,000
5	\$75,000	\$850,000
6	\$100,000	\$950,000
7	\$100,000	\$1,050,000
8	\$100,000	\$1,150,000
9	\$150,000	\$1,300,000
10	\$150,000	\$1,450,000
11	\$200,000	\$1,650,000
12 to 86	\$0	\$1,650,000

OTHER BENEFITS AND SPECIFICATIONS

[Not Applicable]

1. POLICY SPECIFICATIONS (continued) – Policy [12 345 678]

MAXIMUM EXPENSE CHARGES**Deductions from Premium Payments**

Premium Charge	A percentage of each premium payment, the percentages as shown below		
	Policy Years	Up to Target Premium	Excess of Target Premium
	1*	22%	9%
	2-10	10%	8%
	11+	6%	6%

*If premium received in the first Policy Year is less than the Target Premium shown in the Table of Values, then for the purposes of assessing the Premium Charge, premium received in the second Policy Year will be assessed a Premium Charge on the basis of the percentage applicable in the first Policy Year, until total cumulative premiums received equal the Target Premium for the first Policy Year.

Monthly Deductions: the following charges are deducted monthly from the Policy Value

Administrative Charge	\$15.00
Base Face Amount Charge	[\$0.1885] per \$1000 of Base Face Amount at Issue for the first 10 Policy Years.
Supplemental Face Amount Charge	\$0.1508 per \$1000 of Supplemental Face Amount at Issue for the first 10 Policy Years.
Cost of Insurance Charge	Determined in accordance with Section 13. Maximum monthly rates per \$1,000 are shown in Section 2.

Other Charges

Unscheduled Supplemental Face Amount Increase Charge	\$0.3250 per \$1000 of Unscheduled Supplemental Face Amount Increase deducted monthly for 10 Policy Years from the date of increase.
Supplementary Benefit Rider Charges	Charges for applicable riders are shown under Supplementary Benefits of this Section 1.

1. POLICY SPECIFICATIONS (continued) – Policy [12 345 678]

TABLE OF VALUES

Refer to your policy provisions for details on the terms and values shown in this table.

Minimum Total Face Amount	\$ 250,000
Minimum Base Face Amount	\$ 100,000
Minimum Total Face Amount Decrease	\$ 10,000
Guaranteed Interest Account Annual Rate	Not less than [2.45]%
Loan Interest Rate	As defined in Section 15
Maximum Loan Interest Credited Differential	
Policy Years 1-10	1.25%
Policy Years 11+	.25%
Minimum Loan Amount	\$500
Minimum Withdrawal Amount	\$500
Death Benefit Discount Factor	1.0024663
Target Premium	[\$4,565.48]

2. TABLE OF RATES - Policy [12 345 678]

A. RATE TABLE

Age	Maximum Monthly Rates per \$1,000 of Net Amount at Risk	Minimum Death Benefit Factors	Age	Maximum Monthly Rates per \$1,000 of Net Amount at Risk	Minimum Death Benefit Factors
35	0.1008	2.5000	79	5.4132	1.0500
36	0.1067	2.5000	80	6.0417	1.0500
37	0.1117	2.5000	81	6.7617	1.0500
38	0.1200	2.5000	82	7.5145	1.0500
39	0.1284	2.5000	83	8.3304	1.0500
40	0.1376	2.5000	84	9.2413	1.0500
41	0.1492	2.4300	85	10.2754	1.0500
42	0.1634	2.3600	86	11.4349	1.0500
43	0.1793	2.2900	87	12.7150	1.0500
44	0.1993	2.2200	88	14.1052	1.0500
45	0.2211	2.1500	89	15.5935	1.0500
46	0.2419	2.0900	90	17.1705	1.0500
47	0.2645	2.0300	91	18.6733	1.0400
48	0.2779	1.9700	92	20.2654	1.0300
49	0.2938	1.9100	93	21.9737	1.0200
50	0.3138	1.8500	94	23.8121	1.0100
51	0.3389	1.7800	95	25.7927	1.0000
52	0.3732	1.7100	96	27.6414	1.0000
53	0.4117	1.6400	97	29.6537	1.0000
54	0.4594	1.5700	98	31.8509	1.0000
55	0.5156	1.5000	99	34.2595	1.0000
56	0.5751	1.4600	100	36.9086	1.0000
57	0.6389	1.4200	101	39.0636	1.0000
58	0.6917	1.3800	102	41.4176	1.0000
59	0.7522	1.3400	103	43.9954	1.0000
60	0.8254	1.3000	104	46.8241	1.0000
61	0.9162	1.2800	105	49.9370	1.0000
62	1.0266	1.2600	106	53.3732	1.0000
63	1.1497	1.2400	107	57.1846	1.0000
64	1.2789	1.2200	108	61.4290	1.0000
65	1.4151	1.2000	109	66.1820	1.0000
66	1.5523	1.1900	110	71.5388	1.0000
67	1.6897	1.1800	111	77.6268	1.0000
68	1.8393	1.1700	112	83.3333	1.0000
69	1.9916	1.1600	113	83.3333	1.0000
70	2.1732	1.1500	114	83.3333	1.0000
71	2.3766	1.1300	115	83.3333	1.0000
72	2.6482	1.1100	116	83.3333	1.0000
73	2.9318	1.0900	117	83.3333	1.0000
74	3.2301	1.0700	118	83.3333	1.0000
75	3.5614	1.0500	119	83.3333	1.0000
76	3.9235	1.0500	120	83.3333	1.0000
77	4.3457	1.0500	121	0.0000	1.0000
78	4.8401	1.0500			

For attained Age 121 and above, the Maximum Monthly Rate per \$1,000 of Net Amount at Risk is 0 and the Minimum Death Benefit Factor is 1.0000.

Maximum Monthly Rates are the same for the Base Face Amount and the Supplemental Face Amount and have been adjusted for any applicable Additional Ratings that are applied to the Cost of Insurance rates as shown in Section 1.

3. DEFINITIONS

The term “**Additional Rating**” is an increase in the Cost of Insurance that is applied when a Life Insured does not meet, at a minimum, our underwriting requirements for the standard Risk Classification.

The term “**Age**” means, on any policy anniversary, the age of the person in question at his or her birthday nearest that date.

The term “**Annual Processing Date**” means every 12th Processing Date starting with the Processing Date next after the Policy Date.

The term “**Business Day**” means any pre-scheduled work day that we are open for business. We will deem each Business Day to end at the close of regularly scheduled Company hours (currently 4:00 p.m. Eastern time) on that day.

The term “**date**” means a calendar day ending at midnight local time at our Service Office.

The term “**Guaranteed Interest Account**” is that part of the Policy Value which reflects the value you have in our general account.

The term “**in force**” means that the policy has not terminated in accordance with Sections 9, 10, 11, or surrendered in accordance with Section 16.

The term “**Issue Date**” is the date shown in Section 1 of this policy from which the Suicide and Incontestability provisions are applied.

The term “**Loan Account**” is that part of the Policy Value which reflects amounts transferred from the Guaranteed Interest Account as collateral for a policy loan.

The term “**Minimum Initial Premium**” means the minimum premium needed to put the policy in force and is shown in Section 1.

The term “**Net Cash Surrender Value**” equals the Policy Value less the Policy Debt.

The term “**Net Policy Value**” equals the Policy Value less the value in the Loan Account.

The term “**Net Premium**” is the gross premium paid less any Premium Charge.

The term “**Planned Premium**” means the premium that is selected in the application for the policy, which is intended to be paid on a regular modal basis. It is shown in Section 1.

The term “**Policy Date**” is the date from which charges for the first Monthly Deduction are calculated. The Policy Date is shown in Section 1. Policy Years, Policy Months, and Policy Anniversaries are determined from the Policy Date.

The term “**Policy Debt**” as of any date equals (a) plus (b) plus (c), minus (d), where:

- (a) is the total amount of loans borrowed as of such date;
- (b) is the total amount of any unpaid loan interest charges borrowed against the policy on a Policy Anniversary;
- (c) is any interest charges accrued from the last Policy Anniversary to the current date; and
- (d) is the total amount of loan repayments as of such date.

The term “**Policy Value**” is the sum of the values in the Loan Account and the Guaranteed Interest Account.

The term “**Policy Year**” means (a) or (b) below whichever is applicable.

- (a) The first Policy Year is the period beginning on the Policy Date and ending on the Business Day immediately preceding the first Annual Processing Date.
- (b) Each subsequent Policy Year is the period beginning on an Annual Processing Date and ending on the Business Day immediately preceding the next Annual Processing Date.

3. DEFINITIONS (continued)

The term "**Processing Date**" means the first day of a Policy Month. A Policy Month shall begin on the day in each calendar month that corresponds to the day of the calendar month on which the Policy Date occurred. If the Policy Date is the 29th, 30th, or 31st day of a calendar month, then for any calendar month that has fewer days, the first day of the Policy Month will be the last day of such calendar month. The Policy Date is not a Processing Date.

The term "**Surrender Date**" means the end of the Business Day on which we receive at our Service Office your written request for full surrender of the policy.

The term "**Service Office**" is the office that we designate to service this policy as shown on the back cover of your policy.

The terms "**we**", "**us**", and "**our**" refer only to the Company.

The term "**written request**" is your request to us which must be in a form satisfactory to us, signed and dated by you, and filed at our Service Office or, if permitted by our administrative practices, an electronic mail message ("e-mail") received by us at the internet address specified by us for receipt of such messages.

The terms "**you**" and "**your**" refer only to the Owner of this policy.

4. QUALIFICATION AS LIFE INSURANCE

It is intended that this policy comply with Section 7702 of the Internal Revenue Code, or any other equivalent section of the Code, so that, notwithstanding any other provisions of the policy to the contrary, it will be considered as life insurance for federal income tax purposes. We reserve the right to make any reasonable adjustments to the terms or conditions of this policy if it becomes necessary to allow it to qualify as life insurance. This provision should not be construed to guarantee that this policy will receive tax treatment as life insurance or that the tax treatment of life insurance will never be changed by the future actions of any tax authority. One of the following tax qualification tests will apply to the policy. The test you elected is shown in Section 1. Your election cannot be changed after issue.

Guideline Premium Test

Under this test, if at any time the premiums received under the policy exceed the amount allowable for such tax qualification, such excess amount shall be removed from the policy as of the date of its payment, together with interest thereon from such date, and any appropriate adjustment in the Death Benefit shall be made as of such date. This excess amount shall be refunded to you no later than 60 days after the end of the applicable Policy Year. If this excess amount is not refunded by then, the Total Face Amount under the policy shall be increased retroactively so that at no time is the Death Benefit ever less than the amount necessary to ensure or maintain such tax qualification. In no event, however, will we refuse to accept any premium necessary to prevent the policy from terminating but only if such premium payment would result in a zero Policy Value at the end of the Policy Year. In addition, the Minimum Death Benefit, as described in Section 6, must be maintained.

Cash Value Accumulation Test

Under this test, the Minimum Death Benefit, as described in section 6, must be maintained.

Effect on Life Insurance Qualification Tests

A change in Death Benefit Option or Total Face Amount, or certain other policy changes, will often change the policy's limits under the Life Insurance Qualification Test that you elected.

We reserve the right to refuse or limit any request for a change if the change would cause the policy to fail to qualify as life insurance for tax purposes.

5. TOTAL FACE AMOUNT

The Total Face Amount is made up of two components: (i) the Base Face Amount, and (ii) any Supplemental Face Amount. Minimum Base Face Amount and the Minimum Total Face Amount limits are shown in Section 1. Scheduled increases in any Supplemental Face Amount are elected on the application and if approved, these amounts, when they are to become effective, and the Maximum Increasing Supplemental Face Amount will be shown in Section 1. If you later request that an approved scheduled increase should not become effective or request a decrease in your Supplemental Face Amount coverage, we will abide by your request but we reserve the right to not put into effect all approved scheduled increases for subsequent policy years.

Increase in Supplemental Face Amount

After the first Policy Year, while the Life Insured is alive and the policy is in force, unscheduled changes to the Supplemental Face Amount may be requested in writing. Such increases will not be approved if the Life Insured does not continue to qualify for their same Risk Classification that applied when this policy was issued. We reserve the right to limit the number of such unscheduled changes to one per Policy Year. We also reserve the right to limit the maximum and minimum amounts of unscheduled changes. All requested changes will be subject to our approval. You may not increase your Base Face Amount of insurance under this policy.

Approval of any unscheduled increase in Supplemental Face Amount is subject to our normal underwriting practices, including evidence of insurability. In addition to the policy's regular charges for Supplemental Face Amounts, all requested and approved unscheduled increases in Supplemental Face Amount will be subject to a monthly charge deducted as described in Section 1, not to exceed the Unscheduled Supplemental Face Amount Increase Charge shown in Section 1, under Maximum Expense Charges. A minimum premium payment may also be required. When a requested change becomes effective, and if required by our then current rules, a change in future Planned Premiums will automatically be effected to comply with those rules. Any change will be effective on the next Annual Processing Date after our approval.

Reduction of Total Face Amount

You may request a reduction in Total Face Amount while this policy is in force. The Minimum Total Face Amount Decrease is shown in Section 1. Any reduction in the Total Face Amount generally will be implemented by first reducing any Supplemental Face Amount, although we reserve the right to allow a reduction in Base Face Amount first. Without our prior approval, the Base Face Amount cannot be reduced below the minimum as shown in Section 1. Any reduction in Supplemental Face Amount or Base Face Amount will be effective on the next Processing Date after our approval.

6. INSURANCE BENEFIT

If the Life Insured dies while the policy is in force, we will pay the Insurance Benefit upon receipt of due proof of death of the Life Insured, subject to any applicable provisions of the policy. If the Life Insured dies on or after the date we receive a request from you to surrender the policy, no Insurance Benefit will be paid. We will pay the amount payable under the Surrenders and Withdrawals provision instead.

Insurance Benefit

The Insurance Benefit payable is:

- (a) the Death Benefit as described below; plus
- (b) any amounts payable under any Supplementary Benefit riders as a result of the Life Insured's death that form part of the policy; less
- (c) any outstanding Policy Debt at the date of death.

If the Life Insured dies during a grace period, the Policy Value used in the calculation of the Death Benefit will be the Policy Value as of the date of the death of the Life Insured, and the Insurance Benefit will be reduced by any outstanding Monthly Deductions due.

6. INSURANCE BENEFIT (continued)

Death Benefit

The Death Benefit will depend on whether Option 1 or Option 2 is in effect on the date of the Life Insured's death.

Death Benefit Options

Under Option 1, the Death Benefit is equal to the Total Face Amount at the date of death of the Life Insured. Under Option 2, the Death Benefit is equal to the Total Face Amount at the date of death of the Life Insured plus the Policy Value at the date of death of the Life Insured.

The Death Benefit after the Life Insured's Attained Age 121 will be as described in Section 12.

If any withdrawals are made, the Death Benefit, whether Option 1 or Option 2 is in effect, will be less than it would have been if no withdrawals were made. Withdrawals reduce the Death Benefit by reducing:

- (a) the Total Face Amount if Option 1 is in effect, as specified in Section 16; or
- (b) the Policy Value if Option 2 is in effect.

Change of Death Benefit Options

You may request in writing to change your Death Benefit Option from Option 2 to Option 1 at any time after the first Policy Year while the policy is in force. The change will be effective on the next Processing Date following the date we approve the request, and the Total Face Amount after the change will be equal to the Total Face Amount immediately before the change plus the Policy Value as of the effective date of the change. You may not change your Death Benefit Option from Option 1 to Option 2 at any time.

Minimum Death Benefit

The sum of the Death Benefit as described above and the benefit payable upon the death of the Life Insured under any Supplementary Benefit riders will never be less than the Minimum Death Benefit. The Minimum Death Benefit is equal to the Minimum Death Benefit Factor for the Age of the Life Insured multiplied by the greater of the Policy Value or the Cash Surrender Value as defined in Section 7702 of the Internal Revenue Code, or any other equivalent section of the Code, on the date of the death of the Life Insured. The Minimum Death Benefit Factors are shown in Section 2. However, at no time will the Minimum Death Benefit be less than the amount required to maintain qualification of this policy as a life insurance contract for federal income tax purposes. If you elect the Cash Value Accumulation Test as the life insurance qualification test, we reserve the right to modify the Minimum Death Benefit Factors shown in Section 2, retroactively if necessary, to maintain qualification of this policy as a life insurance contract for federal income tax purposes, notwithstanding any other provisions of this policy to the contrary.

To the extent that the Net Amount at Risk associated with the Minimum Death Benefit that results from this calculation exceeds our guidelines and limitations that may be in effect, we reserve the right to:

- (a) distribute to you a portion of the Policy Value such that the Net Amount at Risk associated with the resulting Minimum Death Benefit does not exceed our guidelines and limitations in effect; or
- (b) if we should decide to accept the additional death benefit, it will be subject to our normal underwriting practices, including evidence of insurability.

7. INTEREST ON PROCEEDS

We will pay interest on the Insurance Benefit proceeds paid as stipulated by the state. If the state does not specify the interest rate, we will use the rate for insurance benefits left on deposit with us.

8. PREMIUMS

The Minimum Initial Premium is shown in Section 1. No insurance will take effect under this policy until our underwriters approve issuance of this policy and the conditions specified in the application form have been satisfied, including receipt of at least the Minimum Initial Premium at our Service Office.

Subsequent premiums can be paid at any time at our Service Office, and in any amount subject to the limits described below. On request, we will give you a receipt signed by one of our officers.

8. PREMIUMS (continued)

If coverage under the policy takes effect in accordance with the provisions of the application, we will process any premium payment as of the end of the Business Day the payment is received at our Service Office, subject to the limitations of the life insurance qualification test elected by you and to our maximum limits then in effect, unless one of the following exceptions applies.

- (i) We will process a payment received prior to the Policy Date as if received on the Policy Date.
- (ii) We will process the portion of any premium payment for which we require evidence of the Life Insured's continued insurability on the first Business Day after we have received such evidence and found it satisfactory to us.
- (iii) If our receipt of any premium payment (or portion thereof) would cause the policy not to qualify as a "life insurance contract" under the federal income tax laws, we will not process such payment or portion. However, in the case of certain other tax situations, we will process the payment (or portion thereof) on the first Business Day after we have received satisfactory written instructions from you.

You may pay premiums until the Life Insured reaches Age 121, at which time Monthly Deductions cease and no further premiums may then be paid as described in Section 12.

If any premium payment would result in the Minimum Death Benefit exceeding the Total Face Amount, we reserve the right to either refund the premium or to require additional underwriting, including evidence of insurability, for any increase in the Minimum Death Benefit.

Continuation of Insurance Upon Discontinuance of Premium Payments

If you discontinue paying premiums, we will continue taking the Monthly Deductions from the Policy Value. Your insurance coverage will continue subject to the Grace Period, and Policy Termination provisions in Sections 9, and 10.

9. GRACE PERIOD

Default

The policy and any Supplementary Benefit riders will go into default if, at the beginning of any Policy Month, the Net Cash Surrender Value is less than or equal to zero after we take the Monthly Deduction that is due for that month.

Grace Period Duration

We will allow 61 days from the date the policy goes into default, for you to pay the amount that is required to bring the policy out of default. At least 30 days prior to termination of coverage, we will send notice to your last known address, specifying the amount you must pay to bring the policy out of default. If we have notice of a policy assignment on file at our Service Office, we will also mail a copy of the notice of the amount due to the assignee on record.

Default Payment

The amount required to bring the policy out of default, referred to as the Default Payment, is equal to (a) plus (b) plus (c) where:

- (a) is the amount necessary to bring the Net Cash Surrender Value to zero if it is less than zero, at the date of default;
- (b) is an amount equal to 3 times the Monthly Deductions due on the date of default;
- (c) is the applicable Premium Charge.

When payment is received, any expense charges which are past due and unpaid will be immediately deducted from the Net Policy Value. If the Default Payment has not been paid by the end of the grace period, the policy will terminate. Upon termination of the policy, the remaining Net Cash Surrender Value, if any, will be paid to the Owner. If the Life Insured dies during the grace period, then we will deduct from the Insurance Benefit proceeds all Monthly Deductions due and unpaid as of the date of the Life Insured's death. No Insurance Benefit under the policy or any Supplementary Benefit riders will be in effect after the policy terminates.

10. POLICY TERMINATION

This policy terminates on the earliest of the following events:

- (a) the end of the grace period for which we have not received the amount necessary to bring the policy out of default;
- (b) surrender of the policy for its Net Cash Surrender Value; or
- (c) the death of the Life Insured.

11. REINSTATEMENT

If the policy terminates at the end of a grace period in which you did not make a required payment, the policy may be reinstated within 3 years from the date of default. The policy cannot be reinstated if it has been surrendered for its Net Cash Surrender Value.

The requirements for reinstatement are as follows:

- (1) we must receive written request for reinstatement;
- (2) reinstatement is subject to our normal underwriting practices, including evidence of insurability for the Life Insured and for any insureds covered under any Supplementary Benefit rider that you wish to reinstate;
- (3) we must receive at our Service Office a premium equal to the amount that was required to bring the policy out of default immediately prior to termination, plus the amount needed to keep the policy in force for the next 3 Policy Months.

Requirements (2) and (3) must be satisfied within 60 days after the date we receive written request for reinstatement.

If we approve your request,

- (a) the reinstatement date will be the date we receive the required payment at our Service Office;
- (b) the Base Face Amount and any Supplemental Face Amount will be reinstated to the same amounts as they were on the date the policy terminated;
- (c) the Policy Value on the date of reinstatement, prior to the crediting of any Net Premium paid on the reinstatement, will be equal to the Policy Value on the date the policy terminated.

If a Schedule of Supplemental Face Amounts is shown in Section 1 which includes increases that would have otherwise become effective except for this policy having been terminated after being in default, such increases in Supplemental Face Amount will be effective on the next Annual Processing Date after the reinstatement date.

12. COVERAGE AT AND AFTER AGE 121

Provided the policy is in force at and after the Life Insured's Age 121, we will continue the policy subject to the stipulations stated below.

Death Benefit

Any Supplemental Face Amount will be terminated, thereby reducing the Death Benefit by such amount. Apart from this change, the Death Benefit will be determined in the same respect as specified in Section 6.

Premium and Monthly Deductions

We will not accept any further premium payments and we will cease to take Monthly Deductions for charges listed in Section 1.

Credit Interest

We will continue to credit interest monthly to the Policy Value.

12. COVERAGE AT AND AFTER AGE 121 (continued)

Policy Debt and Default

Loans will continue to be allowed. Loan interest will continue to be charged if there is an outstanding loan. Loan repayments will be accepted. The Policy will go into default at any time the Policy Debt exceeds the Policy Value, and Section 9, Grace Period and Section 15, Loans, will apply.

Withdrawals

Withdrawals will not be allowed.

13. POLICY VALUE

Net Premiums Added

When we receive your premium payments at our Service Office, we deduct a Premium Charge which will not exceed the amount shown in Section 1 and add the balance remaining (the Net Premium) to your Policy Value. We will do this before we take any deductions due on that Business Day. However, we will add any Net Premiums received before the Policy Date to your Policy Value as of the Policy Date.

While a loan exists, we will treat the amounts you pay as premiums unless you request in writing that they be treated as loan repayments. If you instruct us in writing to do so, we will first deduct from such payments the amount of accrued interest on loans and then deduct the amount specified as a loan repayment before applying any balance remaining as a premium payment.

Monthly Deductions

A deduction is due and will be taken from your Policy Value as of the Policy Date and as of each applicable subsequent Processing Date. Monthly Deductions are calculated from the Policy Date. If, at your request, we set the Policy Date to a date which precedes the date on which we receive the initial premium, Monthly Deductions due for the period prior to receipt of the initial premium will be taken on the later of the date we receive the initial premium and the date our underwriters approve issuance of this policy.

Monthly Deductions are due until the Policy Anniversary on which the Life Insured reaches Age 121 at which time we will cease to take any further Monthly Deductions as described in Section 12.

The Monthly Deductions for any Policy Month that will be deducted from your Policy Value consists of charges (a) through (e) listed below, where:

- (a) is the Base Face Amount Charge, if any;
- (b) is the Supplemental Face Amount Charge, if any;
- (c) is the Administrative Charge;
- (d) is the sum of the charges for riders which are part of the policy, if any, provided such charges are deducted from the Policy Value; and
- (e) is the Cost of Insurance Charge, as described below.

Cost of Insurance Charge

The rates for the Cost of Insurance Charge, as of the Policy Date and subsequently for each increase in Total Face Amount, are based on the Life Insured's sex, if applicable, Age, Risk Classification, and duration that the coverage has been in force.

The Cost of Insurance Charge for a specific Policy Month is the charge for the Net Amount at Risk, including any Additional Ratings and any Supplementary Benefit riders which are part of the policy. The charge for the Net Amount at Risk is an amount equal to the per dollar cost of insurance rate for that month multiplied by the Net Amount at Risk. The Cost of Insurance rate will be based on our expectations of future mortality, persistency, investment earnings, expense experience, capital and reserve requirements, and tax assumptions. The Maximum Monthly Rates at any Age are shown in Section 2 as a rate per \$1,000 of Net Amount at Risk. To get the maximum rate per dollar, the rate shown must be divided by 1,000. Each Cost of Insurance Charge is deducted in advance of the applicable insurance coverage for which we are at risk.

13. POLICY VALUE (continued)

The Cost of Insurance calculation will reflect any adjustment for the Minimum Death Benefit.

We review our Cost of Insurance rates from time to time, and may re-determine Cost of Insurance rates at that time on a basis that does not discriminate unfairly within any class of life insureds.

Net Amount at Risk

The Net Amount at Risk is the amount determined by subtracting (a) from the greater of (b) or (c) where:

- (a) is the Policy Value at the end of the immediately preceding Business Day less all charges due on the Policy Date or subsequent Processing Date;
- (b) is the Total Face Amount plus the death benefit payable under any Supplementary Benefit riders where charges are deducted from the Policy Value and are based on the Net Amount at Risk, divided by the Death Benefit Discount Factor shown in Section 1, plus the Policy Value for policies electing Death Benefit Option 2; and
- (c) is the amount defined in (a) multiplied by the applicable Minimum Death Benefit Factor for the Life Insured's Age as shown in Section 2.

14. LOAN ACCOUNT AND GUARANTEED INTEREST ACCOUNT

The Policy Value at any time is equal to the sum of values you have in the Loan Account and the Guaranteed Interest Account.

Loan Account Value

The amount you have in the Loan Account at any time equals:

- (a) amounts transferred to it for loans or borrowed loan interest; plus
- (b) interest credited to it; less
- (c) amounts transferred from it for loan repayment.

For details regarding the Loan Account, see Section 15.

Guaranteed Interest Account Value

The amount you have in the Guaranteed Interest Account at any time equals:

- (a) Net Premiums; plus
- (b) interest credited to it; plus
- (c) amounts transferred to it for loan repayments; less
- (d) amounts deducted from it; less
- (e) amounts transferred from it for loans; less
- (f) amounts withdrawn from it.

We will determine the rate or rates of interest to be credited to the Guaranteed Interest Account. Interest will be credited no less frequently than annually. Interest is nonforfeitable after crediting. The rate or rates of interest will be determined prospectively and will be based on our expectations for the Guaranteed Interest Account's future investment earnings, persistency, mortality, expense and reinsurance costs and future tax, reserve, and capital requirements, but in no event will the credited interest rate be less than the Guaranteed Interest Account Annual Rate shown in Section 1. The rate or rates of interest will be determined on a uniform basis for life insureds with the same timing and amount of premium, same amount of Policy Debt, and whose policies have been in force for the same length of time. For all transactions, interest is calculated from the date of the transaction.

15. LOANS

At any time while this policy is in force and there is Available Loan Value, you can get a loan by written request. Each loan must be for at least the Minimum Loan Amount shown in Section 1. We may require a loan agreement from you as the policy is the only security for the loan. We may defer loans as provided by law or as provided in Section 23. Loans may not be made if the policy is in the Grace Period as described in Section 9.

Available Loan Value

The Available Loan Value on any date will be an amount equal to (i) the Net Cash Surrender Value, less (ii) the Monthly Deductions then being deducted from the Policy Value multiplied by the number of months remaining in the Policy Year, less (iii) an amount determined as follows:

- (a) Deduct (ii) above from (i) above.
- (b) Multiply the result by the difference between the effective annual rate then being charged on loans and the effective annual rate then being credited on the Loan Account.

In no event, however, will the Available Loan Value be less than 90% of the Net Cash Surrender Value. Values will be determined, subject to Section 23, as of the end of the Business Day on which the loan application is received at our Service Office.

Loan Account

When you take out a loan, or when loan charges are borrowed, we will transfer amounts from the Guaranteed Interest Account into the Loan Account. Amounts we transfer into the Loan Account cover the loan principal.

Interest is credited to the Loan Account and interest is also charged on the Policy Debt, as described in the Loan Interest Charged and Loan Interest Credited provisions.

Loan Interest Charged

The loan interest rate is variable. It will be set each year at your Policy Anniversary and it will not change during the year.

The loan interest rate charged will not exceed the greater of (a) and (b), where:

- (a) is 4% per annum; and
- (b) is the Moody's Corporate Bond Yield Average-Monthly Average Corporates for the calendar month ending two months before the beginning of the month in which your Policy Anniversary falls. For example, if your Policy Anniversary is in April; we would use the Average for January.

If the maximum is at least one-half of one percent smaller than the rate we have set for the previous Policy Year, we will reduce the rate to a rate no more than that maximum. If the maximum is at least one-half of one percent greater than the rate we have set for the previous Policy Year, we will increase the rate to a rate no more than that maximum.

Moody's Corporate Bond Yield Average-Monthly Average Corporates referred to above is published in the United States by Moody's Investors Service, Inc. In the event it is no longer published, we will use a similar average published by another United States bond rating agency.

Interest will accrue daily on loans. Loan interest will be payable on each Annual Processing Date and on the date the loan is settled. Accrued interest may be paid at any time at the equivalent effective rate. In the event that you do not pay the loan interest charged in any Policy Year, it will be borrowed against the policy and added to the Policy Debt in arrears at the Policy Anniversary.

We will increase the Loan Interest Rate at any time we determine that the rate being charged could cause a loan to be taxable under any applicable ruling, regulation, or court decision. In such case, we will increase the Loan Interest Rate to an amount that we determine would result in the transaction being treated as a loan under federal tax law.

Loan interest will continue to be charged, as described in Section 12, when Monthly Deductions and premium payments cease at the Life Insured's Age 121.

15. LOANS (continued)

Loan Interest Credited

Loan interest will accrue daily to amounts in the Loan Account. The effective loan interest rate credited is the difference between the effective loan interest rate charged and the Loan Interest Credited Differential. The difference, in terms of dollars, is the cost of keeping a loan. The differential will not exceed the Maximum Loan Interest Credited Differential shown in Section 1.

Loan Repayment

You may repay the Policy Debt in whole or in part at any time prior to the death of the Life Insured and while the policy is in force. When you make a loan payment or repay a loan, we will transfer an amount equal to the amount received, less the loan interest charges specified above, from the Loan Account to the Guaranteed Interest Account.

Subject to any rider, endorsement, or other provisions, while a loan exists, we will treat any amounts you pay as premiums, unless you request in writing that they be treated as loan repayments.

16. SURRENDERS AND WITHDRAWALS

Surrender of the Policy

You may surrender this policy upon written request for its Net Cash Surrender Value at any date prior to the death of the Life Insured. We will determine the Net Cash Surrender Value on the Surrender Date. We will process the request and pay the Net Cash Surrender Value only if we have not received due proof that the Life Insured died prior to the Surrender Date. After we receive your written request to surrender the policy, no insurance will be in force.

Withdrawals

Once per Policy Month after the first Policy Year, you may request a withdrawal of part of the Net Cash Surrender Value if available. Withdrawals are subject to the following conditions:

- (a) without our approval, each withdrawal must be for at least the Minimum Withdrawal Amount shown in Section 1;
- (b) after the withdrawal, the remaining Net Cash Surrender Value must be at least equal to 3 times the Monthly Deductions at the time of the withdrawal;
- (c) we will process the withdrawal, thereby reducing the Policy Value, as of the end of the Business Day on which we receive your written request;
- (a) we will reduce the amount of the withdrawal if it would otherwise cause the Base Face Amount to fall below the Minimum Base Face Amount shown in Section 1.

If Death Benefit Option 1 is in effect at the time of the withdrawal, the Total Face Amount of the policy will be reduced:

- (a) by the amount of the withdrawal, if at the time of the withdrawal the Death Benefit equals the Total Face Amount; otherwise
- (b) by the amount, if any, by which the withdrawal exceeds the difference between the Minimum Death Benefit and the Total Face Amount, divided by the applicable Minimum Death Benefit Factor for the Life Insured's Age as shown in the Table of Rates in Section 2.

Withdrawals will reduce any Supplemental Face Amount first, and then the Base Face Amount. We reserve the right to allow a reduction in Base Face Amount prior to fully reducing the Supplemental Face Amount. If the Death Benefit on any given day is equal to the Policy Value times the applicable Minimum Death Benefit Factor, withdrawals on such day will reduce the Death Benefit by the amount withdrawn times the applicable Minimum Death Benefit Factor until the Death Benefit is equal to the Total Face Amount. Your Death Benefit will continue to be determined in accordance with Sections 6 and 12, subject to these provisions.

If Death Benefit Option 2 is in effect, an amount equal to any withdrawal will be deducted from the Policy Value. Withdrawals will not affect the Total Face Amount. Your Death Benefit will continue to be determined in accordance with Sections 6 and 12.

17. OWNER AND BENEFICIARY

Until the Life Insured's death, with the written consent of any irrevocable beneficiaries, you can receive any amount payable under the policy and exercise all rights and privileges granted by the policy.

Change of Owner

Until the Life Insured's death, you can change the ownership of the policy by written request. The change will take effect as of the date you signed the written request. It will not apply to any payments we made or any action we may have taken before we received your written request at our Service Office.

Trustee Owner

Should the owner be a trustee, payment to the trustee(s) of any amount to which the trustee(s) is (are) entitled under the policy, either by death or otherwise, will fully discharge us from all liability under the policy to the extent of the amount so paid.

Joint Ownership

Two or more owners will own the policy as joint tenants with right of survivorship, unless otherwise requested on the application or in any subsequent assignment of the policy. On death of any of the owners, the deceased owner's interest in the policy passes to the surviving owner(s).

Successor Owner

If an owner dies prior to the death of the Life Insured, a named successor owner will, if then living, have all the owner's rights and interest in the policy. The owner, with the consent of any irrevocable beneficiary, can cancel or change the designation of successor owner prior to the death of the Life Insured by agreement in writing with us.

The following four provisions will apply unless there is a beneficiary designation in force that provides otherwise.

Beneficiary Classification

You can appoint beneficiaries for the Insurance Benefit in three classes: primary, secondary, and final. Beneficiaries in the same class will share equally in the Insurance Benefit payable to them.

Payment to Beneficiaries

We will pay the Insurance Benefit:

- (a) to any primary beneficiaries who are alive when the Life Insured dies; or
- (b) if no primary beneficiary is then alive, to any secondary beneficiaries who are then alive; or

if no primary or secondary beneficiary is then alive, to any final beneficiaries who are then alive.

Change of Beneficiary

Until the Life Insured's death, you can change the beneficiary by written request unless you make an irrevocable designation. We are not responsible if the change does not achieve your purpose. The change will take effect as of the date you signed such request. It will not apply to any payments we made or any action we may have taken before we received your written request.

Death of Beneficiary

If no beneficiary is alive when the Life Insured dies, the Insurance Benefit will be payable to you; or if you are the Life Insured, to your estate. Unless otherwise provided, if a beneficiary dies before the seventh day after the death of the Life Insured, we will pay the Insurance Benefit as if the beneficiary had died before the Life Insured.

18. ASSIGNMENT

Your interest in this policy may be assigned with the written consent of any irrevocable beneficiary. Your interest, any interest of the Life Insured and of any revocable beneficiary shall be subject to the terms of the assignment, but such assignment shall not affect the interest of any irrevocable beneficiary.

We will not be on notice of any assignment unless it is in writing, nor will we be on notice until a duplicate of the original assignment has been filed at our Service Office. We assume no responsibility for the validity or sufficiency of any assignment.

19. MISSTATEMENTS

If the age or sex of the Life Insured was misstated in the application, we will, if necessary, change the Base Face Amount, any Supplemental Face Amount, and every other benefit to that which would have been purchased at the correct age or sex by the most recent Cost of Insurance Charge.

20. SUICIDE

If the Life Insured commits suicide, while sane or insane, within 2 years from the Issue Date, the policy will terminate on the date of such suicide and we will pay (in place of all other benefits, if any) an amount equal to the premiums paid less the amount of any Policy Debt on the date of death and less any withdrawals.

If the Life Insured commits suicide, while sane or insane, after 2 years from the Issue Date and within 2 years from

- (a) the date we approve a schedule of increasing Supplemental Face Amount;
- (b) the effective date of any unscheduled increase in Supplemental Face Amount; or
- (c) the date of an increase in Death Benefit resulting from any payment of premium we are authorized to refuse under Section 4;

the benefits payable under the policy will not include the amount of such Death Benefit increase but will include the amount of premium that pertains to the increase.

We reserve the right under this provision to obtain evidence of the manner and cause of death of the Life Insured.

21. INCONTESTABILITY

This policy shall be incontestable after it has been in force during the lifetime of the Life Insured for two years from the Issue Date, except for fraud or policy termination, or any provision for reinstatement or policy change requiring evidence of insurability.

In the case of reinstatement or any policy change requiring evidence of insurability, the contestable period shall be two years from the effective date of such reinstatement or policy change. For a policy change involving the approval of a schedule of increasing Supplemental Face Amount, the contestable period shall be two years from the date we approve such schedule.

Any premium payment which we accept subject to insurability, and any increase in the Death Benefit resulting from such payment, shall be considered a policy change for purposes of this Section.

We reserve the right under this provision to obtain evidence of the manner and cause of death of the Life Insured.

22. THE CONTRACT

The written application for the policy is attached at issue. The entire contract between the applicant and us consists of the policy, such application, and any riders and endorsements. However, additional written requests or applications for policy changes or acceptance of excess payment may be submitted to us after issue and such additional requests may become part of the policy. All statements made in any application shall, in the absence of fraud, be deemed representations and not warranties. We will use no statement made by or on behalf of the Life Insured to defend a claim under the policy unless it is in a written application.

An exchange of this policy for a new policy on a different plan may be made by agreement between you and us in accordance with our published rules in effect at that time.

We reserve the right to make any changes necessary in order to keep this policy in compliance with any changes in federal or state tax laws. Other changes in this policy may be made by agreement between you and us. Only the President, Vice President, the Secretary, or an Assistant Secretary of the Company has authority to waive or agree to change in any respect any of the conditions or provisions of the policy, or to extend credit or to make an agreement for us.

23. RIGHT TO POSTPONE PAYMENT OF BENEFITS

We reserve the right to postpone the payment of Net Cash Surrender Value, withdrawals, and policy loans, for up to six months after we receive such written request, except when required to make a premium payment.

24. CLAIMS OF CREDITORS

The proceeds and any income payments under the policy will be exempt from the claims of creditors to the extent permitted by law. These proceeds and payments may not be assigned or withdrawn before becoming payable without our agreement.

25. REPORTS TO OWNER

Within 30 days after each Policy Anniversary, we will send you a report at no charge showing:

- (a) the Death Benefit;
- (b) the Policy Value;
- (c) any Policy Debt;
- (d) the premiums paid for the year; and
- (e) any further information required by law.

Upon request, we will provide you with a report of projected future values. We will provide one report annually without charge. For additional reports you request, we reserve the right to charge a reasonable fee, not to exceed \$50.

26. HOW VALUES ARE COMPUTED

We provide Net Cash Surrender Values that are at least equal to those required by law. We base minimum Net Cash Surrender Values on the Commissioners 2001 Standard Ordinary Sex Distinct ANB Aggregate Ultimate Mortality Tables, with substandard ratings as applicable. However, if this policy is issued on a unisex basis, we base minimum Net Cash Surrender Values on the Commissioners 2001 Standard Ordinary Male Mortality Table, with substandard ratings as applicable. We also use these tables in determining Guaranteed Maximum Cost of Insurance Charges. Reserves will be at least as great as the minimum required by law.

A detailed statement of the method of computing the values of this policy has been filed with the insurance department of the state shown in Section 1.

Communications about this policy may be sent to the Company's Service Office, which is currently at [197 Clarendon Street, Boston Massachusetts, 02116-5010. Our toll-free number is 1-800-521-1234].

Flexible Premium Adjustable Life Insurance policy
Death Benefit payable at death of Life Insured
Not eligible for dividends
Benefits, Premiums, and the Risk Classification are shown in Section 1.



Life Insurance Company (U.S.A.)
A Stock Company

SUPPLEMENTARY BENEFIT

ENHANCED CASH VALUE RIDER

ADDITIONAL CASH VALUE PAYABLE UPON SURRENDER OF THE POLICY AS DEFINED AND LIMITED

This rider is made a part of the policy to which it is attached, in consideration of: (a) the application, a copy of which is attached to and made a part of the policy; and (b) the Rider Charge as shown in the Policy Specifications page for this rider. It takes effect at the same time as your policy on the Policy Date. Should any provisions in the policy conflict with this rider, the provisions of this rider will prevail.

The Owner under this rider will be the Owner under the policy to which this rider is attached.

BENEFIT

We agree, subject to the terms and conditions of this rider and the policy to pay, in addition to the Net Cash Surrender Value otherwise payable, the amount of Enhanced Cash Value benefit to the Owner, if all the following conditions are met:

- (a) your written request for a full surrender of the policy is received at our Service Office prior to the death of the Life Insured (or Surviving Life Insured if this rider is attached to a survivorship policy);
- (b) such surrender is not the result of an exchange under Section 1035 of the Internal Revenue Code; and
- (c) this rider has not terminated under the "Termination" provision below.

BENEFIT AMOUNT

The Enhanced Cash Value benefit shall be an amount equal to (a) times (b) where:

- (a) is the sum of the cumulative premiums paid in the first two Policy Years up to the Target Premium shown in the Table of Values section of the policy;
- (b) is a Percentage that varies by Policy Year as shown in the Policy Specification page for this rider.

We reserve the right to reduce Percentage (b) to as low as zero, but not until at least 30 days after we have sent you a revised Policy Specifications page for this rider that shows the reduced values. Any such reduced schedule will apply uniformly to all members of the same classification. However, in no event will the minimum Enhanced Cash Value benefit be less than the Rider Charge shown in the Policy Specifications page for this rider.

EFFECT ON MINIMUM DEATH BENEFITS

While this rider is in effect, the Minimum Death Benefit under the policy is equal to the Minimum Death Benefit Factor for the Age of the Life Insured (or of the Surviving Life Insured, if applicable) multiplied by the greater of (i) the Enhanced Cash Value benefit plus the Net Cash Surrender Value unreduced for any Policy Debt, (ii) the Policy Value or (iii) the Cash Surrender Value as defined in Section 7702 of the Internal Revenue Code, or any other equivalent section of the Code, on the date of death of the Life Insured (or the date of death of the Surviving Life Insured if this rider is attached to a survivorship policy). The Insurance Benefit payable is reduced by any Policy Debt as specified under the Insurance Benefit section of the policy.

EFFECT ON NET AMOUNT AT RISK

For purposes of computing any policy death benefit under Option 1 or Option 2 (as described under the Insurance Benefit section of the policy) to be paid in the event of death of the Life Insured (or Surviving Life Insured if the rider is attached to a survivorship policy), within the first [nine] Policy Years, and only for such purposes, the Policy Value will be increased by the amount of the Enhanced Cash Value benefit. Calculation of the Net Amount at Risk (as described in the Net Amount at Risk section of the policy) within the first [nine] Policy Years will be based on such increased Policy Value.

EFFECT ON WITHDRAWALS AND LOAN VALUE

Neither the amount available for Withdrawal or the Loan Value of the policy will in any way be increased due to this Enhanced Cash Value Rider.

DEFERRAL OF DETERMINATIONS

We may defer the payment of any Enhanced Cash Value benefit in the same manner that we may defer payment of any Net Cash Surrender Value under the policy.

TERMINATION

This rider will terminate without value, on the earliest of:

- (a) the end of the [ninth] Policy Year;
- (b) the exchange, or termination of the policy;
- (c) absolute assignment of the policy;
- (d) death of the Life Insured (or Surviving Life Insured if this rider is attached to a survivorship policy); or
- (e) your written request to discontinue this rider.

REINSTATEMENT

This rider will be reinstated if it terminated with the policy at the end of a grace period in which we did not receive the amount necessary to bring the policy out of default, and the policy is reinstated prior to the end of the [ninth] Policy Year.

Signed for the Company by:



SUPPLEMENTARY BENEFITS

Benefit	Enhanced Cash Value Rider
Life Insured [Lives Insured] Details	Life Insured's Name [Lives Insured Names] are shown elsewhere in the Policy Specifications
Rider Charge	2% of the cumulative premiums paid in the first two Policy Years up to the Target Premium shown in the Table of Values section of the policy.
Benefit Amount	The Enhanced Cash Value Benefit Amount shall be an amount equal to (a) times (b) where: (a) is the sum of the cumulative premiums paid in the first two Policy Years up to the Target Premium shown in the Table of Values section of the policy; (b) is a percentage that varies by Policy Year as follows:

Policy Year

Percentage

1	35%
2	40%
3	40%
4	35%
5	30%
6	25%
7	15%
8	10%
9	5%
10+	0%

SERFF Tracking Number: MANU-126060083 State: Arkansas
 Filing Company: John Hancock Life Insurance Company (U.S.A.) State Tracking Number: 41813
 Company Tracking Number: 09MAJULX & 09MECVR
 TOI: L09I Individual Life - Flexible Premium Sub-TOI: L09I.001 Single Life
 Adjustable Life
 Product Name: 09MAJULX & 09MECVR
 Project Name/Number: 09MAJULX & 09MECVR/09MAJULX & 09MECVR

Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification		
Comments:		
Attachments:		
readability cert ar.pdf		
AR - cert re Reg19 unfair sex dis. ar.pdf		
AR - compcert 23-79-138 reg 49 ar.pdf		
AR - actcert re valuation and nonforfeiture ar.pdf		

	Item Status:	Status Date:
Satisfied - Item: Application		
Comments:		
Attachment:		
NB5000US(12-2007).pdf		

	Item Status:	Status Date:
Bypassed - Item: Outline of Coverage		
Bypass Reason: not applicable		
Comments:		

	Item Status:	Status Date:
Satisfied - Item: 09MAJULX and 09MECVR - Actuarial Memorandum and Reserve Statement		
Comments:		
Attachments:		
Generic Actuarial Memo 09MAJULX.pdf		
Actuarial Memo 09MECVR.pdf		

SERFF Tracking Number: MANU-126060083 State: Arkansas
Filing Company: John Hancock Life Insurance Company (U.S.A.) State Tracking Number: 41813
Company Tracking Number: 09MAJULX & 09MECVR
TOI: L09I Individual Life - Flexible Premium Sub-TOI: L09I.001 Single Life
Adjustable Life
Product Name: 09MAJULX & 09MECVR
Project Name/Number: 09MAJULX & 09MECVR/09MAJULX & 09MECVR

Item Status:

**Status
Date:**

Satisfied - Item: Statement of Variability

Comments:

Attachment:

SOV - Generic _MULX_.pdf

JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)

**READABILITY CERTIFICATE
FOR THE STATE OF ARKANSAS**

I, Helene Landow, an officer of JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.), hereby certify that the forms listed below have the following readability scores as calculated by the Flesch Reading Ease Test and that these forms meet the requirements of your readability legislation.

FORM NUMBER	READABILITY SCORE
09MAJULX	49
09MECVR	49

March 10, 2009
Date



Helene Landow, FLMI, ACP
Director, Contracts and Compliance

JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)

COMPLIANCE CERTIFICATION

STATE OF ARKANSAS

Form	Description
09MAJULX 09MECVR	Flexible Premium Adjustable Life Insurance Policy, N.P. Enhanced Cash Value Rider

John Hancock Life Insurance Company (U.S.A.) hereby certifies to its understanding of the filing requirements of Arkansas Regulation 19 §10B re unfair sex discrimination in the sale of insurance and that this filing meets the provisions of this rule, as well as all applicable requirements of the Arkansas Insurance Department.

March 10, 2009
Date



Helene Landow, FLMI, ACP
Director, Contracts and Compliance

JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)

CERTIFICATE OF COMPLIANCE

STATE OF ARKANSAS

Form	Description
09MAJULX	Flexible Premium Adjustable Life Insurance Policy, N.P.
09MECVR	Enhanced Cash Value Rider

I certify to the best of my knowledge and belief as to the accuracy and compliance of this filing; further, I certify that this filing is in compliance with Ark. Code Ann. 23-79-138 which requires that certain information accompany every policy and Regulation 49 which requires that a Life and Health guaranty notice be given to each policyowner.

March 10, 2009
Date



Helene Landow, FLMI, ACP
Director, Contracts and Compliance

STATE OF ARKANSAS

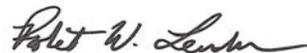
CERTIFICATE OF COMPLIANCE

JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.) hereby certifies that its policy form 09MAJULX complies with Section 6 and 7 of Regulation 34 (valuation and non-forfeiture).

We certify that in no case shall the reserves be less than the actual cash surrender values provided for under policy contract 09MAJULX.

We further certify that we have read the "Guidelines for non-guaranteed cost on participating and non-participating life insurance" (Bulletin 11-83), and that policy 09MAJULX complies with them.

JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)



Robert Lendrum, ASA, MAAA
Senior Actuarial Consultant

March 12, 2009
Date



Service Office:
 Life New Business
 197 Clarendon Street
 Boston MA 02116-5010

Application for Life Insurance

- John Hancock Life Insurance Company (U.S.A.)
 - John Hancock Variable Life Insurance Company
 - John Hancock Life Insurance Company
- (hereinafter referred to as The Company)

Print and use black ink. Any changes must be initialed by the Proposed Life Insured(s) and Owner.

PROPOSED LIFE INSURED(S) LIFE ONE

1. a) Name JOHN M. DOE
First Middle Last

b) Date of Birth OCT 04 1967 c) Sex M F
month day year

d) Place of Birth ANYTOWN USA
State Country

e) Citizenship U.S. Other

f) Social Security Number (SSN), if applicable 1 2 3 4 5 6 7 8 9

g) Driver's License No. 1234567890 State AS

h) Primary Residence 1999 MARCH STREET
Address - Street No. & Name Apt. No.
ANYTOWN, ANystate 12345
City State Zip Code

i) Years at this Address 5

j) Tel. Nos. 905 123-4567 905 123-4567
Home Business

k) If you live at your primary residence less than 6 months per year, provide the address for your secondary residence.
 Secondary Residence 1999 APRIL STREET
Address - Street No. & Name Apt. No.
ANYTOWN, ANystate 23456
City State Zip Code

l) Years at this Address 5

m) Occupation COMPANY PRESIDENT
ABC COMPANY
Name of Employer

LIFE TWO (Survivorship)

2. a) Name _____
First Middle Last

b) Date of Birth _____ c) Sex M F
month day year

d) Place of Birth _____
State Country

e) Citizenship U.S. Other

f) Social Security Number (SSN), if applicable _____

g) Driver's License No. _____ State _____

h) Primary Residence _____
Address - Street No. & Name Apt. No.

City State Zip Code

i) Years at this Address _____

j) Tel. Nos. _____
Home Business

k) If you live at your primary residence less than 6 months per year, provide the address for your secondary residence.
 Secondary Residence _____
Address - Street No. & Name Apt. No.

City State Zip Code

l) Years at this Address _____

m) Occupation _____
Name of Employer

OWNER – Complete only if Owner is other than Proposed Life Insured(s)

If Trust Owner, complete questions 3. a), d) and e) and Trust Certification PS5101.

Trust Agreement may be required.

Provide all details as above for other Owner in Special Requests on Page 4.

3. a) Name _____

b) Date of Birth _____ c) Relationship to Proposed Life Insured(s) _____ d) Social Security/Tax ID Number, if applicable _____
month day year

e) Address _____
Street No. & Name Apt. No. City State Zip Code

4. Multiple Owners
 Type of ownership Joint with right of survivorship Tenants in common

BENEFICIARY INFORMATION – Subject to change by Owner

List additional beneficiaries in Special Requests on Page 4.

5. a) Name JAMES M. DOE Primary SON 100 %
First Middle Last Relationship to Proposed Life Insured(s) Percentage

b) Name _____ Primary _____ %
First Middle Last Relationship to Proposed Life Insured(s) Percentage
 Secondary _____ %
Relationship to Proposed Life Insured(s) Percentage

EXISTING AND PENDING INSURANCE

If more space is required attach additional page that has been signed and dated by Owner if necessary.

6. a) Provide information for each policy in force on the Proposed Life Insured(s) with all companies, including any policy that has been sold, assigned, or settled to or with a settlement or viatical company or any other person or entity. **NOT APPLICABLE**

Proposed Life Insured	Company	Insurance		Issue Date			To Remain in Force?		Amount Including Riders
		Personal	Business	month	day	year	Yes	No	
<input type="checkbox"/> One <input type="checkbox"/> Two		<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	\$
<input type="checkbox"/> One <input type="checkbox"/> Two		<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	\$
<input type="checkbox"/> One <input type="checkbox"/> Two		<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	\$
<input type="checkbox"/> One <input type="checkbox"/> Two		<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	\$
<input type="checkbox"/> One <input type="checkbox"/> Two		<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	\$
<input type="checkbox"/> One <input type="checkbox"/> Two		<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	\$

- b) Have you ever had an application for life insurance declined, postponed, rated substandard or offered with a reduced face amount?

Life One No Yes – give details _____

Life Two No Yes – give details _____

- c) Including this application, total insurance currently applied for with all companies (**not including informal inquiries**). Provide name of Life Insurance Company and amount applied for.

Life One		Life Two	
Company	Amount Including Riders	Company	Amount Including Riders
JOHN HANCOCK	\$ 100,000		\$
	\$		\$
	\$		\$

- d) Of the total amount applied for in c) above including this application, what is the maximum that you will accept?

Life One	Life Two
\$ 100,000	\$

JUVENILE INSURANCE

Complete e) & f) if juvenile insurance is applied for.

- e) Are all siblings equally insured? Yes No

- f) Amount of life insurance currently in force or pending on parent(s)/guardian(s)? \$ _____

If none, provide reason. _____

REPLACEMENTS – OWNER

7. Will this insurance replace existing policies or are you considering using funds from existing policies to pay premiums due on the new policy or contract?

Yes No If 'Yes', please complete the **IMPORTANT NOTICE: Replacement of Life Insurance or Annuities (Standard Form), NB5017**.

FINANCIAL QUESTIONS

Copies of financial statements, estate analyses, contractual agreements may be required.

8. Is there, or are you considering entering into, an understanding or agreement providing for any person or entity, other than the Owner and beneficiaries specified in this application, to have any right, title or other legal or beneficial interest in any policy issued on the life of the Proposed Life Insured(s) as a result of this application?

No Yes - If 'Yes', provide details _____

9. Have you been offered any money or other considerations by any person or entity in connection with this application?

No Yes - If 'Yes', provide details _____

- 10.a) What is the source of the premiums for the policy(ies) currently applied for? **SELF FUNDED**

- b) Will the Owner be receiving funding for the premiums from an individual and/or entity other than the Proposed Life Insured(s) or the Proposed Life Insured's employer?

Yes - If 'Yes', answer question 11 below.

No - If 'No', proceed to question 12.

- 11.a) Will the premiums be financed through a loan?

No - If 'No' describe the funding arrangement _____

Yes - If 'Yes' provide the loan details in question 11 b), c), d), e) and f) below.

- b) What is the annual interest rate? _____ %

- c) In addition to repayment of principal and interest, are there other fees, charges or other consideration to be paid?

No Yes - If 'Yes', provide details _____

FINANCIAL QUESTIONS continued

Copies of financial statements, estate analyses, contractual agreements may be required.

11. d) What is the duration of the loan? _____
 e) Who is the lender? _____
 f) What amount and type of collateral is required to secure the loan? \$ _____
Amount Type of Collateral
12. a) What is the purpose of this insurance? _____
(e.g. estate conservation, buy-sell, keyperson)
- | | Life One | Life Two |
|---|----------|----------|
| b) Gross annual earned income (salary, commissions, bonuses, etc.) | \$ _____ | \$ _____ |
| c) Gross annual unearned income (dividends, interest, gross real estate income, etc.) | \$ _____ | \$ _____ |
- d) Household net worth (combined) \$ _____
 e) In the last 5 years, has the Proposed Life Insured(s) or any business of which he/she is a partner/owner/executive had any major financial problems (bankruptcy, etc.)? Life One No Yes - give details _____
 Life Two No Yes - give details _____

BUSINESS FINANCIAL QUESTIONS

Complete for ALL Business Insurance.

Copies of financial statements may be required.

- | | Current Year | Previous Year | |
|--------------------------------------|--------------|---------------|--|
| 13. a) Assets | \$ _____ | \$ _____ | f) How was the amount applied for determined? _____ |
| b) Liabilities | \$ _____ | \$ _____ | g) What percentage of the business is owned by the Proposed Life Insured(s)? _____ % |
| c) Gross Sales | \$ _____ | \$ _____ | h) Are other partners/owners/executives insured or applying for life insurance with any company? <input type="checkbox"/> No <input type="checkbox"/> Yes - give details _____ |
| d) Net Income | \$ _____ | \$ _____ | |
| e) Fair Market Value of the business | \$ _____ | \$ _____ | |

LIFESTYLE QUESTIONS

Please provide details in No. 18 for 'Yes' answers to Lifestyle Questions.

14. Do you expect to travel outside the U.S. or Canada, or change your country of residence in the next 2 years?
15. a) Have you flown as a student pilot, licensed pilot, or crew member in any aircraft, including ultralight planes, in the last 2 years?
 If 'Yes', please complete **Aviation Questionnaire NB5009**.
- b) Have you engaged in any form of motor vehicle or power boat racing, sky diving/parachuting, skin or scuba diving, hang-gliding, mountain climbing, or any other hazardous activities in the last 2 years?
 If 'Yes', please complete **Avocation Questionnaire NB5010**.
16. a) Have you been cited for 2 or more moving violations within the last 2 years?
 b) Have you been cited for driving while intoxicated or while otherwise impaired?
17. In the last 10 years, have you been convicted of a felony offense?

Life One	Life Two
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

18.	Question No.	Life One	Question No.	Life Two

PRIMARY PHYSICIAN – PROPOSED LIFE INSURED(S)

LIFE ONE

19. Provide name and address of primary physician.

Name ARTHUR H SMITH
First Middle Last

Address 123 MAIN STREET
Street No. & Name Suite No.

ANYTOWN, ANYSTATE 12347
City State Zip Code

LIFE TWO

20. Provide name and address of primary physician.

Name _____
First Middle Last

Address _____
Street No. & Name Suite No.

City State Zip Code

INFORMATION REGARDING LAST MEDICAL CONSULTATION

LIFE ONE

- 21.a) Date of last visit to ANY doctor/physician JAN 15 2007
month day year
- b) Reason for visit ANNUAL CHECK-UP
- c) Diagnosis or outcome of visit _____
- d) Treatment/medication prescribed NONE
- e) Name of doctor/physician for above (check one)
 Primary doctor/physician
 Other doctor/physician (provide name and address)

First Middle Last

Street No. & Name Suite No.

City State Zip Code

LIFE TWO

- 22.a) Date of last visit to ANY doctor/physician _____
month day year
- b) Reason for visit _____
- c) Diagnosis or outcome of visit _____
- d) Treatment/medication prescribed _____
- e) Name of doctor/physician for above (check one)
 Primary doctor/physician
 Other doctor/physician (provide name and address)

First Middle Last

Street No. & Name Suite No.

City State Zip Code

23. Has a **John Hancock Medical Exam NB5033** been completed or will it be completed?
 If 'No', complete question 24 and Medical Certification below.
24. Have you ever used tobacco or nicotine products in any form (including cigarettes, cigars, cigarillos, a pipe, chewing tobacco, nicotine patches or gum)?
 If 'Yes', give details below.

Life One	Life Two
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Life One:				Date Last Used		
Product	Frequency	Current	Past	month	day	year
Cigarettes	_____ pack(s)/day	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
Cigars	_____ x /day	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
Other: _____	_____ x /day	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____

Life Two:				Date Last Used		
Product	Frequency	Current	Past	month	day	year
Cigarettes	_____ pack(s)/day	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
Cigars	_____ x /day	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
Other: _____	_____ x /day	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____

MEDICAL CERTIFICATION

Complete this section when submitting a medical examination form of another company in lieu of John Hancock Medical Exam NB5033.

25.

	Name of Proposed Life Insured	Name of Insurance Company	Date of Examination		
			month	day	year
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____

- a) To the best of your knowledge and belief, is the information in the examination true and complete as of the date this application is signed?

Life One	Life Two
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

COVERAGE APPLIED FOR

26. Complete the applicable **Coverage Details Form NB5007** (Universal Life), **NB5008** (Variable Life) or **NB5013** (Term & Traditional Life) for details of the policy being applied for, including Supplementary Benefits and other benefit options.

SPECIAL REQUESTS – Attach additional page if more space is required.

TEMPORARY LIFE INSURANCE AGREEMENT APPLICATION

Money may NOT be collected and the **Temporary Life Insurance Receipt and Agreement NB5004** may NOT be issued if:

1. questions 28 and 29 are answered Yes or left blank; or
2. the Proposed Life Insured(s) is under age 20 or over age 70; or
3. the amount applied for is more than \$10,000,000 (single life) or \$15,000,000 (survivorship).

27. Is coverage being applied for under the Temporary Life Insurance Agreement? Yes No

If 'Yes', answer questions 28 and 29.

28. Within the last 24 months, has the Proposed Life Insured(s) under this application:

- a) consulted a medical professional, been diagnosed with or been treated for or had treatment recommended by a member of the medical profession for any heart problem, stroke or cancer?
- b) consulted with or scheduled a consultation with a medical professional for any symptoms or medical concerns?
- c) received a recommendation from a medical professional for any consultation, testing, investigation or surgery that has not yet been completed?
- d) been declined for life insurance?

Life One	Life Two
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

29. Does the Proposed Life Insured(s) reside outside the United States more than 6 months per year?

PRE-AUTHORIZED PAYMENT PLAN

Attach voided
sample check.

30. Request for Pre-Authorized Payment Plan

Policy Number(s)	Name(s) of Person(s) Insured	First Bank Withdrawal Effective			Type of Payment and Amount	
		month	day	year	Premium	Loan

By completing this section, I hereby authorize and request The Company to draw checks (which may include withdrawals made electronically) monthly on my account to pay premiums, and/or repay loans on the policies listed above or any policies subsequently designated.

I understand and agree that:

- a) Such checks (which may include withdrawals made electronically) shall be drawn monthly to pay premiums falling due on the designated policies.
- b) While the Pre-Authorized Payment Plan is in effect, The Company will not give notices of premiums falling due on such policies.
- c) The Pre-Authorized Payment Plan may be terminated by the bank depositor or by written notice to The Company by the Owner. If the Pre-Authorized Payment Plan is terminated, premiums falling due thereafter shall be payable directly to The Company as provided in the policy.
- d) The first premium paid must be submitted by check.

DECLARATIONS

The Proposed Life Insured(s) and Owner (or Parent or Guardian) declare that the statements and answers in this application and any form that is made part of this application are complete and true.

In addition, I/we understand and agree that:

1. The statements and the answers in this application, which include coverage details and any supplemental form relating to health, aviation practices or lifestyle of the Proposed Life Insured(s), will become part of the insurance policy issued as a result of this application.
2. a) Any life insurance policy issued as a result of this application will be effective on the later of the date the first premium has been paid in full and the date the policy has been delivered, provided that since the date of the application there has been no deterioration in the insurability of the Proposed Life Insured(s), no changes in the lifestyle of the Proposed Life Insured(s), no change in the financial circumstances of the Owner, and nothing has occurred that would require a change to any statement or answer in any part of this application in order to make the statement or answer true and complete as of the date the policy becomes effective. If there has been a deterioration in insurability: i) if there is no Temporary Life Insurance Agreement (TIA) coverage, the policy will not be put into effect, and ii) if there is TIA coverage and the TIA has not ended, the policy will be put into effect but only to the limit of the TIA coverage amount.
 - b) If premiums are paid prior to delivery of the policy and the terms and conditions of the TIA are satisfied, insurance prior to the effective date shall be provided only under the TIA and according to its terms.
3. Any person who knowingly and with intent to defraud any insurer:
 - a) files an application for insurance or statement of claim containing any materially false information, or b) conceals for the purpose of misleading any insurer, information concerning any material fact thereto, may be committing a fraudulent insurance act.
4. If coverage under a TIA is applied for, I/we have received, read and understand the terms and conditions of the **Temporary Life Insurance Receipt and Agreement NB5004**.

OWNER/TAXPAYER CERTIFICATION QUESTIONS

U.S. Person(s) (including U.S. Resident/Alien(s))

Under the penalties of perjury, I the Owner, certify that:

1. The number shown on Page 1 of the application is my correct taxpayer identification number (if number has not been issued, write "Applied for" in the box on Page 1), AND
2. Pick the applicable box:
 - I am not subject to Backup Tax Withholding because (a) I am exempt from Backup Tax Withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to Backup Tax Withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to Backup Tax Withholding, OR
 - The Internal Revenue Service (IRS) has notified me that I am subject to Backup Tax Withholding.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid Backup Tax Withholding.

Non U.S. Person(s) and Non Resident Alien(s)

I am providing IRS Form W-8BEN. Yes No

AUTHORIZATION TO OBTAIN INFORMATION

I/We, the Proposed Life Insured(s), authorize:

1. The Company to obtain an investigative consumer report on me/us.
2. Any medical professional, medical care provider, hospital, clinic, laboratory, insurance company, the Medical Information Bureau (MIB Inc.), or any other similar person or organization to give The Company and its reinsurers information about me/us or any minor child/children who is/are to be insured.

The information collected by The Company may relate to the symptoms, examination, diagnosis, treatment or prognosis of any physical or mental condition.

I/We further authorize The Company to disclose such information and any information developed during its evaluation of this application to:

- (a) its reinsurers; (b) the MIB Inc.; (c) other insurance companies as designated by me/us; (d) me/us; (e) my/our insurance agent, when that agent is seeking insurance coverage through The Company on my/our behalf; (f) any medical professional designated by me/us; or (g) any person or entity entitled to receive such information by law or as I/we may further consent.

I/We acknowledge receipt of the Notice of Disclosure of Information relating to the underwriting process, investigative consumer reports and the MIB Inc.

This authorization will be valid for two years from the date of the application shown below. A photocopy of this authorization will be as valid as the original.

Information collected under this authorization will be used by The Company to evaluate my/our application for insurance, to evaluate a claim for benefits, or for reinsurance or other insurance purposes.

I am/We are entitled, or my/our authorized representative is entitled, to a copy of this authorization.

SIGNATURES

Please read all of the above Declarations and Authorizations before signing this form.

Signed at	City	State	This	Day of	Year
-----------	------	-------	------	--------	------

Signature of Owner (Signing Officer please provide title or corporate seal)

X

Signature of Witness or Agent/Registered Representative as Witness

X

If Proposed Life Insured(s) is under age 15 Parent or Guardian must sign and include relationship.

Signature of Proposed Life Insured One if other than Owner (Parent or Guardian if under age 15)

X

Print Name - If Witness other than Agent/Registered Representative

Signature of Proposed Life Insured Two if other than Owner

X

Witness Relationship - If Witness other than Agent/Registered Representative

Agent signature if other than Witness.

Signature of Agent/Registered Representative if other than Witness

X

Signed this Day of Year

JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)

ACTUARIAL MEMORANDUM

**POLICY FORM 09MAJULX
FLEXIBLE PREMIUM ADJUSTABLE LIFE INSURANCE POLICY**

March 5, 2009



Robert W. Lendrum, ASA, MAAA

I. DESCRIPTION OF POLICY CHARACTERISTICS

This is a Flexible Premium Adjustable Universal Life Insurance policy.

A. Death Benefits

The death benefit is payable when the Insured dies while the policy is in full force. After reflecting any withdrawals, this death benefit will equal the Death Benefit of the policy minus any indebtedness on the date of death. If the insured dies during a grace period, we will also deduct any unpaid monthly charges. This policy offers two death benefit options. The amount of death benefit payable depends upon the option chosen. The face amount is made up of two types of coverage, base face amount (BFA) and supplemental face amount (SFA). At issue SFA is limited to four times the BFA. Unless noted otherwise, the term face amount as used in the remainder of this document is the total of BFA and SFA. At and after the attained age 121, any SFA is terminated.

1. Option 1 Death Benefit

The total death benefit is the face amount on the date of the insured's death or if greater, a specific percentage of the Policy Value as of the date of death. This percentage is at least as large as required to qualify the death benefit proceeds as life insurance benefits.

This percentage is defined differently for the two different definitions of life insurance tests. The applicant may choose either to qualify the policy as life insurance under the Guideline Premium Test (GPT) or the Cash Value Accumulation Test (CVAT).

2. Option 2 Death Benefit

The total death benefit is the sum of the face amount and the Policy Value on the date of the insured's death, or if greater, a specific percentage of the Policy Value. Again, this percentage is at least as large as required to qualify the death benefit proceeds as life insurance benefits and is dependent on the applicant's choice of either GPT or CVAT.

3. Specific Percentage Tables

The specific GPT percentages for both option 1 and option 2 death benefits are provided in Appendix 1. The CVAT percentages vary depending on the insured's attained age and gender.

B. Policy Values And Cash Surrender Values

The Policy Values and Cash Surrender Values are calculated using a formula which is consistent with the retrospective equivalent of the formula given in the Standard Nonforfeiture Law. The Policy Value is the accumulation of premiums paid, less premium charges, less administration, base face amount and supplemental face amount charges, less monthly rider charges, and less the monthly cost of insurance charges based on the net amount at risk. Charges are deducted monthly until the insured life attains age 121. This product has no surrender charges; therefore the Cash Surrender Value at any point in time is equal to the Policy Value.

Appendix 2 contains the charge formulas for determining the Policy Value.

C. Flexibility

At issue, the owner selects both a premium amount and the amount of insurance subject to minimum amounts. The minimum face amount for which a policy may be issued is \$250,000.

A continuation of the original combination of premium and amount of insurance will result in a coverage period that could range up to whole life, with little or substantial build-up of Cash Surrender Value depending upon the relationship of the selected values.

The owner may change the premium at any time. Changes in face amount are allowed after the policy has been in force for one year. Face increases are subject to evidence of insurability and have to meet a minimum amount criterion.

Premiums may be paid in any frequency and in any amount subject only to contractual minimum amounts and the limitation that the total premiums paid to any point in time may not exceed the limitation as described in section 7702 of the Internal Revenue Code. This will ensure that policy benefits payable at death qualify as death proceeds from a life insurance policy. Additional premiums will be subject to underwriting guidelines and may result in death benefit increases.

D. Issue Ages

Issue ages for this product range from 20-80 for the super-preferred risk class and 20 to 90 for other risk classes. In addition, issue ages 0-19 can be offered in our standard non-smoker class only. We also plan to offer a Guaranteed Issue risk class. Generally, the issue ages for this risk class are 20-65.

E. Non-Participating

Flexible Premium Adjustable Universal Life is not participating.

II. BASIS OF VALUES

A. Interest

Funds invested in the Guaranteed Interest Account will be credited with a minimum interest rate that varies by the amount of BFA elected at issue and the amount of SFA elected at issue. A policy's guaranteed minimum interest rate is defined as:

$(3.00\% \times \text{BFA at issue/TFA at issue}) + (2.00\% \times \text{SFA at issue/TFA at issue})$, where TFA is defined as BFA + SFA.

Funds allocated to the Loan Account will be credited interest at a rate no less than the loan interest rate then in effect less 1.25% for the first 10 policy years, 0.25% thereafter. The loan interest rate is variable.

B. Cost of Insurance

The guaranteed maximum cost of insurance rates applied in the calculation of the Cash Surrender Value, under this policy, are based on the 2001 Commissioners Standard Ordinary (CSO) Sex Distinct ANB Aggregate Ultimate Mortality Tables, with substandard ratings, if applicable. For policies issued on a unisex basis, the guaranteed maximum cost of insurance rates are based on the 2001 CSO Male ANB Aggregate Ultimate Mortality Tables. The company may use modified cost of insurance rates, which produce a lower cost of insurance, thus producing higher cash values than those generated by the guaranteed 2001 CSO Table rates.

C. Description of Policy Charges

In addition to Cost of Insurance charges, the following charges are deducted from the policy value or premiums:

1. Monthly Administration Charge

A monthly administration charge is deducted in all policy years. This charge is guaranteed never to exceed \$15.

2. Monthly Base Face Amount Charge

The monthly base face amount charge is a charge per 1000 of BFA at issue that varies by issue age, risk class, and sex of the insured. It is deducted for the first ten policy years and guaranteed never to increase.

3. Monthly Supplement Face Amount Charge

The monthly supplemental face amount charge is a charge per 1000 of SFA at issue that varies by issue age, risk class, and sex of the insured. It is deducted for the first ten policy years and guaranteed never to increase.

4. Charge for Unscheduled Supplemental Face Amount Increases

There is a charge for unscheduled increases in SFA after issue. This charge is deducted monthly for 10 Policy Years from the date of the increase, but guaranteed never to exceed \$0.3250 per month per 1000 of the increase in SFA.

5. Premium Charge

A percentage of premium is deducted from all premiums in all policy years. These percentages are guaranteed never to exceed the following:

Years	Up to Target	Excess of Target
1*	22%	9%
2-10	10%	8%
11+	6%	6%

*If premium received in the first Policy Year is less than the Target Premium, then premium received in the second Policy Year will be assessed a Premium Charge on the basis of the percentage applicable in the first Policy Year, until total cumulative premiums received equal the Target Premium for the first Policy Year.

D. Description of Surrender Charges

This product has no surrender charges.

E. Partial Withdrawals

Withdrawals may be made, provided they do not force the policy value or face amount below the minimum allowable level. If the requested withdrawal amount would reduce the face amount to below the minimum face, the withdrawal amount will be reduced so the face amount after the withdrawal will be equal to the minimum face amount of the product.

III. CASH VALUE FORMULA AND COMPARISON OF FLEXIBLE PREMIUM ADJUSTABLE UNIVERSAL LIFE INSURANCE CASH SURRENDER VALUES WITH MINIMUM NONFORFEITURE REQUIREMENTS

For Flexible Premium Adjustable Universal Life Insurance, the ultimate plan of insurance at any point in time is unknown due to the following:

- Flexibility of premium payments and death benefits.
- Requirement to increase death benefit to qualify as life insurance benefits.
- Future interest rate credited to cash values may be higher than the minimum guaranteed.
- Future cost of insurance rates may be less than the maximum guaranteed.

Therefore, it is impossible to calculate Flexible Premium Adjustable Universal Life Insurance Cash Surrender Values using a prospective type formula as prescribed in the Standard Nonforfeiture Law (SNFL).

The method of calculating Cash Surrender Values for Flexible Premium Adjustable Universal Life Insurance is designed in such a way that it is consistent with the retrospective equivalent of the SNFL cash value formula.

In the following sections we will demonstrate that the method of calculating Cash Surrender Values for this policy complies with the minimum nonforfeiture requirements of the SNFL. Unless otherwise defined, we are using the standard actuarial notations in the demonstration. Duration used in the Flexible Premium Adjustable Universal Life Insurance formula refers to the monthly basis in contrast to the annual basis as defined in the SNFL.

In order to simplify the following demonstration, it is assumed that the "Maximum Additional First Year Expense Allowance" is deducted in full when the policy first goes into effect. Thus interest will be credited to the full policy value.

A. Minimum Cash Surrender Value Basis

Minimum Flexible Premium Adjustable Universal Life Insurance Cash Surrender Values will be generated by using the interest rate of 3.0% and the maximum cost of insurance rates, which we based on 2001 CSO Sex Distinct ANB Aggregate Ultimate Mortality Tables, with substandard ratings, if applicable. For policies issued on a unisex basis, the maximum cost of insurance rates are based on the 2001 CSO Male ANB Aggregate Ultimate Mortality Tables. The 3.0% interest rate combined with the 2001 CSO Mortality Table is an acceptable basis for calculating cash values according to SNFL.

B. Mathematical Equivalence of the Retrospective Flexible Premium Adjustable Life Formula and the Prospective SNFL Formula.

According to Chapter 5, Section 5 of Life Contingencies by C.W. Jordan, the prospective version of the cash value formula, per unit of death benefit, can be rewritten into a retrospective recursive form as follows:

$$\left({}_{t-1}CV + P^A \right) \times (1+i) = q_{x+t-1} + (1 - q_{x+t-1}) \times {}_t CV \quad \text{or equivalently,}$$

$$(A) \quad {}_t CV = \frac{({}_{t-1} CV + P^A) \times (1+i) - q_{x+t-1}}{(1 - q_{x+t-1})} \quad \text{for } t > 1 \text{ and since}$$

$${}_0 CV = A_0 - P^A \ddot{a}_0 = A_0 - (A_0 + E^1) = -E^1 \quad \text{then}$$

$$(A') \quad {}_1 CV = \frac{(P^A - E^1) \times (1+i) - q_x}{(1 - q_x)}$$

Now, for Flexible Premium Adjustable Universal Life Insurance, let

- P_t = Net premium credited to the cash value for monthly duration t . This is the gross premium less premium charges and monthly administrative, base face amount, supplemental face amount, and rider charges. All gross premiums are assumed paid at the beginning of month t .
- F_t = Total death benefit in duration t according to the death benefit option chosen.
- E = Maximum additional first year expense allowance.
- ${}_1 ICV$ = Initial Cash Surrender Value for duration t and equals ${}_{t-1} CV + P_t$, except the first policy month where $ICV = P_1 - E$.
- ${}_t CV$ = Cash Surrender Value at the end of duration t .
- q_t = the monthly equivalent, using an exponential conversion, of the annual mortality rate for age nearest birthday at the beginning of the policy year.
- r_t = Guaranteed cost of insurance rate for duration t , which equals $q_t / (1 - q_t)$
- i_t = Monthly guaranteed interest rate for duration t .
- CI_t = Maximum monthly cost of insurance for duration t , which is defined as

$$r_t \times \left(\frac{F_t}{1 + i_t} - ICV_t \right) \quad \text{or} \quad \frac{q_t}{1 - q_t} \times \left(\frac{F_t}{1 + i_t} - ICV_t \right)$$

Then for durations occurring after the first policy month, the Cash Surrender Value formulae defined in the policy can be expressed as:

$$(1) \quad {}_{t+1} ICV = {}_t ICV \times (1 + i_t) + P_{t+1} - CI_t \times (1 + i_t)$$

$$\text{since } {}_t ICV = {}_{t-1} CV + P_t \quad \text{and} \quad {}_{t+1} ICV = {}_t CV + P_{t+1}$$

we can rewrite (1) as

$${}_t CV + P_{t+1} = ({}_{t-1} CV + P_t) \times (1 + i_t) + P_{t+1} - CI_t \times (1 + i_t) \quad \text{or}$$

$$(2) \quad {}_t CV = ({}_{t-1} CV + P_t) \times (1 + i_t) - CI_t \times (1 + i_t) \quad \text{where}$$

$$CI_t = r_t \times \left(\frac{F_t}{1 + i_t} - ICV_t \right) = \frac{q_t}{1 - q_t} \times \left(\frac{F_t}{1 + i_t} - ICV_t \right)$$

After substituting CI_t with above, we can rewrite (2) as:

$${}_t CV = ({}_{t-1} CV + P_t) \times (1 + i_t) - \frac{q_t}{1 - q_t} \times \left(\frac{F_t}{1 + i_t} - ({}_{t-1} CV + P_t) \right) \times (1 + i_t)$$

and combining terms, the above formulae are:

$$(3) \quad {}_t CV = \frac{({}_{t-1} CV + P_t) \times (1 + i_t) - q_t \times F_t}{1 - q_t}$$

For the first policy month, we have:

$$(1') \quad {}_{t+1} ICV = {}_t ICV \times (1 + i_t) + P_{t+1} - CI_t \times (1 + i_t) - E \times (1 + i_t)$$

and using a similar approach described above in deriving formulae (3), (1') can be expressed as:

$$(2') \quad {}_t CV = \frac{({}_{t-1} CV + P_t - E) \times (1 + i_t) - q_t \times F_t}{1 - q_t} \quad \text{for } t > 1$$

$$(3') \quad {}_1 CV = \frac{(P_1 - E) \times (1 + i_1) - q_1 \times F_1}{1 - q_1} \quad \text{since } {}_0 CV = 0, \text{ for } t = 1$$

Hence, by comparing formula (3), (3') with (A), (A'), we have shown that the Flexible Premium Adjustable Universal Life Insurance Cash Surrender Value accumulation is equivalent to that required under SNFL.

The only differences in the formula are:

- The SNFL formulae are based on one unit of death benefit and the Flexible Premium Adjustable Universal Life Insurance formulae are based on the actual death benefit in duration t of F_t .
- The SNFL formulae develop Cash Surrender Values on an annual basis and the Flexible Premium Adjustable Universal Life Insurance formulae are based on a monthly time period. For example, i_t in the Flexible Premium Life Insurance formula is the monthly equivalent of i in the SNFL formulae and q_t in the Flexible Premium Life Insurance formulae is the monthly equivalent of q in the SNFL formula.

Use of the retrospective approach for the calculation of Cash Surrender Values is not in conflict with Standard Non-Forfeiture Law. Under the retrospective approach, crediting more than the maximum Standard Non-Forfeiture rate will produce even higher Cash Surrender Values.

C. Standard Nonforfeiture Law Compliance

The Standard Nonforfeiture Law defines a Maximum Initial Expense Allowance. Any actual issue charge (i.e., a first year expense charge in excess of the average every year charges) must be deducted from this Allowance, and the remainder may then be amortized over the premium payment period of the contract as a Surrender Charge. This Flexible Premium Adjustable Universal Life contract has only an issue charge and no Surrender Charge. The following proof demonstrates that the actual issue charge is less than initial expense allowance. The demonstration is based on a policy with only Base Face Amount and no Supplemental Face Amount. This is the policy configuration more prone to not passing the nonforfeiture requirements; therefore this demonstration ensures compliance for all other policy configurations (i.e., blends of BFA and SFA).

Definition of Terms

FA = Annual charge per thousand of base face amount during the first ten policy years.

PCT1 = First year premium charge on premium up to Target (22%)

PCT2 = Premium charge on premium up to Target in years 2-10 (10%)

PCT3 = Premium charge on premium up to Target in years 11+ (6%)

P_x = Net level premium per 1000 of face amount calculated using 125% of the statutory valuation interest rate ($1.25 \times 4\% = 5\%$) and guaranteed cost of insurance rates.

T = Target Premium, t% of a net level premium per 1000 of base face amount calculated using 5.0% interest and guaranteed cost of insurance rates (i.e. $T = t \times P_x$), where t varies issue age and sex of the insured, with a maximum of $t=113.2\%$ and a minimum of $t=66\%$.

AP = Actual annual premium per 1000 of face amount

Z = 121 – insured’s issue age

To comply with nonforfeiture requirements, we need to show that Excess First Year Expense Charges are never greater than the SNFL Maximum Initial Expense Allowance.

The Excess First Year Expense Charges (EFYEC) are defined as the amount by which the expense charges made in the first policy year exceed the arithmetic average of the corresponding charges for policy years two through twenty. Since the premium charges on premium up to Target and face amount charges both vary over the first twenty years, the EFYEC, per 1000 of face amount, is equal to (a) plus (b):

$$(a) \text{ Min}(T, AP) \times \{PCT1 - [PCT2 \times \min(Z-1, 10-1) + PCT3 \times \min(\max(0, Z-10), 20-10)] / \min(Z-1, 19)\}$$

$$(b) FA \times (1 - \min(Z-1, 10-1)) / \min(Z-1, 19)$$

Some simplifications can be made to this EFYEC formula. First, since the maximum issue age is 90, then $Z \geq 31$ and $\min(Z-1, 10-1)$, $\min(\max(0, Z-10), 20-10)$ and $\min(Z-1, 19)$ are always 9, 10 and 19, respectively. Second, we can combine all premium charge percentages (PCT1, PCT2, PCT3) to arrive at a simplified EFYEC formula:

$$EFYEC = \text{Min}(T, AP) \times \{2.68/19\} + FA \times 10/19$$

The Maximum Initial Expense Allowance (MIEA) on a per thousand face amount basis is:

$$MIEA = 1.25 \times \min(P_X, 40) + 10$$

Now we will show that $EFYEC \leq MIEA$. First we will assume that $AP > T$. Since T and P_X are both net level premiums calculated in the same manner differing only in that $T = t \times P_X$, where $t \leq 113.2\%$, then

$$2.68/19 \times T \leq 2.68/19 \times (1.132 \times P_X) < 1.25 \times P_X.$$

Furthermore, we know that T will always be less than or equal to the Target Premium for our worst allowable insured (Male, 90, at maximum insurable rating of 500%), which is 185.27 per 1000 of base face amount. Therefore,

$$2.68/19 \times T \leq 2.68/19 \times 185.27 < 1.25 \times 40$$

Finally, our maximum value of FA is 7.80 per 1000 of face amount, and so

$$10/19 \times 7.80 < 10$$

Therefore, when $AP > T$, $EFYEC < MIEA$.

Now assume that $AP \leq T$. Since

$$AP \times \{2.68/19\} + FA \times 10/19 < T \times \{2.68/19\} + FA \times 10/19 < 1.25 \times \min(P_X, 40) + 10$$

then we satisfy nonforfeiture requirements under the assumption that $AP \leq T$ as well.

A sample calculation is provided in Appendix 3.

IV. RESERVE CALCULATIONS

Total Reserve

The reserve under the policy will be the CRVM reserve determined in accordance with the NAIC Universal Life Model.

The reserves at attained ages 121 and higher will be equal to the greater of the Policy value, which includes interest credited, and the Death Benefit. A reserve for Immediate Payment of Claims is determined by increasing the curtate reserve by one-half year of interest; in accordance with Actuarial Guideline XXXII. The statement reserve will be the higher of the reserve and the cash surrender value.

As the 2001 CSO Mortality Table is used as the valuation mortality basis for this plan of insurance, the actuarial opinion in the annual statement filed with the commissioner shall be based on an asset adequacy analysis as specified in Section 5D of the “Recognition of the 2001 CSO Mortality Table for use in Determining Minimum Reserve Liabilities and Non-forfeiture Benefits Model Regulation”.

Appendix 4 provides a demonstration of compliance with the NAIC Universal Life Model Regulation.

Appendix 1

Minimum Death Benefit Factors

***Minimum
Death Benefit
for GPT***

The minimum death benefit (corridor death benefit) must be equal to at least the following percentage of the policy value.

Life Attained Age	%	Life Attained Age	%	Life Attained Age	%
<40	250	54	157	68	117
41	243	55	150	69	116
42	236	56	146	70	115
43	229	57	142	71	113
44	222	58	138	72	111
45	215	59	134	73	109
46	209	60	130	74	107
47	203	61	128	75 - 90	105
48	197	62	126	91	104
49	191	63	124	92	103
50	185	64	122	93	102
51	178	65	120	94	101
52	171	66	119	95	100
53	164	67	118	>95	100

***Minimum
Death Benefit
for CVAT***

The minimum death benefit (corridor death benefit) must be equal to at least $[1/(\text{Net Single Premium})]$ times the policy value. The CVAT percentages vary depending on the definition of life insurance and on the insured's attained age and gender.

Appendix 2

Flexible Premium Life Insurance Charge Formulae

Definitions

AV_t	Account value at end of month t; equals sum of amounts in guaranteed interest account and loan account at end of month t
GAV_t	Guaranteed interest account value at end of month t
LAV_t	Account value invested in loan account at end of month t
AV^*_t	Beginning of month account value used in COI charge calculations
${}^{ga}NCF_t$	Net cash flow into/out of the guaranteed interest account during month t (includes deposits, transfers, loans, loan repayments and withdrawals)
${}^{la}NCF_t$	Net cash flow into/out of the loan account during month t (includes loans and loan repayments)
CSV_t	Net Cash Surrender Value at time t
$Loan_t$	Loan at time t
ALV_t	Available Loan Value at end of month t
DB_t	Net Death Benefit at time t
DBP_t	Death Benefit Percentage at time t
Opt. 1	Death benefit option 1 (level)
Opt. 2	Death benefit option 2 (increasing, equals face amount plus account value)
SC_t	Surrender Charge for month t (n/a for 09MAJULX)
$ASC(0)$	Actual Initial Surrender Charge (n/a for 09MAJULX)
GP_t	Surrender Charge Grading Percentage for month t (n/a for 09MAJULX)
P_t	Premium at beginning of month t
W_t	Withdrawals during month t
IGA_t	Investment earnings on the guaranteed interest account over month t
ILA_t	Investment Earnings on the loan account over month t
I_t	Investment Earnings over month t
${}^{ga}i_t$	Guaranteed interest account interest rate for month t
${}^{la}i_t$	Loan account interest rate for month t
LS_t	Loan spread for month t
PL_t	Premium Charge for month t
Chg_t	Total Policy Charges for month t
COI_t	Total Cost of Insurance Charges for month t
q_t	Cost of Insurance Rate for month t
MAC_t	Total Monthly Administration Charges for month t
$MBFC_t$	Total Monthly Base Face Amount Charges for month t
$MSFC_t$	Total Monthly Supplemental Face Amount Charges for month t
$Rider_t$	Total cost of all riders for month t
$Face_t$	Face for month t
FR_t	Face Reduction amount at time t
Base Face ₁	Original base Face Amount at contract issue or time t=1

Appendix 2 (continued)
Flexible Premium Life Insurance Charge Formulae

Formulae

Account Values

$$AV_0 = 0$$

$$AV_t = AV_{t-1} + (1 - PL_t) \times P_t + I_t - Chg_t - Rider_t - W_t$$

$$AV_t^* = AV_{t-1} + (1 - PL_r) \times P_t - MBFC_t - MAC_t - Rider_t$$

$$Chg_t = COI_t + MBFC_t + MAC_t$$

$$COI_t = \frac{q_t}{1 - q_t} \times \left(\frac{\max(Face_t, AV_t^* \times DBP_t)}{1.00246627} - AV_t^* \right) \quad (\text{Opt. 1})$$

$$COI_t = q_t \times \frac{\max(Face_t, AV_t^* \times DBP_t)}{1.002446627} \quad (\text{Opt. 2})$$

$$I_t = IGA_t + ILA_t$$

$$IGA_t = GAV_{t-1} \times \left(1 + {}_{ga}i_t\right)^{\frac{\#_of_days_in_month}{365}} + {}_{ga}NCF_t \times \left(1 + {}_{ga}i_t\right)^{\frac{\#_of_days_remaining_in_month}{365}}$$

$$ILA_t = LAV_{t-1} \times \left(1 + {}_{la}i_t\right)^{\frac{\#_of_days_in_month}{365}} + {}_{la}NCF_t \times \left(1 + {}_{la}i_t\right)^{\frac{\#_of_days_remaining_in_month}{365}}$$

Surrender Values

$$CSV_t = AV_t - SC_t - Loan_t$$

$$SC_t = GP_t \times ASC(0) \times Base\ Face_1 \div 1000$$

Death Benefits

$$DB_t = \max(Face_t, AV_t \times DBP_t) - Loan_t \quad (\text{Opt. 1})$$

$$DB_t = \max(AV_t + Face_t, AV_t \times DBP_t) - Loan_t \quad (\text{Opt. 2})$$

Appendix 2 (continued)
Flexible Premium Life Insurance Charge Formulae

Loans

$$\text{Loan}_t = \text{Loan}_{t-1} \times (1 + \text{loan}i_t)^{\# \text{ of days in month}/365} + \text{New Loans} - \text{Loan Repayments}$$

$$\text{ALV}_t = \text{Greater of a) 90\% of CSV or b) where b) = (CSV}_t \text{ less monthly deductions until next anniversary) times (1 - LS}_t)$$

Partial Withdrawals

$$\text{post withdrawal Face}_t = \text{Face}_t - W_t \quad \text{if DB Option 1, no change if DB Option 2}$$

Partial Base Face Reduction (including partial withdrawals that result in a BFA reduction)

$$\text{post face reduction Face}_t = \text{Face}_t - \text{FR}_t$$

**Appendix 3
Flexible Premium Life Insurance Nonforfeiture Demonstration**

Male NS Std 35 with Base Face Amount of \$500,000

Premium Paid (AP):	\$11,400.00
Target Premium (T)	\$4,565.48
Net Level Premium (NLP): ¹	\$4,324.73

Initial Acquisition Charges

<u>Premium Charge</u>
= 22% of min(AP,T) + 9% of max(0, AP-T)
= 0.22 x \$4,565.48 + 0.09 x \$6,834.52
= \$1,619.51
<u>Admin Charge</u>
= \$180.00
<u>Base Face Amount Charge</u>
= \$2.262 x Base Face in 1000s
= \$1,131.00
<u>Total Initial Acquisition Charges</u>
= \$1,493.51 + \$180.00 + \$1,131.00
= \$2,930.51

Average Renewal Charges for Yr 2 – 20

<u>Average Annual Premium Charge</u>
= {(0.10 x 9 yrs) + (0.06 x 10 yrs)} * min(AP,T)
+ {(0.08 x 9 yrs) + (0.06 x 10 yrs)} * max(0,AP-T)
19 years
= [(1.5) x \$4,565.48 + (1.32) x \$6,834.52] / 19
= \$835.25
<u>Average Admin Charge</u>
= \$180.00
<u>Average Base Face Amount Charge</u>
= (\$2.262 x Base Face in 1000s) x 9 / 19
= \$1,131.00 x 9 / 19
= \$535.74
<u>Total Average Renewal Charges</u>
= \$835.25 + \$180.00 + \$535.74
= \$1,550.99

Excess First Year Expense Charges

<u>Premium Charge</u>
= \$1,619.51 - \$835.25
= \$784.26
<u>Admin Charge</u>
= \$180.00 - \$180.00
= \$0.00
<u>Base Face Amount Charge</u>
= \$1,131.00 - \$535.74
= \$595.26
<u>Total Excess First Year Expense Charges</u>
= \$784.26 + \$0.00 + \$595.26
= \$1,379.52

Maximum Initial Expense Allowance / 1000

= \$10 + 1.25 * min (\$40, NLP/500)
= \$10 + 1.25 * min (\$40, \$8.6495)
= \$20.811875 per 1000
= \$10,405.94

Nonforfeiture Compliance

Since there are no Surrender Charges, we need
Maximum Initial EA > Excess First Year Expense
or, \$10,405.94 > \$1,379.52

¹ Calculated at 1.25 x Max (4%, guar int rate of 3%)

Appendix 4

STATEMENT OF THE METHOD OF CALCULATING UNIVERSAL LIFE RESERVES

Reserve Basis : 2001 CSO Ultimate, Sex Distinct, ANB
Aggregate Ultimate tables, 4.0% interest

Let z = representation of age at issue
 t = duration beyond issue
 PAV_t = Policyholder Accumulated Value at duration t
 $CRVM_t$ = CRVM Reserve at duration t
 EA_t = Unamortized Expense Allowance at duration t

1. The Guaranteed Maturity Premium (GMP) is calculated to exactly mature the policy for the face amount at age 121 using contract guarantees of mortality, interest and expense.
2. Guaranteed Maturity Fund (GMF) is the "natural accumulated value" that arises at each duration such that, along with future GMP's they will exactly mature the policy based on policy guarantees at issue.
3. Using the larger of GMF_t or PAV_t , future death and maturity benefits are re-determined at each valuation date assuming GMP's are paid, using contract guarantees.
4. If $PAV_t < GMF_t$ then $r_t = PAV_t / GMF_t$, otherwise $r_t = 1$.
5. Calculate the Net Level Premium Reserve (NLPR)

$$NLPR_t = (PVFB_t - \frac{PVFB_0 \cdot \ddot{a}_{z+t}}{\ddot{a}_z}) \cdot r_t$$

where $PVFB_t$ is the present value of future benefits at duration t and all values use valuation interest and mortality.

Appendix 4 (Continued)

6. Calculate the unamortized expense allowance EA :

$$EA_t = r_t \cdot (\beta - \alpha) \cdot \frac{\ddot{a}_{z+t}}{\ddot{a}_z}$$

where $\alpha = c_z$ and $\beta = \frac{PVFB_0 - c_z}{a_z}$

7. Calculate the CRVM Reserve :

$$CRVM_t = NLPR_t - EA_t$$

If, in any policy year, the GMP is less than the valuation net premium, calculated by the valuation method actually used in calculating the CRVM reserve above but using the minimum valuation standards of mortality and rate of interest, the reserve for such contract shall be equal to the greater of (a) or (b), where:

- (a) the CRVM reserve determined as described above,
- (b) the reserve calculated according to the method actually used but using the minimum valuation standards of mortality and rate of interest and replacing the valuation net premium by the GMP in each policy year for which the valuation net premium exceeds the GMP. The valuation net premium is equal to $PVFB_0/\ddot{a}_z + EA/\ddot{a}_z$.

8. The reserve held will be the higher of the computed CRVM reserve and the cash surrender value.

JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)

ACTUARIAL MEMORANDUM FOR THE ENHANCED CASH VALUE RIDER

Form # 09MECVR

I. Benefit

This rider provides for an additional amount of cash value (the Enhanced Cash Value Benefit) upon full surrender of the policy provided that the surrender is not the result of an exchange under Section 1035 of the Internal Revenue Code, and provided the rider has not terminated under its Termination provision. This amount is not available prior to full surrender in any way and therefore can not be withdrawn or loaned against.

The Enhanced Cash Value Benefit shall be an amount equal to (a) times (b) where:

- (a) is the sum of the cumulative premiums paid in the first two Policy Years up to the Target Premium shown in the Table of Values section of the policy;
- (b) is a percentage that varies by Policy Year as follows:

Policy Year	Percentage	Policy Year	Percentage
1	35%	6	25%
2	40%	7	15%
3	40%	8	10%
4	35%	9	5%
5	30%	10+	0%

II. Benefit Cost

The charge for the rider is equal to 2% of the cumulative premiums paid in the first two policy years up to the Target Premium shown in the Table of Values section of the policy.

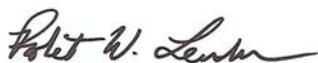
III. Non-Forfeiture Compliance

In accordance with the Standard Non-Forfeiture Law, this supplementary benefit does not require any minimum non-forfeiture values. The cash values under our Flexible Premium Adjustable Life Insurance have been shown to satisfy the minimum nonforfeiture requirements. Since this benefit provides additional amounts (which cannot be less than zero) of surrender value during the first nine policy years, the combined Enhanced Cash Value Benefit and surrender values of the policy must, by definition, also satisfy the minimum nonforfeiture requirements.

IV. Pricing Objectives

The basic pricing objectives for the Enhanced Cash Value Rider are the following:

- to cover policy benefits and expenses (acquisition, administration and overhead) based on current pricing assumptions
- to generate an appropriate contribution to company surplus
- to provide sufficient margin for adverse fluctuations in experience



Robert Lendrum , ASA, MAAA
Sr. Actuarial Associate
M Products & Marketing
March 6, 2009

JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)

STATEMENT OF VARIABILITY

March 3, 2009

**FLEXIBLE PREMIUM ADJUSTABLE LIFE INSURANCE POLICY
FORM 09MAJULX**

Section / Section #	Page Number	Description
Front Cover Page	Cover	<ul style="list-style-type: none"> Life Insured's name and policy number vary based on issue specifications. The Plan name field is bracketed in case the Company wishes to market this form under a different product name. Company Officer signatures bracketed as they may change.
1. Policy Specifications	3	<ul style="list-style-type: none"> Life Insured, Plan Name, Age at Policy Date, Policy Number, Sex, (reference to Sex and gender of Life Insured are suppressed if the basis of values uses unisex mortality tables), Issue Date, Policy Date, Risk Classification, and Additional Ratings all vary based on issue specifications. Death Benefit Option at Issue will either be Option 1 or Option 2. Life Insurance Qualification Test Elected will either be Guideline Premium Test or Cash Value Accumulation Test. Base Face Amount, Supplemental Face Amount, and Total Face Amount will all vary based on issue specifications. The Governing Law field will show the state of issue. Premium Mode will be annual, semi-annual, quarterly, monthly, or electronic draft. All premiums shown vary based on issue specifications
1. Policy Specifications (Schedule of Supplemental Face Amounts)	3 (continued)	<ul style="list-style-type: none"> The Supplemental Face Amount at Issue and the amounts of any elected scheduled increasing Supplemental Face Amount and maximum amount will be shown on this page and vary based on issue specifications. Scheduled Supplemental Face Amount Increases are elected and subject to underwriting approval.
1. Policy Specifications (Other Benefits and Specifications)	3 (continued)	<ul style="list-style-type: none"> Other Benefits and Specifications, and any text under it is bracketed to accommodate situations when the field is not applicable. A complete listing of optional riders applied for and issued with the policy is shown on this page. This would include any previously and subsequently approved riders made available with this policy and elected by the policyowner.
1. Policy Specifications	3A	<ul style="list-style-type: none"> Base Face Amount Charge varies based on issue specifications. Supplemental Face Amount Charge varies based on issue specifications. The Supplemental Face Amount Charge will indicate as N/A if there is no Supplemental Face amount elected.
1. Policy Specifications	3B	<ul style="list-style-type: none"> Guaranteed Interest Account Annual Rate varies from 2% to 3% based on blend of Base Face Amount and Supplemental Face Amount at issue and is set for life of policy. Target Premium varies based on issue specifications.
2. Table of Rates	4	<ul style="list-style-type: none"> Maximum Monthly Rates per \$1000 of Net Amount at Risk and Minimum Death Benefit Factors vary by issue specifications for the life insured.
Back Cover Page	Back Cover	<ul style="list-style-type: none"> The address of the Company's Servicing Office and toll free number is bracketed as it may be changed in the future.

STATEMENT OF VARIABILITY (continued)

**ENHANCED CASH VALUE RIDER
FORM 09MECVR**

Section / Section #	Page Number	Description																				
Effect on Net Amount at Risk,	Page 1	<ul style="list-style-type: none"> Rider duration can vary based on product specifications as rider may be used with other products (for this product it is 9 Policy Years). 																				
Termination and Reinstatement sections	Page 2	<ul style="list-style-type: none"> Rider duration can vary based on product specifications as rider may be used with other products (for this product it is 9 Policy Years). 																				
Signature	Page 2	<ul style="list-style-type: none"> Officer Signature bracketed to accommodate future changes 																				
Policy Specifications	N/A (specification pages for rider)	<ul style="list-style-type: none"> Benefit Amount percentages can vary as shown below depending on product specifications (for this product it is the maximum range of 35% year one, increasing in year 2 and 3 to 40% and then grading down as shown in chart to .05% in year 9): <table border="0" data-bbox="906 646 1230 951"> <tr><td>Policy Year 1</td><td>0 – 35%</td></tr> <tr><td>Policy Year 2</td><td>0 – 40%</td></tr> <tr><td>Policy Year 3</td><td>0 – 40%</td></tr> <tr><td>Policy Year 4</td><td>0 – 35%</td></tr> <tr><td>Policy Year 5</td><td>0 – 30%</td></tr> <tr><td>Policy Year 6</td><td>0 – 25%</td></tr> <tr><td>Policy Year 7</td><td>0 – 15%</td></tr> <tr><td>Policy Year 8</td><td>0 – 10%</td></tr> <tr><td>Policy Year 9</td><td>0 – 05%</td></tr> <tr><td>Policy Year 10</td><td>0.00%</td></tr> </table> 	Policy Year 1	0 – 35%	Policy Year 2	0 – 40%	Policy Year 3	0 – 40%	Policy Year 4	0 – 35%	Policy Year 5	0 – 30%	Policy Year 6	0 – 25%	Policy Year 7	0 – 15%	Policy Year 8	0 – 10%	Policy Year 9	0 – 05%	Policy Year 10	0.00%
Policy Year 1	0 – 35%																					
Policy Year 2	0 – 40%																					
Policy Year 3	0 – 40%																					
Policy Year 4	0 – 35%																					
Policy Year 5	0 – 30%																					
Policy Year 6	0 – 25%																					
Policy Year 7	0 – 15%																					
Policy Year 8	0 – 10%																					
Policy Year 9	0 – 05%																					
Policy Year 10	0.00%																					