

SERFF Tracking Number: AMFA-126476764 State: Arkansas
Filing Company: Ameritas Life Insurance Corp. State Tracking Number: 44773
Company Tracking Number: UN 2550 IA-V\UN 92 IA-V
TOI: L06I Individual Life - Variable Sub-TOI: L06I.002 Single Life - Flexible Premium
Product Name: 2010 Investment Advisory Agreement App Page-ALIC
Project Name/Number: 2010 Investment Advisory Agreement App Page-ALIC/2010 Investment Advisory Agreement App Page-ALIC

Filing at a Glance

Company: Ameritas Life Insurance Corp.
Product Name: 2010 Investment Advisory Agreement App Page-ALIC
TOI: L06I Individual Life - Variable

Sub-TOI: L06I.002 Single Life - Flexible Premium
Filing Type: Form

SERFF Tr Num: AMFA-126476764 State: Arkansas

SERFF Status: Closed-Approved-Closed State Tr Num: 44773

Co Tr Num: UN 2550 IA-V\UN 92 IA-V State Status: Approved-Closed

Authors: Cindy Meyer, Teri Tran
Date Submitted: 02/05/2010

Reviewer(s): Linda Bird
Disposition Date: 02/16/2010
Disposition Status: Approved-Closed

Implementation Date Requested: 05/01/2010
State Filing Description:

Implementation Date:

General Information

Project Name: 2010 Investment Advisory Agreement App Page-ALIC
Project Number: 2010 Investment Advisory Agreement App Page-ALIC
Requested Filing Mode: Review & Approval
Explanation for Combination/Other:
Submission Type: New Submission
Overall Rate Impact:
Filing Status Changed: 02/16/2010

Status of Filing in Domicile: Pending
Date Approved in Domicile:
Domicile Status Comments:
Market Type: Individual
Group Market Size:
Group Market Type:
Explanation for Other Group Market Type:
State Status Changed: 02/16/2010
Created By: Teri Tran
Corresponding Filing Tracking Number:

Deemer Date:
Submitted By: Teri Tran
Filing Description:
RE: Ameritas Life Insurance Corp.
NAIC No.: 0943-61301
FEIN No.: 47-0098400

Form:
UN 2550 IA-V Application Component Page for Variable Universal Life Policy
UN 92 IA-V Application Component Page for Variable Universal Life Policy

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Enclosed for your review and approval are the above-referenced application component pages containing the Investment Advisory Agreement for variable products. These component pages will replace the previously approved forms as follows:

Form Being Replaced -- Approval Date -- Tracking Number
UN 2550 IA-V ALIC -- 12/18/2007 -- 37641
UN 92 AL IA -- 07/13/2009 -- 42878

The proposed effective date is May 1, 2010 or upon approval, whichever is later.

These Investment Advisory Agreement application pages are for use with policy form 4003, a variable universal life policy, also previously approved by your Department. We request that certain information on the application, such as home office or administrative addresses and phone numbers be considered variable to allow for future changes. This filing contains changes only to the section entitled Investment Advisory Agreement for Model Asset Allocation.

No part of this filing contains any unusual or possibly controversial items from normal company or industry standards.

This application is used with a policy form that is subject to Federal jurisdiction, and is therefore exempt from readability requirements.

If you should have any questions, please do not hesitate to contact me at 800-745-1112, ext. 87899, by fax at 402-467-7956, or e-mail ttran@ameritas.com.

Company and Contact

Filing Contact Information

Teri Tran, Contract Analyst ttran@ameritas.com
5900 O Street 800-745-1112 [Phone] 87899 [Ext]
P O Box 81889 402-467-7956 [FAX]
Lincoln, NE 68501-1889

Filing Company Information

Ameritas Life Insurance Corp. CoCode: 61301 State of Domicile: Nebraska
5900 O Street Group Code: 943 Company Type:
P O Box 81889 Group Name: State ID Number:
Lincoln, NE 68501-1889 FEIN Number: 47-0098400
(800) 756-1112 ext. [Phone]

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Filing Fees

Fee Required? Yes
Fee Amount: \$40.00
Retaliatory? No
Fee Explanation: \$20 x 2 applications = \$40
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Ameritas Life Insurance Corp.	\$40.00	02/05/2010	34008817

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	02/16/2010	02/16/2010

SERFF Tracking Number: AMFA-126476764 *State:* Arkansas
Filing Company: Ameritas Life Insurance Corp. *State Tracking Number:* 44773
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Disposition

Disposition Date: 02/16/2010

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: AMFA-126476764 State: Arkansas
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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Statement of Variability		Yes
Form	Application Component Page for VUL		Yes
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Form Schedule

Lead Form Number: UN 2550 IA-V

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	UN 2550 IA-V	Application/ Enrollment Form	Application Component Page for VUL	Revised	Replaced Form #: UN 2550 IA-V ALIC Previous Filing #: 37641	0.000	UN 2550 IA-V- STANDARD-FINAL- Bracketed.pdf
	UN 92 IA-V	Application/ Enrollment Form	Application Component Page for VUL	Revised	Replaced Form #: UN 92 AL IA Previous Filing #: 42878	0.000	UN 92 IA-V- STANDARD-FINAL- Bracketed.pdf

Ameritas Life Insurance Corp.

P.O. Box 81889, Lincoln, NE 68501
800-745-1112 Fax 402-467-7335

Telephone Authorization:

Unless waived, the Owner and Producer/Registered Representative will have automatic telephone transfer authorization.

I elect NOT to have telephone authorization.

I elect NOT to have my Registered Representative have telephone authorization.

I hereby authorize and direct Ameritas Life Insurance Corp. ("Ameritas") to make allowable transfers of funds or reallocation of net premiums among available subaccounts based upon instructions received by telephone from: a) myself, as Owner; b) my Producer/Registered Representative; and c) the person(s) named below. Ameritas will not be liable for following instructions communicated by telephone that it reasonably believes to be genuine. Ameritas will employ reasonable procedures, including requiring the policy number to be stated, tape recording all instructions, and mailing written confirmation. If Ameritas does not employ reasonable procedures to confirm that instructions communicated by telephone are genuine, Ameritas may be liable for any losses due to unauthorized or fraudulent instructions.

Name per (c) above: _____ SS#: _____

Address: _____

I understand: a) all telephone transactions will be recorded; and b) this authorization will continue in force until the authorization is revoked by either Ameritas or me. The revocation is effective when received in writing or by telephone by the other party.

Investment Advisory Agreement for Model Asset Allocation

In selecting to participate in the Model Asset Allocation program using the Asset Allocation tool, I understand:

- I am giving Ameritas Investment Corp. ("AIC"), an affiliate of Ameritas Life Insurance Corp. ("Ameritas"), discretionary authority to serve as my investment advisor for the program solely for purposes of developing asset allocation models and periodic updates to the models, and to instruct Ameritas to allocate my premiums and policy values pursuant to the model I select and any changes to the model by AIC. I am not retaining AIC as my investment adviser for any other financial planning purposes, unless agreed to expressly in writing. There is no additional charge for selecting the Model Asset Allocation program.
- I must decide whether participation in the program and which model is best for me. AIC will not make this decision for me. The Asset Allocation Questionnaire is only a tool to assist me. I may consult my own financial professional to help me.
- If I ever direct Ameritas to allocate my premiums or policy value to portfolios not included in the models, I will no longer receive updates to the models and this limited advisory agreement will terminate.
- AIC and Ameritas may be subject to competing interests that have the potential to influence AIC's decision making with regard to the models, including revenue sharing from portfolios, and additional advisory fees and principal underwriting fees. These potential conflicts are disclosed in the Policy prospectus and AIC's Form ADV Part II, which I acknowledge having received, and the Policy Statement of Additional Information, which I have the opportunity to obtain.
- AIC or Ameritas may terminate or change its available asset allocation program(s) at any time.
- This agreement is effective upon receipt and approval by Ameritas and AIC of my election to participate.

Ameritas Life Insurance Corp.
P.O. Box 81889, Lincoln, NE 68501
800-745-1112, Fax 402-467-7335

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Supporting Document Schedules

	Item Status:	Status Date:
Bypassed - Item: Flesch Certification Bypass Reason: Does not apply - variable products exempt. Comments:		

	Item Status:	Status Date:
Bypassed - Item: Application Bypass Reason: This filing is for an application - attached under Form Schedule. Comments:		

	Item Status:	Status Date:
Satisfied - Item: Statement of Variability Comments: Attachment: SOV-020310.pdf		

STATEMENT OF VARIABILITY

UN 2550 IA-V and UN 92 IA-V

1. The Corporate logo may be removed or changed as determined by business needs.
2. The Company address, phone number and fax number may change as determined by business needs.