

SERFF Tracking Number: CRCP-126575847 State: Arkansas
Filing Company: John Hancock Life Insurance Company (U.S.A.) State Tracking Number: 45410
Company Tracking Number: CCS1021-506AR
TOI: A03I Individual Annuities - Deferred Variable Sub-TOI: A03I.002 Flexible Premium
Product Name: BR010.10
Project Name/Number: /

Filing at a Glance

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

Product Name: BR010.10

SERFF Tr Num: CRCP-126575847 State: Arkansas

TOI: A03I Individual Annuities - Deferred Variable

SERFF Status: Closed-Approved- Closed State Tr Num: 45410

Sub-TOI: A03I.002 Flexible Premium

Co Tr Num: CCS1021-506AR

State Status: Approved-Closed

Filing Type: Form

Reviewer(s): Linda Bird

Author: Sarah Huffer

Disposition Date: 04/14/2010

Date Submitted: 04/13/2010

Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile: Authorized

Project Number:

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments: State of Domicile is Michigan, rider is not required to be filed in Michigan.

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 04/14/2010

Explanation for Other Group Market Type:

State Status Changed: 04/14/2010

Deemer Date:

Created By: Sarah Huffer

Submitted By: Sarah Huffer

Corresponding Filing Tracking Number:

Filing Description:

John Hancock Life Insurance Company (U.S.A.) submits form number BR010.10 for review and approval. The form is filed in accordance with the applicable statutes and regulations of your jurisdiction and is laser printed, subject only to minor variations in paper stock, color, fonts, duplexing, and positioning. This form is new and is not intended to replace existing forms. The form will be effective on the date of approval. No part of this filing contains any unusual or controversial items from normal Company or industry standards. The form provides for additional or greater benefits than those in the base policy and no part of the form revises the Contract to reduce benefits or provide less favorable terms than in the Contract.

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Rider BR010.10 will be used with new issues of the Company's previously approved Flexible Premium Individual Deferred Variable Annuity contracts. The currently available annuity contracts are form numbers VENTURE-VA.AW.07, VENTURE-VA.A.07, and VENTURE-VA.B.07, all approved by your department on August 17, 2007 and VENTURE.100, approved by your department September 18, 2000.

This Enhanced Death Benefit rider provides the contract holder an additional option when calculating the death benefit, the annual step death benefit. The annual step death benefit is determined by finding the maximum of all Contract values at each Contract anniversary between the rider date and the Contract anniversary on or immediately following the date the Owner attains the Maximum Step Age. This maximum value is then increased by all payments made since that Contract Anniversary and decreased by a proportional amount, as described in the rider, in connection with partial withdrawals to determine the annual step benefit.

The target market is middle to upper class individuals planning for retirement through annuities purchased for IRAs, Roth IRAs or nonqualified contracts. The product is designed for individuals who desire the protection offered by annuity contract guarantees including death benefits, but also desire to participate in potential market gains available through variable annuity contracts. The maximum issue age is 74.

The cost for this rider is a fee deducted from each variable Investment Option at a fixed annual percentage rate set at issue.

The enclosed form includes brackets around the items that may vary. The use of variability in the enclosed form will be administered as described in the enclosed statement of variability and in a uniform and non-discriminatory manner.

Thank you very much for your assistance in this matter.

Company and Contact

Filing Contact Information

Sarah Huffer, administrative assistant shuffer@currincompliance.com
14 Main Street, Suite 200 518-692-2494 [Phone]
Greenwich, NY 12834 866-549-2059 [FAX]

Filing Company Information

(This filing was made by a third party - currincomplianceservicesllc)

John Hancock Life Insurance Company CoCode: 65838 State of Domicile: Michigan
(U.S.A.)
601 Congress Street Group Code: 904 Company Type:
Boston, MA 02210 Group Name: John Hancock Group State ID Number:

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(416) 926-0100 ext. [Phone] FEIN Number: 01-0233346

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
John Hancock Life Insurance Company (U.S.A.)	\$50.00	04/13/2010	35608350

SERFF Tracking Number: CRCP-126575847 State: Arkansas
Filing Company: John Hancock Life Insurance Company (U.S.A.) State Tracking Number: 45410
Company Tracking Number: CCS1021-506AR
TOI: A031 Individual Annuities - Deferred Variable Sub-TOI: A031.002 Flexible Premium
Product Name: BR010.10
Project Name/Number: /

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	04/14/2010	04/14/2010

SERFF Tracking Number: CRCP-126575847 State: Arkansas
Filing Company: John Hancock Life Insurance Company (U.S.A.) State Tracking Number: 45410
Company Tracking Number: CCS1021-506AR
TOI: A031 Individual Annuities - Deferred Variable Sub-TOI: A031.002 Flexible Premium
Product Name: BR010.10
Project Name/Number: /

Disposition

Disposition Date: 04/14/2010

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: CRCP-126575847 State: Arkansas
 Filing Company: John Hancock Life Insurance Company (U.S.A.) State Tracking Number: 45410
 Company Tracking Number: CCS1021-506AR
 TOI: A031 Individual Annuities - Deferred Variable Sub-TOI: A031.002 Flexible Premium
 Product Name: BR010.10
 Project Name/Number: /

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification	No	No
Supporting Document	Application	No	No
Supporting Document	Life & Annuity - Actuarial Memo	No	No
Supporting Document	Authorization Letter	Yes	Yes
Supporting Document	Statement of Variable Material	Yes	Yes
Form	Rider	Yes	Yes

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 TOI: A031 Individual Annuities - Deferred Variable Sub-TOI: A031.002 Flexible Premium
 Product Name: BR010.10
 Project Name/Number: /

Form Schedule

Lead Form Number:

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	BR010.10	Policy/Cont Rider ract/Fratern al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial			BR010_10 (00061325).P DF

ENHANCED DEATH BENEFIT RIDER

This Rider is effective on the Rider Date. Election of this Rider is irrevocable and it may only be terminated as provided in the Termination provisions below. It is a part of, and subject to, the other terms and conditions of the Contract.

SPECIFICATIONS

MAXIMUM STEP AGE [75]

DEFINITIONS

ANNUAL STEP DEATH BENEFIT The Annual Step Death Benefit is the greatest Anniversary Value for any Contract Anniversary on or after the Rider Date and prior to the Owner's death, up to and including the Contract Anniversary on or next following the date the oldest Owner attains the Maximum Step Age. The Anniversary Value is equal to the Contract Value on a Contract Anniversary, increased by all Payments made, less any amount deducted in connection with partial withdrawals, since that Contract Anniversary.

For purposes of calculating the Annual Step Death Benefit, the amount deducted in connection with partial withdrawals will be equal to (i) times (ii), where (i) is equal to the Annual Step Death Benefit prior to the withdrawal, and (ii) is equal to the partial withdrawal amount divided by the Contract Value prior to the partial withdrawal.

RIDER DATE The date of issue of this Rider, as specified on the Specifications Page.

DEATH BENEFIT

On the death of any Owner prior to the Maturity Date, a Death Benefit will be determined as of the date on which written notice and proof of death and all required claim forms are received at the Company's Annuity Service Office. The Death Benefit will be determined as the greater of:

- a) The Death Benefit described under "Death Benefit Before Maturity Date" in the Contract; or
- b) The Annual Step Death Benefit.

If there is any Debt, the Death Benefit equals the amount described above less the Debt under the Contract.

If the Beneficiary elects to continue the Contract as his or her own under Internal Revenue Code sections 72(s) or 401(a)(9), this Rider will continue with the Beneficiary as the new Owner. If the Beneficiary has already attained the Maximum Step Age then the rider will not continue. Upon the death of the Beneficiary prior to the Maturity Date, a Death Benefit will be paid and the entire interest in the Contract must be distributed to the new Beneficiary in accordance with the provisions of the Contract. For purposes of calculating the Death Benefit payable upon the death of the Beneficiary, the Death Benefit paid upon the first Owner's death will be treated as a Payment to the Contract. This Payment will not be included in cumulative Payments and is not eligible for any Payment Enhancement. In addition, all Payments made and all amounts deducted in connection with partial withdrawals prior to the date of the first Owner's death will not be considered in determination of the Death Benefit. In determination of the Annual Step Death Benefit, the Anniversary Values for all prior Contract Anniversaries will be set to zero as of the date of the first Owner's death.

If the Beneficiary is not eligible to continue the Contract as his or her own under Internal Revenue Code sections 72(s) or 401(a)(9), or does not elect to continue the Contract, the Death Benefit will be distributed to the Beneficiary in accordance with the provisions of the Contract.

DEATH OF ANNUITANT

If any Owner is not an individual, the death of any Annuitant is treated as the death of an Owner. The Death Benefit will be determined as described above by substituting the Annuitant for the Owner.

DEATH BENEFIT RIDER FEE

To compensate us for assuming mortality risks associated with the Death Benefit Rider, We deduct from each variable Investment Option a Death Benefit Rider Fee each Valuation Period at an annual rate set forth on the Specifications Page. The Death Benefit Rider Fee increases the Asset Fee described in the Contract.

TERMINATION

This Rider will terminate upon the earliest of

- (a) the date the Contract terminates,
- (b) the Maturity Date,
- (c) the date on which the Death Benefit described in this Rider is paid, or
- (d) the date the Owner is changed or the Contract is assigned, unless
 - (i) the new Owner or assignee assumes full ownership of the Contract and is the same person, or a member of corporation, trust or other similar entity with the same person as prior to the ownership change or assignment, or
 - (ii) the assignment is for purposes of effectuating an exchange of the contract under Section 1035 of the Internal Revenue Code.

MISCELLANEOUS

Except as modified by this Rider, the Definitions, General Provisions and Ownership sections of the Contract also apply to this Rider. If this Rider is added after the Contract Date, its effective date will be the Rider Date stated in the Specifications Page. If this Rider is added at the time the Contract is issued, it will be effective on the Contract Date.

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

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Secretary

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Supporting Document Schedules

	Item Status:	Status Date:
Bypassed - Item: Flesch Certification Bypass Reason: This rider is for variable annuity contracts only. Comments:		
Bypassed - Item: Application Bypass Reason: This filing is a rider. Comments:		
Satisfied - Item: Authorization Letter Comments: Attachment: Authorization Letter (00061130).PDF		
Satisfied - Item: Statement of Variable Material Comments: Attachment: BR010-10 SOV (00060606).PDF		

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

Annuity Product Development
601 Congress Street, 12-059
Boston, Massachusetts 02210-2805
Phone: 800-908-6008 ext. 33918
Fax: (617) 663-3150
Email: kdowdell@JHancock.com



Kathryn T. Dowdell, FSA, MAAA, FLMI, AIRC
Product Actuary

April 5, 2010

Please be advised Currin Compliance Services, LLC, is authorized to represent John Hancock Life Insurance Company (U.S.A.) in the submission of the enclosed filing. They are authorized to act on our behalf with regard to this submission and all correspondence should be sent to them.

Sincerely,

A handwritten signature in cursive script that reads "Kathryn Dowdell".

Kathryn T. Dowdell

**John Hancock Life Insurance Company (U.S.A.)
NAIC # 65838**

Memorandum of Variable Material for:

BR010.10

March 29, 2010

Variable Material denoted by bracketing.

Maximum Step Age: Range: 70-90

Title and Signature: In the event the title of an officer signing the endorsement changes, any new title utilized will be the title of an officer of the company.