

SERFF Tracking Number: MUTM-127061619 State: Arkansas
Filing Company: United of Omaha Life Insurance Company State Tracking Number: 48142
Company Tracking Number: ASHLEY WILLIAMS
TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other
Product Name: Living Care Annuity with Long Term Care Advertising - AFN41836_0311
Project Name/Number: Living Care Annuity with Long Term Care Advertising/AFN41836_0311

Filing at a Glance

Company: United of Omaha Life Insurance Company

Product Name: Living Care Annuity with Long Term Care Advertising - AFN41836_0311
SERFF Tr Num: MUTM-127061619 State: Arkansas

TOI: LTC06 Long Term Care - Other SERFF Status: Closed-Filed State Tr Num: 48142
Sub-TOI: LTC06.000 Long Term Care - Other Co Tr Num: ASHLEY WILLIAMS State Status: Filed-Closed
Filing Type: Advertisement Reviewer(s): Harris Shearer, Stephanie Fowler
Author: Ashley Williams Disposition Date: 03/09/2011
Date Submitted: 03/02/2011 Disposition Status: Filed
Implementation Date: Implementation Date:

Implementation Date Requested:

State Filing Description:

General Information

Project Name: Living Care Annuity with Long Term Care Advertising
Project Number: AFN41836_0311
Requested Filing Mode:
Explanation for Combination/Other:
Submission Type: New Submission
Overall Rate Impact:

Status of Filing in Domicile:
Date Approved in Domicile:
Domicile Status Comments:
Market Type: Individual
Individual Market Type:
Filing Status Changed: 03/09/2011
State Status Changed: 03/09/2011
Created By: Ashley Williams
Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Ashley Williams

Filing Description:

NAIC #261-69868

FEIN #47-0322111

United of Omaha Life Insurance Company

Living Care Annuity with Long Term Care Advertising

AFN41836_0311

Enclosed for review by your Department is a copy of the above-captioned advertising. The forms are new and are not intended to replace any previously approved forms. They will be used with appropriate approved forms in your state.

We request that any information in brackets be considered variable. A Memorandum of Variable Material describing the

SERFF Tracking Number: MUTM-127061619 State: Arkansas
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variable items are attached.

Your notice of acceptance of this filing will be greatly appreciated.

Sincerely,

Carly Cole
Product and Advertising Compliance Consultant
Corporate Compliance and Ethics
Phone: 402-351-2476
Fax: 402-351-5298
E-mail: carly.cole@mutualofomaha.com

aw

Company and Contact

Filing Contact Information

Carly Cole, Product & Advertising Compliance carly.cole@mutualofomaha.com
Consultant
Mutual of Omaha 402-351-2476 [Phone]
Mutual of Omaha Plaza 402-351-5298 [FAX]
Omaha, NE 68175

Filing Company Information

United of Omaha Life Insurance Company	CoCode: 69868	State of Domicile: Nebraska
Mutual of Omaha Plaza	Group Code: 261	Company Type: Life Insurance
Omaha, NE 68175	Group Name:	State ID Number:
(402) 351-6910 ext. [Phone]	FEIN Number: 47-0322111	

Filing Fees

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

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COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
United of Omaha Life Insurance Company	\$50.00	03/02/2011	45200627

SERFF Tracking Number: MUTM-127061619 State: Arkansas
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Stephanie Fowler	03/09/2011	03/09/2011

SERFF Tracking Number: MUTM-127061619 State: Arkansas
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Disposition

Disposition Date: 03/09/2011

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: MUTM-127061619 State: Arkansas
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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Memorandum of Variability	Filed	Yes
Form	Illustration	Filed	Yes

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Form Schedule

Lead Form Number: AFN41836_0311

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed 03/09/2011	AFN41836_0311	Advertising	Illustration	Initial		0.000	AFN41836_0311.pdf



Living Care[®] Annuity
SETTING YOUR RISK BOUNDARIES

Living Care[®] Annuity

Deferred Annuity with Long-Term Care Benefits

Prepared for: ¹ [client name]

Presented by: ² [producer name]

³ [producer office]

⁴ [producer address]

⁵ [producer city]

⁶ [producer phone]

This is an illustration only and is subject to approval by United of Omaha Life Insurance Company. Actual Interest Rates used will be those in effect on the date the purchase payment is received. United of Omaha Life Insurance Company will not be bound by any improper quote.

This proposal is for illustration purposes only. Please consult your contract for contractual guarantees.

Underwritten by United of Omaha Life Insurance Company, Mutual of Omaha Plaza, Omaha, Nebraska 68175

^{f2}[MM/DD/YYYY]

⁷[AFN41836_0311]

Policy Form ^{f3}[XXXXXXXXXX] ^{f7}[-1]

Page 1 of 7

UNITED of OMAHA LIFE INSURANCE COMPANY

Deferred Annuity with Long-Term Care Benefits

Designed For: ¹[Client Name]
 Age : ⁸[Age] / ⁴[Sex]

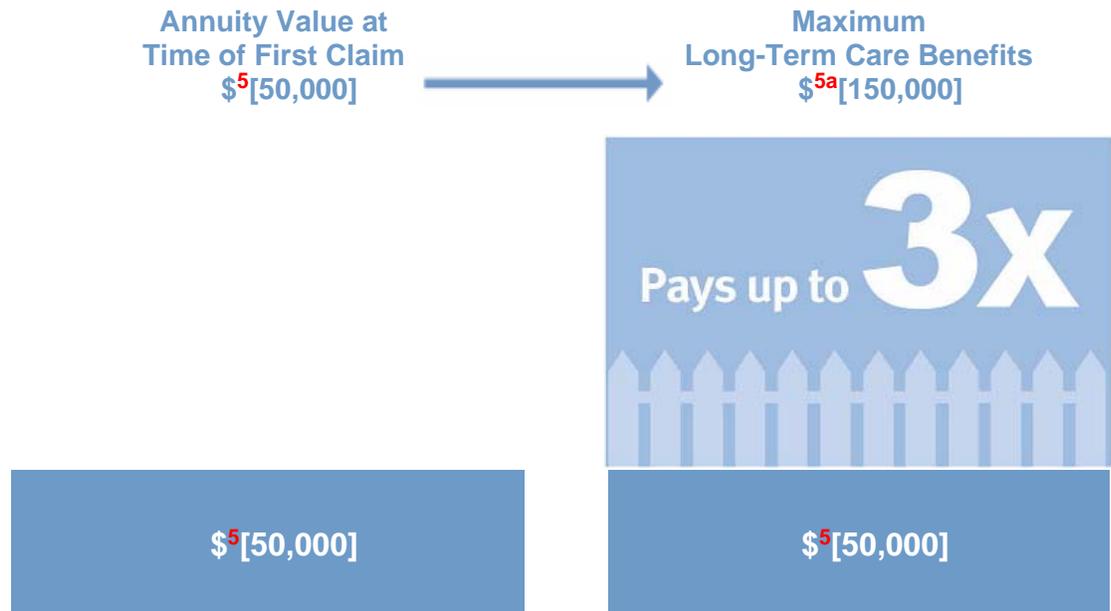
State of Issue: ²[XX]

Single Purchase Payment: \$ ⁵[50,000]

Date: ⁶[MM/DD/YYYY]

Living Care[®] Annuity

Living Care[®] Annuity combines a deferred fixed rate annuity with built-in long-term care benefits. A deferred fixed rate annuity is a financial planning tool that can help you save more money for retirement. It earns a fixed rate of interest and grows tax-deferred until you begin taking income payments from it. And, in addition to helping you save more money, Living Care[®] Annuity can provide you up to three times the annuity value in long-term care benefits if you need them ... guaranteed!



Benefits

Deferred Annuity

- Guaranteed ⁷[2.25]% Minimum Interest Rate
- Optional Inflation Protection Benefit
- Terminal Illness Waiver
- Tax Deferred Accumulation
- ⁸[Avoids Probate]
- Lifetime Income Options

Long-Term Care Rider

- Nursing Home Care
- Assisted Living Facility
- Adult Day Care
- Home Health Care
- Additional Care Types
 Alternative Care Service,
 Homemaker Services,
 Personal Care Respite Care,
 Caregiver Training

This proposal is for illustration purposes only. Please consult your contract for contractual guarantees.

Underwritten by United of Omaha Life Insurance Company, Mutual of Omaha Plaza, Omaha, Nebraska 68175

Presented by: ^{f2}[Company Name] – ^{f3}[Producer Name]

Version: ^{f5}[X.XX]

Policy Form: ^{f6}[XXXXXXXXXX] ^{f7} [-1]

UNITED of OMAHA LIFE INSURANCE COMPANY

Deferred Annuity with Long-Term Care Benefits

Designed for: ¹[Client Name]
 Age: ³[age] / ⁴[Sex]

State of Issue: ²[XX]

Single Purchase Payment: \$ ⁵[999,999,999]

Date: ⁶[MM/DD/YYYY]

All financial guarantees in this illustration are backed by United of Omaha Life Insurance Company

Values Based on Guaranteed Interest Rate: ⁷[99.99] %

End of Year	Purchase Payment* (show asterisk only if Inflation Protection Rider is added)	Annuity Value	Surrender Value	LTC Maximum Daily Benefit**	LTC Maximum Lifetime Benefit**
1	\$999,999,999	\$99,999,999	\$99,999,999	¹⁰ [\$0]	¹⁰ [\$0]
2	\$999,999,999	\$99,999,999	\$99,999,999	¹⁰ [\$0]	¹⁰ [\$0]
3	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
4	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
5	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
6	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
7	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
8	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
9	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
10	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
11	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
12	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
13	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
14	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
15	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
16	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
17	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
18	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
19	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
20	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99

⁸[Values in year one reflect an additional ^{8a}[1.00]% Bonus Rate from the date the Purchase Payment is received for both the Guaranteed and Illustrated values.]

*Purchase Payment Values reflect the necessary long-term care deposit payments for the Compound Inflation Protection Endorsement in order to increase your Tax Qualified Long-Term Care Insurance Rider's Maximum Daily Benefit and the Maximum Lifetime Benefit by at least 5%. This is assumed to be paid at the end of the year(print only if Inflation Protection Rider is selected)

** LTC benefits are not payable until after the ⁹[coverage eligibility date, which is 2 years after issue.] Any long-term care benefits paid will reduce, by the amount of the benefit payment, the annuity value until the annuity value equals one dollar. Long-term care benefit payments will continue to be paid thereafter up to the Maximum Lifetime Benefit.

All contract values are shown as of the end of the year.

This contract may not cover all of the costs associated with long-term care incurred by the insured during the period of coverage. Please carefully review the accompanying outline of coverage for full description of contract benefits, contract limitations, and exclusions.

The values shown in this illustration do not reflect a deduction for any applicable premium tax. Values shown do not reflect any partial withdrawals or withdrawal percentages due to taking partial withdrawals.

This proposal is for illustration purposes only. Please consult your contract for contractual guarantees.

Underwritten by United of Omaha Life Insurance Company, Mutual of Omaha Plaza, Omaha, Nebraska 68175

Presented by: ^{f2}[Company Name] – ^{f3}[Producer Name]

Version: ^{f5}[X.XX]

Policy Form: ^{f6}[XXXXL-XXXX] ^{f7}[-1]

Page: 3 of 7

UNITED *of* OMAHA LIFE INSURANCE COMPANY

Deferred Annuity with Long-Term Care Benefits

Designed for: ¹[Client Name]

State of Issue: ²[XX]

Age: ³[age] / ⁴[Sex]

Single Purchase Payment: \$ ⁵[999,999,999]

Date: ⁶[MM/DD/YYYY]

All financial guarantees in this illustration are backed by United of Omaha Life Insurance Company

Values Based on Non-Guaranteed Illustrated Interest Rate: ⁷[99.99] %

End of Year	Purchase Payment* (show asterisk only if Inflation Protection Rider is added)	Annuity Value	Surrender Value	LTC Maximum Daily Benefit**	LTC Maximum Lifetime Benefit**
1	\$999,999,999	\$99,999,999	\$99,999,999	¹⁰ [\$0]	¹⁰ [\$0]
2	\$999,999,999	\$99,999,999	\$99,999,999	¹⁰ [\$0]	¹⁰ [\$0]
3	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
4	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
5	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
6	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
7	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
8	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
9	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
10	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
11	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
12	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
13	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
14	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
15	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
16	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
17	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
18	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
19	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99
20	\$999,999,999	\$99,999,999	\$99,999,999	\$99,999,999.99	\$99,999,999.99

⁸[Values in year one reflect an additional ^{8a}[1.00]% Bonus Rate from the date the Purchase Payment is received for both the Guaranteed and Illustrated values.]

** LTC benefits are not payable until after the ⁹[coverage eligibility date, which is 2 years after issue.] Any long-term care benefits paid will reduce, by the amount of the benefit payment, the annuity value until the annuity value equals one dollar. Long-term care benefit payments will continue to be paid thereafter up to the Maximum Lifetime Benefit.

All contract values are shown as of the end of the year.

This contract may not cover all of the costs associated with long-term care incurred by the insured during the period of coverage. Please carefully review the accompanying outline of coverage for full description of contract benefits, contract limitations, and exclusions.

The values shown in this illustration do not reflect a deduction for any applicable premium tax. Values shown do not reflect any partial withdrawals or withdrawal percentages due to taking partial withdrawals.

*Purchase Payment Value in year one reflect the necessary long-term care deposit payments for the Compound Inflation Protection Endorsement in order to increase your Tax Qualified Long-Term Care Insurance Rider's Maximum Daily Benefit and the Maximum Lifetime Benefit by at least 5%. (print only if Inflation Protection Rider is selected)

This proposal is for illustration purposes only. Please consult your contract for contractual guarantees.
Underwritten by United of Omaha Life Insurance Company, Mutual of Omaha Plaza, Omaha, Nebraska 68175

Presented by: ^{f2}[Company Name] – ^{f3}[Producer Name]

Version: ^{f5}[X.XX] **Policy Form:** ^{f6}[XXXXL-XXXX] ^{f7}[-1]

Page: 4 of 7

UNITED of OMAHA LIFE INSURANCE COMPANY

Deferred Annuity with Long-Term Care Benefits

Designed for: ¹[Client Name]
Age: ³[age] / ⁴[Sex]

State of Issue: ²[XX]

Single Purchase Payment: \$ ⁵[999,999,999]

Date: ⁶[MM/DD/YYYY]

SUMMARY

Annuity Values

The Non-Guaranteed Annuity values are based on an Illustrated Interest Rate of ⁷[99.99]%.

The Guaranteed Annuity values are based on a Guaranteed Interest Rate of ^{7a}[3.00]% for all years.

^{7b}[Values in year one reflect an additional Interest Rate of ^{7c}(1.00)% from the date the Purchase Payment is received for both the Guaranteed and Illustrated values.]

LTC Maximum Daily Benefit

⁸[After year two,] the Maximum Daily LTC Benefit is equal to 1/730 of the contract's annuity value. The Maximum Daily Benefit payable at time of claim is the amount shown or the daily cost of care, whichever is less.

Any long-term care benefits paid will reduce, by the amount of the benefit payment, the annuity value until the annuity value equals one dollar. Long-term care benefit payments will continue to be paid thereafter up to the Maximum Lifetime Benefit.

Long-term care charges are deducted from the account values on a monthly basis based on age at issue. The Annuity and Surrender Values reflect these charges. Based on the client's issue age, the monthly cost as a percentage of the annuity value for the long-term care benefit is ⁸[99.99]%.

LTC Maximum Lifetime Benefit

The Maximum Lifetime Benefit will depend upon the annuity value as of the date we approve your first claim and does not reflect any future benefits received from the Compound Inflation Protection Endorsement, if any. The maximum benefit shown is equal to 3 times the Annuity Value.

Withdrawal Charges

Access of up to 10% of the annuity value is allowed in each contract year after year one without a withdrawal charge. If more than 10% of the annuity value is accessed, the following Withdrawal Charge Percentages will apply to the amount of the withdrawal in excess of 10%. Partial Withdrawals will be limited to maintain minimum long-term care benefit levels.

Table of Withdrawal Charge Percentages

Year	Percent	Year	Percent	Year	Percent	Year	Percent
1	[99]	4	[99]	7	[99]	10	[99]
2	[99]	5	[99]	8	[99]	11+	0
3	[99]	6	[99]	9	[99]		

All interest income earned in the annuity accumulates on a tax-deferred basis. A 10% federal tax penalty may apply for removal of funds prior to age 59 ½ unless an exception applies. Distributions of income from the annuity, at death or otherwise, are taxable as ordinary income. **Beginning 1/1/2010**, withdrawals to pay qualified long-term care benefits are income tax -free, and charges for these benefits are not subject to federal income tax.

This proposal is for illustration purposes only. Please consult your contract for contractual guarantees.

Underwritten by United of Omaha Life Insurance Company, Mutual of Omaha Plaza, Omaha, Nebraska 68175

Presented by: ^{f2}[Company Name] – ^{f3}[Producer Name]

Version: ^{f5}[X.XX]

Policy Form: ^{f6}[XXXXL-XXXX] ^{f7}[-1]

Page: 5 of 7

UNITED of OMAHA LIFE INSURANCE COMPANY

Deferred Annuity with Long-Term Care Benefits

Designed for: ¹[Client Name]
Age: ³[age] / ⁴[Sex]

State of Issue: ²[XX]

Single Purchase Payment: \$ ⁵[999,999,999]

Date: ⁶[MM/DD/YYYY]

⁷Endorsements

^{7a}[Endorsements provide extra benefits not included in the basic contract. Endorsements may affect the contract's annuity values.]

⁸[Compound Inflation Protection Endorsement]

^{8a}[Provided you make the necessary long-term care deposit payments for the Compound Inflation Protection Endorsement United of Omaha will increase your Tax Qualified Long-Term Care Insurance Rider's Maximum Daily Benefit and any unused portion of the Maximum Lifetime Benefit by at least 5% on each Endorsement Anniversary Date.]

Based on the client's issue age, the monthly cost as a percentage of the annuity value for the Compound Inflation Protection Endorsement is ^{8b}[99.99]%.
Renewal premiums are subject to change. Refer to the Endorsement for additional information.

These increases in benefits will not be determined by the actual amount of future inflation. The actual increases in benefits under your Tax Qualified Long-Term Care Insurance Rider may be greater or less than the amount of inflation.]

⁹[Non-Forfeiture Benefit -- Shortened Benefit Period Endorsement]

^{9a}[If your Tax Qualified Long-Term Care Insurance Rider terminates for any reason except death after having been in force for three years, United of Omaha will provide a continuation of coverage, but on a reduced basis, as long as the Maximum Lifetime Benefit has not been reduced to zero. In such event, we will pay benefits until the Shortened Benefit Period Allowance has been reached or the Eligibility for the Payment of Benefits provision requirements are no longer met, whichever occurs first. Benefits for Covered Services you receive will be paid up to the applicable daily, calendar year and lifetime benefit maximums in effect at the time of coverage termination.]

The Shortened Benefit Period Allowance we will pay will be the greater of: 100% of the sum of all monthly charges paid by you for your long-term care coverage, excluding any waived monthly charges, or 30 times the Maximum Daily Benefit in effect at the time of termination.

^{9b}(When the Compound Inflation Protection Endorsement is added, inflation protection benefit increases will stop if long-term care coverage is continuing under the Non-Forfeiture Benefit—Shortened Benefit Period Endorsement. As of the date your Tax Qualified Long-Term Care Insurance Rider terminates, no further inflation protection benefit increases will occur.)

Based on the client's issue age, the monthly cost as a percentage of the annuity value for the Non-Forfeiture Benefit – Shortened Benefit Period Endorsement is ^{9c}[99.99]%.
Renewal premiums are subject to change. Refer to the Endorsement for additional information.]

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Underwritten by United of Omaha Life Insurance Company, Mutual of Omaha Plaza, Omaha, Nebraska 68175

Presented by: ^{f2}[Company Name] – ^{f3}[Producer Name]

Version: ^{f5}[X.XX]

Policy Form: ^{f6}[XXXXL-XXXX] ^{f7}[-1]

Page: 6 of 7

UNITED *of* OMAHA LIFE INSURANCE COMPANY

Deferred Annuity with Long-term Care Benefits

Designed for: ¹[Client Name]
Age: ³[age] / ⁴[Sex]

State of Issue: ²[XX]

Single Purchase Payment: \$ ⁵[999,999,999]

Date: ⁶[MM/DD/YYYY]

DEFINITION OF TERMS

Interest	The term "Interest", as used in the contract, and this illustration as it relates to the contract, means the dollar amount of interest credited to the annuity value or the Proceeds held by United of Omaha as a result of the application of an Interest Rate for a specified period of time.
Interest Rate	The term "Interest Rate", as used in the contract, and this illustration, means an annualized rate of Interest. (Note: To calculate Interest, we will multiply the annuity value or Proceeds by a daily periodic rate which, when compounded daily, will result in the annuity value or Proceeds earning the Interest Rate set in accordance with the applicable provisions of this contract.)

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Underwritten by United of Omaha Life Insurance Company, Mutual of Omaha Plaza, Omaha, Nebraska 68175

Presented by: ^{f2}[Company Name] – ^{f3}[Producer Name]

Version: ^{f5}[X.XX]

Policy Form: ^{f6}[XXXXL-XXXX] ^{f7}[-1]

Page: 7 of 7

SERFF Tracking Number: MUTM-127061619 State: Arkansas
Filing Company: United of Omaha Life Insurance Company State Tracking Number: 48142
Company Tracking Number: ASHLEY WILLIAMS
TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other
Product Name: Living Care Annuity with Long Term Care Advertising - AFN41836_0311
Project Name/Number: Living Care Annuity with Long Term Care Advertising/AFN41836_0311

Supporting Document Schedules

	Item Status:	Status
Satisfied - Item: Memorandum of Variability	Filed	03/09/2011
Comments:		
Attachment:		
AFN41836_0311 - Variability Form.pdf		

VARIABLE MATERIAL FOR ADVERTISING FORM

Form Number: AFN41836_0311

The following information in the aforementioned advertisement is bracketed to denote variable material.

The MOV has been created from the spec document for winflex. So based on selection of state the program will pull information from the .ini file, which will populate the document with the correct form numbers and headers.

Section	Explanation
1. Page 1	1 Print [Client Name] from input screen 2 Print [Producer Name] from input screen 3 Print [Producer Office] from input screen 4 Print [Producer Address] from input screen 5 Print [Producer City], [Producer State], [Producer Zip Code] from input screen 6 Print [Producer Phone] from input screen 7 Print form number AFN41836_0311 f2 Print current system date in MM/DD/YYYY format f3 Print policy form number for state selected. f4 Print only in the state of Florida
2.	1-6 Standard Header: <ul style="list-style-type: none"> • 1 - [Insured]: Print [Client Name] from input screen • 2 - [State of Issue]: Print state of issue from input screen • 3 - [age]: Print [Age last birthday] from input screen Issue ages are from 40 to 79. • 4 - [sex]: Print [Sex] from input screen <ul style="list-style-type: none"> ○ if state is Montana, don't print sex • 5 - [purchase payment]: Print [purchase payment] from input screen <ul style="list-style-type: none"> minimum amount: \$50,000 maximum amount: \$300,000 <ul style="list-style-type: none"> • will need a home office tab to enter purchase payments above the maximum. • 5a – purchase payment times by 3 • 6 - Print date illustration was ran 7 print the guaranteed interest rate.

	<p>8 Print for all states except IA</p> <p>f2 [Company Name] = Print [Company Name] from input screen</p> <p>f3 [Producer Name] = Print [Producer Name] from input screen</p> <p>f5 Print current software version number</p> <p>f6 Print policy form number for state selected.</p> <p>f7 Print only in the state of Florida</p>
<p>3. Page 3&4</p>	<ul style="list-style-type: none"> • If ledger numbers go to a second page, print footnotes at the bottom of each page. • Print column heading starting at “All financial guarantees in this illustration are backed by United of Omaha Life Insurance Company” on each page of the ledger that prints. • If Compound Inflation Protection Endorsement is not added, print 0 in the Purchase Payment beginning in year 2. <p>1-6 Standard Header:</p> <ul style="list-style-type: none"> • 1 - [Insured]: Print [Client Name] from input screen • 2 - [State of Issue]: Print state of issue from input screen • 3 - [age]: Print [Age last birthday] from input screen Issue ages are from 40 to 79. • 4 - [sex]: Print [Sex] from input screen <ul style="list-style-type: none"> ○ if state is Montana, don't print sex • 5 - [purchase payment]: Print [purchase payment] from input screen minimum amount: \$50,000 maximum amount: \$300,000 <ul style="list-style-type: none"> • will need a home office tab to enter purchase payments above the maximum. • 6 - Print date illustration was ran <p>7 print the guaranteed interest rate.</p> <p>8 print only if there is an additional interest rate credited in policy year 1.</p> <ul style="list-style-type: none"> • 8a print the additional interest rate. • Bonus will be reflected in the monthly interest rate validation code <p>9 Print only in the state of WI and OH - [elimination period has been satisfied, which is 180 days for the Contract Years 1 and 2. For Contract Years 3 and above, the elimination period will be 90 days.]</p> <p>10 Print benefit amounts in the state of MT, OH, TN and WI– all other states should be \$0.</p> <p>f2 [Company Name] = Print [Company Name] from input screen</p> <p>f3 [Producer Name] = Print [Producer Name] from input screen</p> <p>f5 Print current software version number</p>

	f6	Print policy form number for state selected.
	f7	Print only in the state of Florida
4. Page 5&6		<ul style="list-style-type: none"> • If ledger numbers goto a second page, print footnotes at the bottom of each page. • Print column heading starting at “All financial guarantees in this illustration are backed by United of Omaha Life Insurance Company” on each page of the ledger that prints. • If Compound Inflation Protection Endorsement is not added, print 0 in the Purchase Payment beginning in year 2. <p>1-6 Standard Header:</p> <ul style="list-style-type: none"> • 1 - [Insured]: Print [Client Name] from input screen • 2 - [State of Issue]: Print state of issue from input screen • 3 - [age]: Print [Age last birthday] from input screen Issue ages are from 40 to 79. • 4 - [sex]: Print [Sex] from input screen <ul style="list-style-type: none"> ○ if state is Montana, don't print sex • 5 - [purchase payment]: Print [purchase payment] from input screen minimum amount: \$50,000 (in SD- minimum is \$75,000) maximum amount: \$300,000 <ul style="list-style-type: none"> • will need a home office tab to enter purchase payments above the maximum. • 6 - Print date illustration was ran <p>7 print the Illustrated Interest Rate = Print [Illustrative Rate] from Policy Options TAB. If ‘Current’ is selected, will print the same as Non-Guar Current Interest Rate. (Note: This rate can not be above the Non-Guar current interest rate and can not be below the Guaranteed interest rate)</p> <p>8 print only if there is an additional interest rate credited in policy year 1.</p> <ul style="list-style-type: none"> • 8a print the additional interest rate. • Bonus will be reflected in the monthly interest rate validation code <p>9 Print only in the state of WI and OH - [elimination period has been satisfied, which is 180 days for the Contract Years 1 and 2. For Contract Years 3 and above, the elimination period will be 90 days.]</p> <p>11 Print benefit amounts in the state of MT, OH, TN and WI– all other states should be \$0.</p> <p>f2 [Company Name] = Print [Company Name] from input screen</p> <p>f3 [Producer Name] = Print [Producer Name] from input screen</p> <p>f5 Print current software version number</p> <p>f6 Print policy form number for state selected.</p> <p>f7 Print only in the state of Florida</p>
5. Page 7	1-6	Standard Header:

	<ul style="list-style-type: none"> • 1 - [Insured]: Print [Client Name] from input screen • 2 - [State of Issue]: Print state of issue from input screen • 3 - [age]: Print [Age last birthday] from input screen Issue ages are from 40 to 79. • 4 - [sex]: Print [Sex] from input screen <ul style="list-style-type: none"> ○ if state is Montana, don't print sex • 5 - [purchase payment]: Print [purchase payment] from input screen minimum amount: \$50,000 (in SD- minimum is \$75,000) maximum amount: \$300,000 <ul style="list-style-type: none"> • will need a home office tab to enter purchase payments above the maximum. • 6 - Print date illustration was ran <p>7 print the Illustrated Interest Rate</p> <p>7a print the guaranteed interest rate.</p> <p>7b print only if there is an additional interest rate credited in policy year 1.</p> <p>7c print the additional interest rate.</p> <p>8 Remove if State of MT, OH, TN and WI. Capitalize the letter "T" in the word "the Maximum ..."</p> <p>f2 [Company Name] = Print [Company Name] from input screen</p> <p>f3 [Producer Name] = Print [Producer Name] from input screen</p> <p>f5 Print current software version number</p> <p>f6 Print policy form number for state selected.</p> <p>f7 Print only in the state of Florida</p>
<p>6. Page 8</p>	<p>1-6 Standard Header:</p> <ul style="list-style-type: none"> • 1 - [Insured]: Print [Client Name] from input screen • 2 - [State of Issue]: Print state of issue from input screen • 3 - [age]: Print [Age last birthday] from input screen Issue ages are from 40 to 79. • 4 - [sex]: Print [Sex] from input screen <ul style="list-style-type: none"> ○ if state is Montana, don't print sex • 5 - [purchase payment]: Print [purchase payment] from input screen minimum amount: \$50,000 (in SD- minimum is \$75,000) maximum amount: \$300,000 <ul style="list-style-type: none"> • will need a home office tab to enter purchase payments above the maximum. • 6 - Print date illustration was ran <p>7 Endorsements – includes all Endorsements that can be selected. Print 'Endorsements' page only when a Endorsement is selected</p>

	<p>7 – 9 Endorsements – print only if any Endorsement is selected</p> <ul style="list-style-type: none"> • Endorsements subject to state approval <p>8 Compound Inflation Protection Endorsement– print only if selected and approved in the state of issue</p> <ul style="list-style-type: none"> • Compound Inflation Protection Endorsement subject to state approval <p>8a print only if Compound Inflation Protection Endorsement is selected and approved in the state of issue.</p> <p>8b print the monthly cost as a percentage of the annuity value for this endorsement</p> <p>9 Non-Forfeiture Benefit – Shortened Benefit Period Endorsement– print only if selected and approved in the state of issue</p> <ul style="list-style-type: none"> • Compound Inflation Protection Endorsement subject to state approval <p>9a print only if Non-Forfeiture Benefit – Shortened Benefit Period Endorsement is selected and approved in the state of issue.</p> <p>9b print only when Compound Inflation Protection Endorsement is added.</p> <p>9c print the monthly cost as a percentage of the annuity value for this endorsement</p> <p>f2 [Company Name] = Print [Company Name] from input screen</p> <p>f3 [Producer Name] = Print [Producer Name] from input screen</p> <p>f4 Print current system date in MM/DD/YYYY format</p> <p>f5 Print current software version number</p> <p>f6 Print policy form number for state selected.</p> <p>f7 Print only in the state of Florida</p>
7. Page 9	<p>1-6 Standard Header:</p> <ul style="list-style-type: none"> • 1 - [Insured]: Print [Client Name] from input screen • 2 - [State of Issue]: Print state of issue from input screen • 3 - [age]: Print [Age last birthday] from input screen Issue ages are from 40 to 79. • 4 - [sex]: Print [Sex] from input screen <ul style="list-style-type: none"> ○ if state is Montana, don't print sex • 5 - [purchase payment]: Print [purchase payment] from input screen minimum amount: \$50,000 (in SD- minimum is \$75,000) maximum amount: \$300,000 <ul style="list-style-type: none"> • will need a home office tab to enter purchase payments above the maximum. • 6 - Print date illustration was ran <p>f2 [Company Name] = Print [Company Name] from input screen</p> <p>f3 [Producer Name] = Print [Producer Name] from input screen</p>

	f4	Print current system date in MM/DD/YYYY format
	f5	Print current software version number
	f6	Print policy form number for state selected.
	f7	Print only in the state of Florida

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