AXA EQUITABLE’s Term Series 151X

Product Guide

Launch Date: January 18, 2010

AXA EQUITABLE’s Term 10SM
AXA EQUITABLE’s Term 15SM
AXA EQUITABLE’s Term 20SM
AXA EQUITABLE’s ARTSM
# AXA Equitable’s Term Series 151X Product Guide

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AXA EQUITABLE’S TERM SERIES 151X PRODUCT GUIDE

The AXA Equitable’s Term Series (Series 151X) is an adjustment to the Term Series 150 premium rates. Some female premiums will be lowered and small increased will be made to some male rates mostly on the 15 and 20 year level terms. Just like the Series 150, the Series 151X consists of three Level Term products and one Annual Renewable Term product that will enable you to compete in the term marketplace. There is no change to the TermOne, Series 149 product.

Term Series 151X includes the same products as Term series 150:

AXA Equitable’s Term 10SM (Term 10)

AXA Equitable’s Term 15SM (Term 15)

AXA Equitable’s Term 20SM (Term 20)

AXA Equitable’s ARTSM (ART)

THE TERM SERIES 151X HIGHLIGHTS

- **Competitive rates** ... Death benefit protection at an affordable price.
- **Spectrum of Level Premium Guarantees** ...1 year, 10 years, 15 years or 20 years.
- **Attractive Conversion Provisions** ... helps you build an inventory for potential future sales and gives your client the possible option to convert the term policy to a new permanent policy, in the future, without submitting new evidence of insurability.
- **Quality Conversion Products** ... current conversion rules provide that your client may convert to a wide array of the permanent products, AXA Equitable or its affiliates offer at the time of conversion, subject to our rules then in effect as to plan, age and class of risk. For more details on conversion rules, see Page 23.
- **Guaranteed term conversion credit** ... upon conversion to a new permanent policy. The credit is available for the entire conversion period.
- **Minimum Issue Age of 18 (age nearest birth date)** for the AXA Equitable’s ART product.
- **Application for Life Insurance, AMIGV-2009 (or state variation)**. This application was developed in response to requests for a more user-friendly application. This application should help to expedite application completion and further reduce the number of errors resulting in faster policy issue.
- **Policy Filing via Interstate Compact**: Filing of the base policy via the Interstate Compact removes state variations for 34 jurisdictions that have joined as of the time the products were filed.
- The Term Series 151X products will be available for use in certain Qualified Plans.
- **Living Benefits for terminal illness** ... acceleration of the death benefit is included with all policies unless you specially decline it.
- **Competitive Risk Classes** … includes three Preferred classes.
• Easy access to policy information … online through “OnLine Account Access (OAA)” and the VOICE IT (IVR) System.

• Strength and stability of AXA Equitable, a subsidiary of AXA Financial.

ABOUT AXA EQUITABLE
When it comes to meeting your clients’ financial needs, the smart shopper knows a product is only as good as the company that stands behind it. Term Series 151X provides your clients with quality term products backed by the strength and stability of AXA Equitable Life Insurance Company. AXA Financial, Inc. is the holding company for AXA Equitable. AXA Equitable is a leading provider of insurance and annuity products designed to meet client needs and changing life situations. For more than a century, high quality insurance and annuity products have been the hallmark of AXA Equitable.

ABOUT AXA FINANCIAL, INC.
AXA Financial, Inc. is one of the premier U.S. organizations in financial protection and wealth management through its strong brands:
• AXA Equitable Life Insurance Company,
• AXA Advisors, LLC,
• AXA Distributors, LLC,
• AllianceBernstein, LP, and
• MONY Life Insurance Company and MONY Life Insurance Company of America.

AXA GROUP
AXA Equitable’s parent company, AXA Financial, Inc., is a member of the global AXA Group, a worldwide leader in financial protection and wealth management. AXA Group’s operations are diverse geographically, with major operations in Western Europe, North America, and the Asia/Pacific region. The AXA ordinary share is listed on the Paris Stock Exchange and trades under the symbol AXA. The AXA American Depositary Share is also listed on the NYSE under the ticker symbol AXA.

AXA EQUITABLE
AXA Equitable’s Term Series 151X policies are issued by AXA Equitable Life Insurance Company (“AXA Equitable”), a leading provider of insurance and annuity products designed to meet client needs and changing life situations. For more than a century, high quality insurance and annuity products have been the hallmark of AXA Equitable. Innovative from the start, we have continued to meet the changing needs of the marketplace. In 1976, we pioneered individual variable life insurance. And today, we are a respected leader in the financial services industry.

AXA Equitable is solely responsible for its obligations under AXA Equitable’s Term Series 151X policies. Any mention of AXA Financial, Inc. or AXA Group is for informational purposes only. It is not intended to imply that either company has any obligations under the AXA Equitable’s Term Series 151X policies.

All guarantees are based on the claims-paying ability of AXA Equitable Life Insurance Company.
## AXA Equitable’s Term Series 151X At-a-Glance

<table>
<thead>
<tr>
<th>Feature</th>
<th>Description</th>
</tr>
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</table>
| **Type of Policy**          | • TERM 10, TERM 15 and TERM 20 are non-participating, level premium term products with premiums that are guaranteed level for the entire 10, 15 or 20 year level premium period, respectively. After the guaranteed level premium period expires, premiums increase annually. All premiums are guaranteed.  
• ART is a non-participating, annually renewable term product with two sets of premiums - a set of current premiums and a set of guaranteed maximum premiums. Premiums increase each year after the first policy year and are based on the Insured’s attained age; however, they will never exceed the guaranteed maximum premiums shown in the policy. |
| **Policy Form Numbers**     | • TERM 10, TERM 15 and TERM 20 – 150-LT or state variation and ICC09-150-LT.  
• ART - 150-54 or state variation and ICC09-150-54. The Page 3 will include “a5aX” on the bottom right hand side of the page. |
| **Application and Supplement** | • Application AMIGV-2009 or state variation  
• Optional Benefits Supplement 180-6010 (2009) (03/09) or state variation. |
| **Gender**                  | Male, Female, and Unisex. Unisex is required in Montana and for cases subject to ERISA (Qualified Plans). We use 80/20 Male/Female blend for unisex rates. |
| **Qualified Plans**         | The Term Series 151X products are available for sale in qualified pension, profit-sharing and other ERISA plans. They will not be used with 412(e) plans. |
| **Minimum Face Amount**     | $1,000,000                                                                                                                                                                                                  |
| **Maximum Face Amount**     | Subject to availability of reinsurance                                                                                                                                                                       |
| **Underwriting Classes**    | Preferred Elite (Non-Tobacco User only)  
Preferred (Non-Tobacco User)  
Standard Plus (Non-Tobacco User only)  
Standard (Non-Tobacco User)  
Preferred (Tobacco User)  
Standard (Tobacco User) |
Feature Description

**Issue Age Limits**
AXA Equitable’s Term 10: 18-75
AXA Equitable’s Term 15: 18-70
AXA Equitable’s Term 20: 18-65
AXA Equitable’a ART: 18-70
Age is calculated based on age nearest birthday.

**Last Renewal Age**
For all products: 94 (coverage to 95).

**Premiums**
- TERM 10, TERM 15 and TERM 20: Fixed premium product. Regular scheduled premiums are required to keep the policy in force.
- ART: Indeterminate premium product. Regular scheduled premiums are required to keep the policy in force.

**Premium Payment Modes**
- Direct Billing – annual, semi-annual and quarterly.
- Systematic – monthly.
- Salary Allotment/Pension Trust – annual, semi-annual, quarterly, and monthly.
- Military Allotment – monthly.
The monthly mode is only allowed for special monthly – systematic, salary allotment and military allotment.

**Modal Factors and Policy Fees**

<table>
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<tr>
<th>Mode</th>
<th>Modal Factor*</th>
<th>Policy Fee**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual</td>
<td>1.0000</td>
<td>$75</td>
</tr>
<tr>
<td>Semi-annual</td>
<td>.5090</td>
<td>$39</td>
</tr>
<tr>
<td>Quarterly</td>
<td>.2565</td>
<td>$23</td>
</tr>
<tr>
<td>Systematic Monthly</td>
<td>.0855</td>
<td>$ 9</td>
</tr>
<tr>
<td>Salary allotment</td>
<td>.0855</td>
<td>$ 9</td>
</tr>
<tr>
<td>Military allotment</td>
<td>.0855</td>
<td>$ 9</td>
</tr>
</tbody>
</table>

*Modal factors are used to convert an annual premium to a payment frequency other than annual (i.e., semi-annual, quarterly or special monthly).
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<tr>
<th>Feature</th>
<th>Description</th>
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<tbody>
<tr>
<td><strong>The policy fees are non-commissionable, payable with each premium payment and do not vary by face amount.</strong></td>
<td></td>
</tr>
<tr>
<td><strong>ART 10% Premium Discount</strong></td>
<td>It is currently our practice to give a 10% discount, exclusive of policy fee for ART only, is available for the annual mode initial premium only. The discount is not available for policies issued in New Jersey or as a result of replacement of an existing AXA Equitable, MONY or MLOA policy.</td>
</tr>
</tbody>
</table>
| **Conversion Periods**          | • **TERM 10, TERM 15 and TERM 20:** Convertible during the first 10, 15 and 20 policy years respectively, but not beyond the policy anniversary nearest the insured’s 70th birthday.  
• **ART:** Convertible during the period up to the policy anniversary nearest the insured’s 70th birthday. |
| **Conversion Credit**           | A guaranteed term conversion credit is available to help reduce the initial premium on the new permanent policy and is available for the entire conversion period. |
| **Conversion Privilege**        | Current conversion rules provide that your client may convert to any of the permanent products AXA Equitable or its affiliates offer at the time of conversion, subject to our rules then in effect as to plan, age and class of risk. After the 5th policy anniversary, we expect to limit the permanent products available for conversion for the balance of the conversion period.  
Any conversion will be subject to AXA Equitable’s conversion rules then in effect. Please note that AXA Equitable may change the permanent products it makes available for conversion at any time. |
| **Re-entry Provision**          | There is no re-entry provision for the level term products – that is, your client may not reapply for another level premium guarantee period after the initial premium guarantee period expires. Your client must reapply for a new policy at the end of the level premium guarantee period or keep the term policy in force and pay the yearly renewable scheduled premiums. Any new policy is subject to full new business underwriting.  
You will receive first year compensation if your client purchases a new policy at the end of the level term period. |
| **Policy Changes**              | **Rider Additions** - available for the Children’s Term Insurance Rider (CTIR) as long as the policy does not contain the DPW rider.  
The Living Benefits Rider (LBR) can be added if declined on the original application, subject to underwriting. |
### Feature Description

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<td>Rider Terminations</td>
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<th>Riders &amp; Endorsements</th>
<th>The following additional benefits are available with the policy, in approved jurisdictions. Refer to the Riders Section for terms and availability.</th>
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<td></td>
<td>• Disability Premium Waiver Rider (DPW)</td>
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<tr>
<td></td>
<td>• Children’s Term Insurance Rider (CTIR)</td>
</tr>
<tr>
<td></td>
<td>The following benefit is automatically included with eligible policies, in approved jurisdictions, at no charge:</td>
</tr>
<tr>
<td></td>
<td>• Living Benefits Rider (LBR)</td>
</tr>
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**PREMIUM STRUCTURE**

**TERM 10, TERM 15 AND TERM 20**

Term 10, Term 15 and Term 20 are level term policies with premiums that are guaranteed to remain the same for the first 10, 15 and 20 policy years, respectively. These premiums are called the Initial Level Premiums. After the 10\textsuperscript{th}, 15\textsuperscript{th}, or 20\textsuperscript{th} policy year, respectively, the premiums increase each year. These premiums are called the Ultimate Renewal Premiums and are also guaranteed.

**INITIAL LEVEL PREMIUMS**

The Initial Level Premiums vary by issue age, gender, tobacco user status, and risk class of the insured as well as by face amount rate band.

**ULTIMATE RENEWAL PREMIUMS**

The Ultimate Renewal Premiums are the same for all rate bands. They vary by attained age, gender and tobacco-user status and are guaranteed for all durations.

**ART**

ART is an indeterminate premium annual renewable term policy. The indeterminate premium design uses two sets of premium rates: a set of Current Scheduled Premiums and a set of Guaranteed Maximum Premiums.

**CURRENT SCHEDULED PREMIUMS**

The Current Scheduled Premiums are the premiums we expect to charge each year based on our current experience. The Current Scheduled Premiums are only guaranteed for the first policy year and may change thereafter. Under no circumstance, however, will the Current Scheduled Premiums exceed the Guaranteed Maximum Premiums shown in the policy. The Current Scheduled Premiums vary by attained age, gender, tobacco user status and risk class of the insured, as well as by face amount rate band.

**GUARANTEED MAXIMUM PREMIUMS**

The Guaranteed Maximum Premiums are the maximum premiums AXA Equitable may charge. The Guaranteed Maximum Premiums act as a “cap” on the Current Scheduled Premiums. The Guaranteed Maximum Premiums vary by attained age, gender and tobacco user status.

**UNISEX**

The 80/20 Male/Female blend for unisex rates will be used for cases subject to ERISA (Qualified Plans) and also in Montana, which require unisex rates.
**RIDERS**

The riders listed below are available with AXA Equitable Term Series 151X. Please see the following pages for complete rider descriptions.

1) Disability Premium Waiver Rider (DPW)
2) Children’s Term Insurance Rider (CTIR)
3) Living Benefits [Accelerated Death Benefit for Terminal Illness] Rider (LBR)

<table>
<thead>
<tr>
<th>Rider</th>
<th>Issue Ages</th>
<th>Coverage Period</th>
<th>Minimum</th>
<th>Maximum</th>
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<tbody>
<tr>
<td>DPW</td>
<td>18-59</td>
<td>To the policy anniversary nearest the 65th birthday</td>
<td>Base policy face amount</td>
<td>$3,000,000 for all AXA Equitable (and/or any affiliated company) policies. Including any term riders</td>
</tr>
<tr>
<td>CTIR</td>
<td>Insured: 18-55 Children: 0-17**</td>
<td>15 days old to the earlier of the child’s 25th birthday or the day before the policy anniversary nearest the base Insured’s 65th birthday</td>
<td>2 units ($2,000)</td>
<td>Lesser of 25 units (50 in NY), 1 unit per $5,000 of base policy face amount</td>
</tr>
<tr>
<td>LBR</td>
<td>All</td>
<td>Until the policy terminates or when the amount of the lien equals the total death benefit.</td>
<td>$5,000</td>
<td>75% of the policy’s death benefit, or $500,000 if less</td>
</tr>
</tbody>
</table>

*Rider availability varies by jurisdiction and state variations apply.

**Based on child’s actual age (age last birthday).
RIDER DESCRIPTIONS

1) Disability Premium Waiver (DPW)

- This rider waives the scheduled premium due when AXA Equitable receives proof that total disability of the insured has existed continuously for at least 6 months.

**Availability**

- Issue Ages are 18–59.
- The proposed insured must not be assessed a rating higher than the equivalent of class D or a flat extra that equals or exceeds $10.00 per thousand.
- The maximum amount of coverage under DPW is $3,000,000 for all AXA Equitable (and/or any affiliated company) policies in force and applied for.

**Features**

While the policy is on waiver:

- Scheduled premiums are waived for as long as total disability continues if it begins before the policy anniversary nearest the insured’s 60th birthday. If total disability begins on or after this date (age 60), the premiums are waived to the earlier of the policy anniversary nearest the Insured’s age 65 or termination of disability.
- Insurance under the policy and benefits under other riders continue according to their terms.
- AXA Equitable will not require proof of disability after the insured’s attained age 65 if the premiums had been waived for the five preceding years.
- The policy may be converted while the policy is on waiver if the insured is then totally disabled as defined in the rider. However, AXA Equitable reserves the right to limit and change the products they make available for conversion at any time.
- The written request for conversion of the term policy must be made on or before the Final Conversion Date shown on the policy Page 3.
- If the request to convert is made after the policy anniversary nearest the insured’s 65th birthday, the new policy will not be permitted to contain a rider providing disability waiver benefits.
- The conversion credit will not apply if premiums or charges for the new policy are to be waived under the terms of a rider providing disability waiver benefits.

**Premium Structure**

**Level Term:**

DPW rider rates for Term 10, Term 15 and Term 20 are guaranteed. They are level for the 10, 15 or 20 year level premium period respectively or to the policy anniversary nearest the insured’s age 65 (when rider terminates) and then increase each year thereafter. They are based on the insured’s issue age and the rates do not vary by face amount or underwriting class.

**ART:**

The DPW rider rates for AXA Equitable’s ART℠ increase on an attained age basis, do not vary by face amount or underwriting class, and are unisex. The rates are not banded.
Termination of the Rider
This rider will terminate on the policy anniversary nearest the Insured’s 65th birthday or if the policy terminates.

Substandard Ratings
The DPW rider may be allowed in some instances at a multiple of the standard premium to policies rated for occupation or avocation and to policies classified substandard for physical impairments. Substandard DPW ratings are sometimes required on policies otherwise issued at standard rates. The charge for an insured rated as substandard is a multiple of the standard DPW premium.

Compensation
The DPW rider is compensated at the same commission rate (first year) as the basic premium.

2) Children’s Term Insurance Rider (CTIR)
The CTIR provides insurance protection on the lives of the insured’s children, stepchildren and legally adopted children. Coverage begins when the child is 15 days old. AXA Equitable reserves the right to request medical evidence on the child or any other evidence we deem necessary. If a child does not qualify for coverage, an exclusion rider for that child will be issued. The rider is available in whole units of $1,000. The minimum coverage is two units and the maximum is 25 units per child for all AXA Equitable (and/or any affiliated company) policies combined (50 units in NY), but not more than one unit per $5,000 of base coverage on the insured at issue is allowed. The maximum coverage is $25,000 ($50,000 in NY).

Availability
- Provides term insurance protection on the lives of the insured’s children, provided the insured under the base policy is between the ages of 18 and 55. Coverage begins when the child is 15 days old.
- The base policy insured must not be assessed a rating higher than the equivalent of class D or a flat extra that exceeds $15.00 per thousand.
- Living children, stepchildren and legally adopted children of the insured, who have not reached their 18th birthday on the date of the application and named therein, are eligible for coverage at issue.
- Automatic coverage is provided for any child born, or legally adopted if under age 18, after the date of the application. Coverage does not begin on children until they are at least 15 days old.
- The rider cannot be added after issue if the policy has a Disability Premium Waiver rider.

Features
- For eligible children covered by the CTIR, the initial evidence of insurability is contained in the application for the benefit. A medical need not be submitted unless requested by the underwriter. However, AXA Equitable reserve the right to request medical evidence on the child or any other evidence we deem necessary. If a child does not qualify for coverage, an exclusion rider for that child will be issued.
• Coverage provided for a child under CTIR is convertible to a new permanent policy on the life of the child if the base policy is not in default. This may be done on the day following the earliest of the following: (a) the child’s 25th birthday or (b) the day before the policy anniversary nearest the insured’s 65th birthday.

• Before a covered child reaches age 25, a notice of termination of coverage for that child will be sent to the policy owner.

• When converting CTIR evidence of insurability is not required, except that the tobacco-use question must be answered on the new business application. Evidence of insurability is required for any additional riders requested under the new policy.

• If the term policy’s basic insured should die while the rider is in effect, AXA Equitable will issue a paid-up term insurance policy on the life of each surviving child then insured under the rider. This paid-up term insurance will provide the same death benefit as the rider until the surviving child’s 25th birthday when the coverage terminates.

Cost
The annual cost is a flat $5.25 per unit ($1,000 of term coverage) regardless of the number of children covered. If DPW is included on the base policy, it is automatically extended to the rider. The DPW premium for this is $0.10 per unit. The rider premium is included in the total scheduled modal premium and is payable until the policy anniversary nearest the base insured’s 65th birthday. AXA Equitable continue to charge a premium for the rider until its termination date unless the policy owner requests us in writing to terminate the rider.

Termination
A child’s coverage ends on the child’s 25th birthday. The rider remains in effect until the policy anniversary nearest the base insured’s 65th birthday. The policy owner needs to write to us to have us discontinue the rider sooner if they no longer have any children eligible to be covered under the rider. A footnote appears on the annual billing notice to this effect. The rider also terminates if the policy terminates at the end of the grace period. If the policy is reinstated prior to the automatic cessation date of the rider, CTIR will be reinstated.

Compensation
The CTIR is compensated at the same commission rate (first year) as the basic premium.

3) Living Benefits (Accelerated Benefits) Rider (LBR)
The Living Benefits Rider (Accelerated Death Benefit for Terminal Illness) allows the policy owner to receive a portion of the policy’s Death Benefit if the Insured is diagnosed as terminally ill with, generally, no more than twelve months to live (six months in CT and IL).

Availability
• The rider is automatically included at issue with all policies unless declined by the policy owner on the application.

For Financial Professional Use Only. Not To Be Used With Or Distributed To The General Public.
We will continue to offer the six-month LBR Rider (R94-102 or state variation) in Connecticut and Illinois only.

**Features**

- The maximum accelerated Death Benefit prepayment amount is, generally, the lesser of 75% of the policy’s Death Benefit or $500,000 under all policies issued by AXA Equitable (and/or any affiliated company) policies. The minimum is $5,000.
- If the rider is added after issue, evidence of insurability is required.
- Some of the features (including the maximum accelerated Death Benefit prepayment amount allowed and processing charge) vary by state.

**Cost**

There is no charge for this rider at issue; however, we may deduct a processing charge of up to maximum of $250.00 per policy from the LBR payment. There may be a $100.00 charge for adding this rider after issue.

**Termination**

The rider terminates when the policy terminates, upon written request by the policy owner or if at any time the amount of the lien equals the total death benefit. If the policy lapses and is subsequently restored, the LBR is reinstated.

**Compensation**

There is no commissionable component for this rider.

SEE ATTACHED SAMPLE RIDERS IN APPENDIX II THROUGH V.
PREMIUMS

These are scheduled premium products. Payment of regularly scheduled premiums is required to maintain coverage.

The basic annual premium is calculated using the traditional premium formula. The formula takes the premium rate per thousand for the insured’s gender, issue age, face amount, underwriting class and tobacco user status, multiplies the rate by the number of thousands of face amount, and then adds the annual policy fee. Premiums for riders, substandard flat extra premiums and other temporary and/or permanent flat extras are added to the basic premium to arrive at the total annual scheduled premium.

Premiums may be paid on other than annual mode; however, your client’s total annual outlay will be more than if premiums were paid on an annual basis.

PREMIUM LIMITS

There is no minimum premium requirement for any of the below payment modes provided the required minimum face amount for the product is met.

The policy owner can request to change the mode any time after policy is issued and inforce. Irregular premiums are permitted as long as the regular recurring modal premium coincides with the policy anniversary.

MODAL PREMIUMS

Payment modes are listed in the table below. The policy fee is non-commissionable, payable with each premium and does not vary by face amount. The Regular Monthly mode is not available. All Modal factors will be shown on Page 3 of the contract.

<table>
<thead>
<tr>
<th>Mode</th>
<th>Modal Factor</th>
<th>Policy Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual</td>
<td>1.0000</td>
<td>$75</td>
</tr>
<tr>
<td>Semi-annual</td>
<td>.5090</td>
<td>$39</td>
</tr>
<tr>
<td>Quarterly</td>
<td>.2565</td>
<td>$23</td>
</tr>
<tr>
<td>Systematic Monthly</td>
<td>.0855</td>
<td>$ 9</td>
</tr>
<tr>
<td>Salary allotment</td>
<td>.0855</td>
<td>$ 9</td>
</tr>
<tr>
<td>Military allotment</td>
<td>.0855</td>
<td>$ 9</td>
</tr>
</tbody>
</table>

Modal premiums are calculated by multiplying the annual rate for the insured’s age, gender, tobacco user status and risk class times the appropriate modal factor and rounding that result to five decimal places. This result is then multiplied by the face amount divided by $1,000, rounded to two decimal places. Finally the modal policy fee is added.

The following are intended for illustrative purposes only.
Example 1 – AXA Equitable’s Term 10 with $1,000,000 face amount and DPW rider.

- Rate per $1,000, R1000-Male 49 Preferred NTU (LT10) $1.02
- Multiplied by Semi-Annual Modal Factor X .5090
- Equals (rounded to 5 decimal places) .51918
- Multiplied by Face Amount (in thousands) X 1000 519.18

- DPW Rate per $1,000, R1000-Male 49 Preferred NTU (LT10) $0.57
- Multiplied by Semi-Annual Modal Factor X .5090
- Equals (rounded to 5 decimal places) .29013
- Multiplied by Face Amount (in thousands) X 1000 290.13

- Equals (rounded to 2 decimal places) = $809.31
- Add the policy fee + 39.00
- Total Semi-Annual Modal Premium $848.31

Example 2 (Table D rating) AXA Equitable’s Term 10 with $1,000,000 face amount. The $636.25 extra premium, $354.58 standard premium, and modal factors are shown on policy Page 3.

1. Rate per $1,000, R500, for Male 35 Standard NTU (LT10) $0.62
2. Multiplied by Semi-Annual Modal Factor X .5090
3. Equals (rounded to 5 decimal places) .31558
4. Multiplied by Face Amount (in thousands) X 1000
5. Equals (rounded to 2 decimal places) $315.58
6. Add the policy fee for semi-annual mode + 39.00
7. Semi-Annual Standard Modal Premium $354.58

1. Rate per $1,000, Table D Extra $1.25
2. Multiplied by Semi-Annual Modal Factor X .5090
3. Equals (rounded to 5 decimal places) .63625
4. Multiplied by Face Amount (in thousands) X 1000
5. Equals (rounded to 2 decimal places) $636.25
6. Add the Semi-Annual Standard Modal Premium + 354.58
7. Total Semi-Annual Modal Premium $990.83
FIRST YEAR ANNUAL MODE DISCOUNT FOR AXA EQUITABLE’S ART PRODUCT ONLY

Subject to our current rules, ART policy owners who choose to pay their first year’s premium on the annual mode will receive a 10% discount on that premium. The discount applies to the basic premium only, exclusive of the policy fee, the premium for any riders and any substandard rating or flat extras. The discount is NOT available for policies issued in New Jersey or as the result of a replacement of an existing AXA Equitable Life Insurance Company, AXA Equitable Life and Annuity Company, MONY, MLOA or any other affiliate’s policy. The proposal system automatically calculates the ART first year annual mode discount.

Example: The initial premium discount calculation for a $1,000,000 annual mode policy with DPW issued to a 35 year old female Standard Plus non-tobacco user is as follows:

1. Multiply the basic premium rate .33 per $1,000 the insured’s age, gender, underwriting class by the face amount $ 330.00
2. Multiply the amount in Step 1 by .10 $33.00
3. Add the premium for additional riders (DPW) & benefits $100.00
4. Add the annual policy fee $ 75.00
5. Total premium due (Sum of Steps 1, 3, & 4) $505.00
6. And subtract the amount in Step 2 from the amount in Step 5 ($33.00)
7. Premium due with 10% discount $472.00
**DEATH BENEFIT**

The Term Series 151X contracts provide a death benefit if the insured dies while the policy is in effect.

- The insurance benefit payable at death equals the policy’s face amount, plus any adjustment for unearned premiums or minus any deduction for any premium due and minus any Living Benefit Rider (LBR) lien.

- Interest (if any) is added to the death proceeds in accordance with Interstate Compact standards or applicable state law. The interest, if required, is computed at a rate AXA Equitable determines, but not less than the rate required by Interstate Compact standards or any applicable state law.

AXA Equitable has the right to contest the policy as indicated in the policy: In addition, the suicide exclusion may apply, or if the age or gender of the insured has been misstated AXA Equitable may adjust the death benefit accordingly as stated in the policy form - “If the Insured Person’s age or sex has been misstated any benefits will be those that the premium paid would have purchased at the correct age or sex.”

All the Term Series 151X products provide a level death benefit where coverage terminates at age 95.
POLICY CHANGES

All policy change requests must be made in writing to the National Operations Center and are subject to our approval. The available policy changes are as stated in the policy and described below.

TOBACCO USER STATUS CHANGE

A policy owner who was issued a policy where the insured was a Tobacco User can apply for an underwriting class change to Non-Tobacco User status after the first policy year. The change requires underwriting.

RATING REDUCTION

Generally, after the first policy year, the Insured may apply for a reduction in rating, subject to underwriting approval.

RIDER ADDITION: CHILDREN’S TERM INSURANCE RIDER

The CTIR may be added to a policy after issue, subject to underwriting if the policy does not have the DPW rider.

RIDER TERMINATIONS

Subject to our rules and the terms of the rider, the policy owner may submit a request to cancel rider coverages generally after the first policy year. Scheduled premiums are adjusted accordingly.
POLICY LAPSE

GRACE PERIOD
The Term Series 151X products have a 31-day grace period for payment of each premium. The insurance continues during the grace period. If a premium is not paid by the end of its grace period, the policy will lapse as of the premium due date. If this occurs, all insurance ends at the end of the grace period.

If the insured dies during the 31-day grace period, a past due premium covering one policy month is deducted from the Death Benefit payment.

POLICY REINSTATEMENT
Your client may reinstate his/her term policy within five years after lapse, but not later than the Final Term Expiry date found on the policy Page 3. The lapsed term policy can be reinstated after the Grace Period has expired under the following conditions:

- The insured person is alive on the date of the reinstatement;
- The policy owner did not request termination of the term policy;
- The request is made within five years after lapse;
- Satisfactory evidence of insurability is provided; and,
- All overdue premiums are paid with interest at 6% per year compounded annually.
UNDERWRITING

UNDERWRITING CLASSES

The following underwriting class and Tobacco-User status combinations are available with AXA Equitable’s Term Series 151X5 products.

<table>
<thead>
<tr>
<th>Underwriting Class</th>
<th>Tobacco-User Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preferred Elite</td>
<td>Non-Tobacco User Only</td>
</tr>
<tr>
<td>Preferred</td>
<td>Non-Tobacco User</td>
</tr>
<tr>
<td>Standard Plus</td>
<td>Non-Tobacco User Only</td>
</tr>
<tr>
<td>Standard</td>
<td>Non-Tobacco User</td>
</tr>
<tr>
<td>Preferred</td>
<td>Tobacco User</td>
</tr>
<tr>
<td>Standard</td>
<td>Tobacco User</td>
</tr>
<tr>
<td>Substandard (B, C, D)</td>
<td>Non-Tobacco User</td>
</tr>
<tr>
<td>Substandard (B, C, D)</td>
<td>Tobacco User</td>
</tr>
</tbody>
</table>

1. For an insured classified as standard (i.e., not rated), the maximum permanent flat extra premium may not exceed $15.00 per thousand and the maximum temporary flat extra premium may not exceed $60.00 per thousand. Also, the total combined permanent and temporary flat extra premiums may not exceed $60.00 per thousand.

2. Permanent Flat Extras for aviation, avocation or occupation are allowed with the Preferred Elite, Preferred and Standard Plus underwriting classes but are limited to $3.50 per thousand. However, if a temporary flat extra is on the policy, these classes are not available.

3. A permanent flat extra for medical reasons regardless of dollar amount is not available with Preferred classes.

4. Permanent Flat Extras are applicable until the later of the policy anniversary nearest the Insured’s attained age 80 or the end of the level premium period for the Level Term products, and until the policy anniversary nearest the Insured’s attained age 80 for the Annual Renewable Term product. Temporary Flat Extra charges are applicable until their expiry date.

5. The Preferred and Standard classes vary by gender and tobacco-user status. The Preferred Elite and Standard Plus classes vary by gender.

6. Substandard letter rating classes B, C and D vary by gender and tobacco-user status. The combination of the underwriting class and any temporary and/or permanent flat extras cannot exceed the equivalent of a class D.

REFER TO THE FLAT EXTRA EQUIVALENT RATING CHART IN APPENDIX I.
**UNDERWRITING REQUIREMENTS**

The underwriting requirements for the Preferred Elite, Preferred, Standard Plus and other classes are published in the Life Underwriting Condensed Guideline, which is available on the AXA-Equitable.com website.

**BACKDATING TO SAVE AGE**

If permitted by state regulation we will permit a policy to be backdated up to six months upon the request of the policy owner in order to save insurance age (including the maximum issue age) or for a common billing date for employer-sponsored cases.

**UNISEX RATES**

Unisex rates are used in Montana and for plans subject to ERISA. AXA Equitable’s Home Office approval is required to issue policies on a unisex basis in any other situation.

**CLASSIFIED INSURANCE**

A small portion of the life insurance purchasing population has a medical history or condition that poses a higher than average mortality risk. For these proposed insureds, classified insurance is available, which can be a substandard rating classification and/or Flat Extra premiums specified by the underwriter. Some proposed insureds are not insurable even with a substandard rating or flat extra premium and must be declined.

**CHANGE IN UNDERWRITING CLASSIFICATION**

A change in an insured person’s underwriting class (e.g., a change from Tobacco User to Non-Tobacco User, reduction in substandard letter rating or removal or reduction of a permanent Flat Extra) requires evidence of insurability satisfactory to AXA Equitable.

**GOOD HEALTH CREDIT PROGRAM**

Term policies are eligible to participate in the AXA Equitable’s Good Health Credit Program (GHCP). Refer to field communication AD 08-115 for more details.
TERM CONVERSIONS

TERM CONVERSION PRIVILEGE

Current conversion rules provide that your client may convert to a wide array of the permanent products, AXA Equitable or its affiliates offer at the time of conversion, subject to our rules then in effect as to plan, age and class of risk. After the 5th policy anniversary, we anticipate that the permanent product available for conversion will be limited to a specific product(s) or versions of product(s) as designated by AXA Equitable for the balance of the conversion period.

Any conversion will be subject to AXA Equitable’s conversion rules then in effect. Please note that AXA Equitable may change the permanent products it makes available for conversion at any time.

By converting their term policy, policy owners can enjoy the benefits of permanent life insurance – death benefit protection and the potential for tax deferred cash value accumulation. Where the need for death benefit protection is not a temporary need, permanent insurance often is a better strategy because term insurance generally becomes cost prohibitive at older ages. In situations where your clients bought term insurance because of limited cash flow, it is important to remind them of the opportunity to convert to permanent insurance when their financial situation improves.

TERM CONVERSION PROVISIONS

Term 10, Term 15, Term 20

Term 10, Term 15 and Term 20 may be converted to any permanent policy that is available at the time of conversion subject to our rules then in effect as to plan, age and class of risk without submitting evidence of insurability before the earlier of the policy anniversary nearest the insured’s 70th birthday and the 10th, 15th and 20th policy anniversary, respectively.

ART

ART may be converted to any permanent policy that is available at the time of conversion subject to our rules then in effect as to plan, age and class of risk without submitting evidence of insurability, before the policy anniversary nearest the insured’s 70th birthday.

TERM CONVERSION GUIDELINES

• New evidence of insurability is required if there is an increase in face amount, or there are new additional riders or benefits, or there is a request for a reduction in rating.

• No evidence of insurability is required for the DPW rider on the new policy when the original term policy still has the DPW rider and the face amount is the same.

• Premiums and charges for the new policy will be based on the insured’s then attained insurance age and the same underwriting risk class as the term policy. If the new policy does not have the same underwriting risk class as the term policy, the new policy will be issued on the closest comparable risk class as determined by AXA Equitable. Note: The name of the underwriting rate class on the new permanent product may be different from the underwriting rate class on the original term policy since in many cases, the new permanent product will not have the same underwriting structure as the original term policy. However, the underwriting rate class on the new permanent product will be the same or similar as the underwriting rate class on the term contract being converted.
CONVERSION WHEN A DISABILITY PREMIUM WAIVER RIDER CLAIM IS IN EFFECT

If a Disability Premium Waiver (DPW) rider is in effect on the date of conversion and the insured is totally disabled as defined in the rider and all premiums have been duly paid or are being waived under the rider, the policy owner may convert the term policy to any permanent life insurance plan we make available (subject to our rules then in effect as to plan, age and class of risk) with a DPW rider, if available. If that specific rider is not available (e.g., the rider is not approved in a certain state or the permanent product does not offer the rider), we will issue the new policy with another rider that provides disability waiver benefits, if available. AXA Equitable reserves the right to limit and change the products it makes available for conversion at any time.

- If total disability began before the policy anniversary nearest the insured’s age 60 and the conversion occurs before the policy anniversary nearest the insured’s 65th birthday, premiums or deductions (as determined by the rider we offer) will be waived on the new permanent policy as long as the insured continues to be disabled.

- If total disability began on or after the policy anniversary nearest the insured’s age 60 and the conversion occurs before the policy anniversary nearest the insured’s age 65, we will only waive premiums due before the policy anniversary nearest the insured’s age 65.

- If the term policy is converted after the policy anniversary nearest the insured’s 65th birthday, the new policy cannot contain a rider providing disability waiver benefits.

Note: The conversion credit will not apply if premiums or charges for the new policy are being waived under the terms of a rider providing disability waiver benefits.

Just like the Term Series 150, for the Term Series 151X products, AXA Equitable will no longer automatically convert the term policy to a new permanent life policy on the policy anniversary nearest the insured’s 65th birthday when the premiums have been waived for the five preceding policy years. Premiums will just continue to be waived on the term contract while total disability continues until the Final Term Expiry date shown on the policy Page 3.

TERM CONVERSION CREDIT

The AXA Equitable’s Term Series 151X products have a conversion credit for the entire conversion period. The credit is non-commissionable and may only be applied to reduce the initial modal premium on the new permanent policy. The credit is available to all insureds on conversion except if the premiums or charges for the new policy are being waived under the terms of a rider providing disability waiver benefits.

We will apply a conversion credit when the policy is converted. The amount of the conversion credit is the lesser of:

1. the premium paid for the policy during the first policy year exclusive of temporary flat extra charges and premiums for optional benefits;

2. the amount of the first year’s premium for the policy calculated on an annual modal basis (which reflects discounts, if applicable, shown on Page 3 of the policy) exclusive of temporary flat extra charges and premiums for optional benefits; and

3. the initial modal premium for the new policy.

The conversion credit, if applicable, may only be applied to reduce the initial modal premium for the new policy.
PARTIAL TERM CONVERSION

If the policy owner converts less than the full face amount, the conversion credit is pro-rated based on the proportion that the face amount being converted bears to the face amount of the original contract.

COMPLIANCE

LICENSING

Financial Professionals must be appointed by AXA Equitable and hold a regular life insurance license for the state in which the sale is solicited, the application is signed, where the owner resides and where the policy is delivered.

Financial Professionals are reminded that it is permissible to take an application only if:

(a) the Financial Professional has the appropriate license in that state;

(b) the state has approved the product; and

(c) there is a “reasonable nexus” i.e., a connection exists between the applicant and the state where the application is taken. An example of reasonable nexus is when the applicant either resides or works in the state where the application is taken. Financial Professionals are cautioned that the underwriter will reject a case where reasonable nexus does not exist.

ILLUSTRATION/PREMIUM QUOTE REQUIREMENTS

Every ART illustration or level term premium quote shown or furnished to a prospective client must include all sequentially numbered pages printed by the proposal software including the footnote and disclosure pages. Any alteration to or marking on the illustration pages is strictly prohibited. If the illustration or premium quote provided at the time of application does not fully conform to the policy issued, a new conforming ART illustration or level term premium quote must be provided at or prior to the time the policy is delivered.

An ART illustration that conforms to the coverage applied for should be provided to the applicant at the point of sale, a copy of the conforming illustration should be signed by both the Financial Professional and the prospective client and submitted with the application. However, when it is not possible to provide a conforming illustration at the point of sale, a signed No Conforming Illustration Certification is permitted in lieu of a signed conforming illustration. The Illustration Certification acknowledges that case was sold without a conforming illustration and a conforming illustration will be delivered on or before delivery of the policy. The certification must be signed by both the Financial Professional and the applicant.

A premium quote is used for the level term products as they are designated in accordance with the NAIC Model Illustration Regulation to be sold without an illustration. Except for applications taken in Pennsylvania, the level term premium quote may be signed at policy delivery and returned to the National Operations Service Center with the delivery receipt. In Pennsylvania, a Special Disclosure form is required at the point of sale. This disclosure form is incorporated into the level term premium quote; therefore the entire level term premium quote must be submitted with the new business application.

Illustrations and premium quotes are available in the AXA Equitable General Illustration System (AEGIS) new business illustration system on Workstation.

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**COST DISCLOSURE NOTICE**

A Cost Disclosure Notice will be included with the policy where required by applicable state regulation. The Cost Disclosure Notice must be delivered to the policy owner with the policy.

**BUYER’S GUIDE**

A Buyer’s Guide that conforms to applicable state regulations will be included with the policy for delivery to the policy owner. Illinois, Maine, New Hampshire, New York, Wisconsin and the state of Washington require that the Buyer’s Guide be delivered to the prospective client when the application is taken. In these states, the new business kits include the required Buyer’s Guide.

**FREE LOOK PERIOD**

Generally, a policy owner has the right to cancel a policy within 10 days of receiving it. Some states have a free-look period greater than 10 days, particularly if the transaction involves replacement. The request to cancel must be submitted in writing to the National Operations Center (some states allow the policy to be returned to the Financial Professional) and must be received by the National Operations Center (or by the Financial Professional if permitted in the applicable state) no later than 10 days (or period required by the applicable state regulation) after delivery of the policy.

If the policy is canceled, AXA Equitable will refund all premiums paid. All compensation paid is recovered in full if the policy is cancelled during the free-look period.

**DELIVERY PERIOD**

The delivery period is shown on the Policy Summary Document you will receive with the policy. If a properly signed and completed delivery receipt and any other delivery requirements are not received at the National Operations Center (NOC) within 45 days of the end of the delivery period, we will recover any compensation paid.

**DELIVERY RECEIPT**

A special form to acknowledge receipt of a policy is included for delivery with every policy. The receipt must be signed and dated by the policy owner and the insured, if other than the policy owner, and returned to the NOC for retention with the application file. Compensation is generated when the case is issued and paid. It will be recovered if the delivery receipt is not received within 45 days after the end of the delivery period. Compensation that was recovered will be repaid when the delivery receipt and any outstanding requirements are received at the NOC.

**ART STATE CERTIFICATION FORM**

New York, Texas and Montana require a special certification form (180-727R) to be signed by the applicant when the application is taken, disclosing that the policy has two sets of premiums: Current Scheduled Premiums and Guaranteed Maximum Premiums. The form must be signed by the policy owner and submitted with the application. In these states, the ART new business kits include the required form.

**REGISTER DATE**

The register date is the later of the application date or the medical date (date of paramedical or Part 2 medical exam), if full settlement accompanies the application.
If the application has no settlement or partial settlement or if the case is not issued as applied for, the register date is the issue date. Contracts issued without settlement will be reissued when the full settlement is received with a register date equal to the date the delivery receipt was signed if moving the register date does not result in a change in the Issue Age. New policy pages reflecting the new register date will be sent to the client.

If the issue date is the 29th, 30th or 31st of the month, the Register Date will be set equal to the 1st of the following month except if it would result in change in Issue Age. In these situations the Register Date will be set equal to the 28th of the month. In no situation will a policy ever be issued with a Register Date of the 29th, 30th or 31st of the month.
COMPLETING THE APPLICATION

Application form AMIGV-2009 (02/09), or state variation, and Optional Benefits Supplement 180-6010 (2009) (03/09), or state variation, should be used when applying for AXA Equitable Term Series 151X product. Applications and supplements are available on the AXA-Equitable.com website.

A state availability chart showing the appropriate application forms to be used in each jurisdiction is available on the AXA-Equitable.com website.

AXA Equitable’s Term Series 151X policies are issued and administered by the National Operations Center in Charlotte, NC.

APPLICATION FORM AMIGV-2009 (02/09)

AMIGV-2009 should be completed as described below for AXA Equitable’s Term Series 151X products.

Page 1, PROPOSED INSURED:
Complete all questions in this section with respect to the proposed insured.

Page 1, PRODUCT AND AMOUNT OF INSURANCE:

- **Product Name**: Enter either “Term 10, Term 15, Term 20 or ART”.

- **Amount of Insurance**: The minimum face amount is $1,000,000.

Page 2, PREMIUM INFORMATION:

- **Section 22 – Method of Payment**:
  
a. If bank draft is elected, and the premium payer is the Proposed Insured or Owner, a System-Matic form (Item # 153-1104D) does not need to be completed. Only the monthly mode is available for bank drafts.
  
b. For Direct payment, the regular monthly mode is not available.
  
d. For salary allotment payment mode - If the Allotter is not the proposed insured, please specify the name of the Allotter.

OPTIONAL BENEFITS SUPPLEMENT FORM 180-6010 OR STATE VARIATIONS

Use the “TERM LIFE” section of this form to request any optional additional benefits or riders. Note that other riders and endorsements are automatically included with eligible policies at no additional charge. Refer to the Riders section of this Product Guide for more information on each of the optional benefits, including any age and amount limits, and the qualifications for automatically included benefits.

Form 180-6010 (2009) (03/09), (cat. # 142770) or state variation will be used.

Instructions for selecting optional benefits are as follows:

- **DISABILITY PREMIUM WAIVER** - The maximum amount of coverage is $3,000,000 for all AXA Equitable and affiliated companies policies in force and applied for.

- **CHILDREN’S TERM** - Specify the amount or number of units. Minimum coverage is 5 units; the maximum is 25 units per child (50 in NY) for all AXA Equitable and affiliated companies policies combined, but not more than one unit for each $5,000 of base coverage. The Children’s Term Rider Supplement form 180-6008, or state variation, must also be completed.
WHAT TO DO WHEN TERM PRODUCT IS ON A QUALIFIED PLAN

- POLICY OWNER should be the Qualified Plan name
- POLICY BENEFICIARY should be the Qualified Plan name.
- SIGNATURE of Owner or Applicant should be an individual “as trustee for the XYZ Inc. Qualified Plan name.

1. For an existing plan:

Page 2, PREMIUM INFORMATION:
- Section 22 – Method of Payment:
  - d. Salary allotment - fill in the Pension Trust Unit number assigned to plan.

Page 8, REMARKS
- Request unisex rates for Qualified Plan.

2. For a new plan that has not been established: A Pension Trusts Unit has to be established. Page one of the Qualified Plan Pension Trust Unit Form # 150310 v3 needs to be completed with the basic installation information then dated and signed and submitted with the new business application. Also, the insured and a representative of the employer that is sponsoring the qualified plan must sign the following form 207550, “Disclosure Statement”.

Page 2, PREMIUM INFORMATION:
- Section 22 – Method of Payment:
  - d. Salary allotment - based on information completed in the Qualified Plan Pension Trust Unit form submitted with the new business application, a Pension Trust Unit number would be assigned to the plan.

Page 8, REMARKS
- Request unisex rates for Qualified Plan.


**BUSINESS AND EMPLOYER OWNED POLICIES**

Any employer owned life insurance arrangement on an employee or director as well as any corporate, trade, or business use of a policy should be carefully reviewed by the employer’s tax advisor. The rules for employer owned and businesses owned policies are not limited to policies owned by corporations and can include, for example, policies owned by partnerships, limited liability companies (LLCs) and sole proprietorships. Attention should be given to the rules discussed below, as well as to any other rules, which may apply, including other possible pending or recently enacted legislative proposals.

**REQUIREMENTS FOR INCOME TAX FREE DEATH BENEFITS FOR EMPLOYER-OWNED LIFE INSURANCE**

Federal tax legislation enacted in 2006 imposes additional new requirements for employer-owned life insurance policies. These requirements include detailed notice and consent rules, tax reporting requirements and limitations on those employees (including directors) who can be insured under the life insurance policy. Failure to satisfy applicable requirements will result in death benefits in excess of premiums paid by the employer being includable in the employers’ income upon the death of the insured employee. Notice and consent requirements must be satisfied before the issuance of the life insurance contract or before any material change to an existing life insurance contract that is treated as a new issuance of a contract under the law.

The new rules generally apply to life insurance contracts issued after August 17, 2006 of the legislation. Note, however, that material increases in death benefit or other material changes will generally cause an existing contract to be treated as a new contract and thus subject to the new requirements. The term “material” has not yet been fully defined but is expected to not include automatic increases in death benefits in order to maintain compliance of the life insurance policy tax qualification rules under the Internal Revenue Code. An exception for certain tax-free exchanges under section 1035 of the Code may be available, but is not clearly defined.

**OTHER**

See Notice 2002-8, T.D. 9092, and any subsequent IRS releases for information regarding the taxation of split dollar. At the time this Guide was prepared, other legal issues to be considered include:

- Prohibition of direct or indirect loans for public companies under Sarbanes-Oxley legislation,
- Proposed regulations on legislative changes for direct or indirect funding of non-qualified deferred compensation plans,
- Charity owned and investor owned life insurance arrangements

Review the latest information available as to these matters and their application to business owned policies. The communications specified below are available on the axadistributors.com website.

- **Acknowledgement and Disclosure Form for Business-Owned Life Insurance**, located at axa-equitable.com> >Forms>AXA Form>Disclosures & Buyer Guides>Supplemental New Business>>Employer Owned Life Insurance.
TAX DISCLOSURE

Please be advised that this document is not intended as legal or tax advice, and is for internal use only. Accordingly, any tax information provided in this document is not intended or written to be used, and cannot be used, by any taxpayer for the purpose of avoiding penalties that may be imposed on the taxpayer. The tax information was written to support the promotion or marketing of the transaction(s) or matter(s) addressed, and any taxpayer should seek advice based on his or her particular circumstances from an independent tax advisor.

ADDITIONAL REFERENCES

The following communications and forms are available on axa-equitable.com

- Life Underwriting Condensed Guideline at axa-equitable.com >>Underwriting>Guidelines
- Request for Service Forms / Policy Change Request Forms at axadistributors.com>Forms
- State Availability Chart at axa-equitable.com>Products>Term Life>AXA Equitable’s Term Series 151X
APPENDIX I - CONVERSION OF FLAT EXTRAS TO EQUIVALENT LETTER CLASSES FOR TERM PRODUCTS AND RIDERS

Riders are available up through certain letter class ratings or their equivalent. Equivalent classes need to be figured only if there are flat extras on a case. The following tables show how to figure an equivalent class. It is used only for the purpose of determining eligibility for riders, or retention limits based on issue age and letter rating class. It is not used for calculating charges. This is controlled by the Underwriter and not supported by either LDE or the New Business System.

### Permanent Flat Extra

<table>
<thead>
<tr>
<th>Permanent Flat Extra</th>
<th>Preferred Elite</th>
<th>Preferred</th>
<th>Standard Plus</th>
<th>Standard</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>= to or &lt; than 3.50</td>
<td>Preferred Elite</td>
<td>Preferred</td>
<td>Standard Plus</td>
<td>Standard</td>
<td>B</td>
<td>C</td>
<td>D</td>
</tr>
<tr>
<td>3.51 - 4.00</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>B</td>
<td>C</td>
<td>D</td>
</tr>
<tr>
<td>4.50 - 6.00</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>N/A</td>
</tr>
<tr>
<td>6.50 - 10.00</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>C</td>
<td>D</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>10.50 - 15.00</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>D</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

(1) Applicable to Non-Medical impairments only (Aviation, avocation or occupation Flat Extras).

### Total Temporary Flat Extra

<table>
<thead>
<tr>
<th>Total Temporary Flat Extra</th>
<th>Preferred Elite</th>
<th>Preferred</th>
<th>Standard Plus</th>
<th>Standard</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>= to or &lt; than 20.00</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>Standard</td>
<td>B</td>
<td>C</td>
<td>D</td>
</tr>
<tr>
<td>20.01 - 30.00</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>N/A</td>
</tr>
<tr>
<td>30.01 - 40.00</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>C</td>
<td>D</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>40.01 - 60.00</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>D</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

* Total Temporary Basic Flat Extra = Temporary Flat Extra per $1,000 X Number of Years Charged.

THIS SECTION OF THE TABLE SHOULD BE USED TO DETERMINE THE AVAILABILITY OF VARIOUS RIDERS OR DETERMINE RETENTION LIMITS BASED ON ISSUE AGE AND LETTER RATING CLASS. RIDERS ARE GENERALLY AVAILABLE UP TO THE SUBSTANDARD D UNDERWRITING CLASS. REFER TO THE RIDER DESCRIPTIONS SECTION IN THE PRODUCT GUIDE FOR MORE DETAILS.

When there is both a permanent flat extra and one or more temporary flat extras, multiply the permanent basic flat extra per $1,000 by 5 and add the result to the total temporary basic flat extra. Use this total to index the appropriate letter rating equivalent.

For Financial Professional Use Only. Not To Be Used With Or Distributed To The General Public.
Example: An insured classified standard who has a permanent basic flat extra of $6 and a temporary flat extra of $7.50 for 4 years (a total temporary of $30): each of these alone would place him in an equivalent letter class of B. However, when we add 5 times the $6, or $30, to the $30 total temporary extra, we arrive at an adjusted total of $60, which converts to a class D.

**APPENDIX II – DISABILITY PREMIUM WAIVER RIDER (R85-201)**

In this rider, “we”, “our” and “us
mean The AXA Equitable Life Insurance Company.

“You” means the Owner of the policy at the time an Owner’s right is exercised.

**BENEFIT.** We will waive premiums for this policy when we receive proof that total disability of the Insured has existed continuously for at least six months, as provided in this rider.

If this total disability begins on or after the Insured’s fifth birthday and before the age 60 anniversary, we will waive all premiums falling due while total disability continues.

If this total disability begins at or after the age 60 anniversary, we will waive only those premiums falling due before the age 65 anniversary while total disability continues.

We will waive premiums at the premium payment frequency in effect when total disability began. While premiums are being waived, insurance will continue as if the premiums had been paid.

**AGE.** In this rider, “age 60 anniversary” and “age 65 anniversary” mean the policy anniversary nearest the Insured’s 60th and 65th birthdays, respectively.

**TOTAL DISABILITY.** Total disability means the Insured’s complete inability, because of bodily injury or disease, to perform all of the substantial and material duties of his or her regular occupation. However, after 24 consecutive months of such disability, total disability will mean the Insured’s complete inability to engage in any gainful occupation for which he or she is reasonably fitted by education, training, or experience.

We will also recognize the complete and irrecoverable loss of sight of both eyes, or the use of both hands or both feet, or of one hand and one foot as total disability. We will presume any such loss to be total disability even if the Insured engages in any occupation.

**NOT COVERED.** We will not waive premiums if total disability results from:

1. intentionally self-inflicted injury; or
2. service in the armed forces of any country at war, including declared and undeclared war and resistance to armed aggression.

We will not waive premiums for a total disability that begins before the Insured’s fifth birthday, or that begins while this rider is not in effect.

**PROOF OF DISABILITY.** Before we waive any premiums, we must be given written notice of claim, and proof that total disability of the Insured has existed continuously for at least six months. This must be done while total disability continues and while the Insured is still living, or as soon as reasonably possible.

We may require proof at reasonable intervals that total disability continues. After total disability has continued for two years we will not require proof more than once a year. We will not require proof after the age 65 anniversary if premiums have been waived for the five preceding years.
We may require physical examination of the Insured by our medical representatives at our expense as part of any proof of total disability. We will not waive premiums if proof is not furnished as required.

(continued on next page)

PREMIUMS. Page 3 of this policy shows the additional premiums for this rider. If this rider is added after the policy is issued, the premiums will be shown on the Additional Benefits Rider. If total disability begins during a grace period, the overdue premium must be paid before we will approve any claim for waiver of premiums.

TERMINATION. This rider will no longer be in effect:

1. at and after the age 65 anniversary;

2. if any premium for this rider or this policy remains unpaid at the end of its grace period, unless waived by this rider; or

3. if the insurance under this policy terminates.

You may terminate this rider on any premium due date by asking for this in writing. A claim based on total disability that begins before termination of this rider will not be affected by the termination.

INCONTESTABILITY. This rider will become incontestable only after it has been in effect, during the lifetime of the Insured and without the occurrence of total disability of the Insured, for two years from its Date of Issue. The Date of Issue is shown on Page 3 of this policy, or on the Additional Benefits Rider if this rider is added after the policy is issued.

GENERAL. This rider is a part of the policy. Its benefit is subject to all the terms of this rider and the policy.

This rider has no cash or loan values. It does not affect any net single premium or reserve referred to in the policy.

Waiver of premiums will not reduce any amount, including dividends that we would otherwise pay. Any premium due during total disability this is paid and later waived will be refunded to the person who, in our judgment, is equitably entitled to receive it.
APPENDIX III – CHILDREN’S TERM INSURANCE RIDER (R79-33)

In this rider, “we”, “our” and “us” mean AXA Equitable Life Insurance Company.

“You” means the Owner of the policy at the time an Owner’s right is exercised.

BENEFIT AND PREMIUMS. We will pay to the beneficiary the amount of term insurance in effect on an Insured Child under this rider, upon receiving proof that the child died before the earlier of: (a) the child’s 25th birthday; or (b) the Expiry Date of this rider, which is the day before the policy anniversary nearest the Insured’s 65th birthday.

The amount of term insurance on each Insured Child is $1,000 for each unit of coverage.

Page 3 of the policy shows the number of units of coverage and the premiums for this benefit. If this rider is added after the policy is issued, these items are shown on the Additional Benefits Rider.

INSURED CHILD. An Insured Child under this rider is any child at least 15 days old who is:

• a child, stepchild, or legally adopted child of the Insured, who is named for coverage in the application for this rider and had not reached his or her 18th birthday on the date of application; or
• a child born to the Insured after the date of the application for this rider; or
• a child legally adopted by the Insured after the date of the application for this rider but before the child’s 18th birthday.

BENEFICIARY FOR THIS BENEFIT. The term “beneficiary” in this rider means only the beneficiary for the benefit payable at the death of an Insured Child. The term “Beneficiary” in other provisions of the policy means only the Beneficiary for the benefits payable at the Insured’s death.

The beneficiary for the benefit payable at the death of an Insured Child will be the Insured, if living; if not living, the surviving children of the Insured; unless another beneficiary for this benefit has been named in the application (or by any later change) and is living at the death of that child. If no beneficiary under this arrangement is living at an Insured Child’s death, the benefit will be paid to that child’s estate.

"Surviving children of the Insured” as used in this rider means: (1) surviving children (including legally adopted children) of the Insured, whether or not insured under this rider; and (2) surviving stepchildren who are or have been insured under this rider. If there are two or more surviving children of the Insured, they will share equally.

You may change the beneficiary for insurance on an Insured Child while that child is living by written notice in a form satisfactory to us. The change will take effect on the date you sign the notice, except that it will not apply to any payment we make or other action we take before we receive the notice.

PAID-UP INSURANCE. If the Insured dies while this rider is in effect, we will issue a paid-up term insurance policy on the life of each surviving Insured Child then insured under this rider, subject to the Suicide Exclusion of this rider. The policy will provide the same term insurance benefits as this rider. Unless otherwise stated in the application or later changed: (1) the owner of the policy will be the Insured Child; and (2) the beneficiary of the policy will be the surviving children of the Insured.

CONVERSION PRIVILEGE. You may convert expiring term insurance on an Insured Child to a new policy on the life of that child if all premiums have been duly paid. You may do this on the day following the earliest of: (a) the child’s 25th birthday; (b) the Expiry Date of this rider; or (c) the date on which the policy becomes paid-up or matures as an endowment. We will not ask for evidence of insurability, except as stated on the reverse side for additional benefit riders.

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The new policy will have a face amount equal to the amount of expiring term insurance on the child. Or, if the conversion date is determined by (a) or (b) of the paragraph above, you may choose that the face amount be up to five times the amount of term insurance on the child. Or, you may choose a lower amount allowed by our rules in effect on the conversion date.

The Register Date of the new policy will be the conversion date. Premiums for the new policy will be based on our standard rates in effect on that date. They will be for the Insured Child’s then attained insurance age. You may choose that the new policy be on any level premium plan of insurance for which it qualified under our rules then in effect as to plan, amount, age and class of risk. You may not choose a policy of term insurance, one that includes term insurance, or one that provides insurance on more than one life.

You may ask that additional benefit riders be included in the new policy. The issue of any rider will require our consent and evidence of the Insured Child’s insurability satisfactory to us.

The first premium for the new policy must be received by us within 31 days after the conversion date while the child to be insured is living. We will tell you the amount of the first premium for the new policy on request.

TERMINATION. This rider will no longer be in effect:

1. on and after its Expiry Date;
2. if any premium for this rider or the policy remains unpaid at the end of its grace period, unless waived by a disability rider;
3. if the insurance under this rider is replaced by paid-up insurance;
4. if the policy is converted to paid-up insurance; or
5. if the insurance under the policy terminates.

You may terminate this rider on any premium due date by asking for this in writing.

PREMIUM ADJUSTMENT. If an Insured Child dies during the grace period of an unpaid premium, we will deduct from the benefits of this rider the part of the overdue premium for it for one policy month.

REINSTATEMENT. You may reinstate the policy with this rider in accordance with the Reinstatement provision of the policy. You must also provide evidence satisfactory to us of the insurability of each child who will be insured under this reinstated rider. No benefit will be payable for any Insured Child who died between the end of the grace period and the date of reinstatement.

SUICIDE EXCLUSION. If the Insured commits suicide, while sane or insane, within two years after the Date of Issue shown on Page 3 of the policy (or on the Additional Benefits Rider, if this rider is added after the policy is issued), our liability under this rider will be limited to the payment of a single sum equal to the premiums paid for it.

However, the expiring term insurance on each Insured Child covered by this rider may be converted to a new policy with a face amount equal to such insurance, in accordance with the Conversion Privilege of this rider. This conversion may be made within 31 days after the Insured dies.

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INCONTESTABILITY. All statements made in the application for this rider are representations and not warranties. We have the right to contest the validity of this rider based on material misstatements made in that application. However, the insurance as to each Insured Child included for coverage in the application for this rider will become incontestable after it has been in effect during the lifetime of that child for two years from the Date of Issue shown on page 3 of the policy (or on the Additional Benefits Rider if this rider is added after the policy is issued).

GENERAL. This rider is a part of the policy. Its benefits are subject to all the terms of this rider and the policy.

This rider has no cash or loan value. It does not affect any net single premium or reserve referred to in the policy. No benefits from this rider is included in any insurance benefit if the policy lapses.

You may choose while an insured Child is living that any amount to be paid under this rider at that child’s death be applied in accordance with the Payment Options provision in the policy for the benefit of the beneficiary. If you have not done this, the beneficiary will have this right upon the death of the Insured Child. If you change the beneficiary, any previous choice of Payment Options under this rider is cancelled.
APPENDIX IV – ACCELERATED DEATH BENEFIT RIDER (R94-103) – CT & IL

For Connecticut and Illinois only

Disclosure. The receipt of the Accelerated Death Benefit Amount may be taxable. You should seek assistance from your personal tax advisor prior to electing the benefit.

In this rider "we", "our" and "us" mean AXA Equitable Life Insurance Company. "You" means the Owner of the policy at the time an Owner’s right is exercised. "This Policy" means the policy to which this rider is attached.

This Rider’s Benefit. We will pay an accelerated death benefit in the amount requested by the Owner, if the Insured is terminally ill, subject to the provisions of this rider. We will pay an accelerated death benefit under this policy only once and in one lump sum.

The maximum accelerated death benefit you may receive is the lesser of:

1. 75% of the death benefit payable under this policy, less any policy loan and loan interest, and
2. $500,000.

The maximum aggregate amount of Accelerated Death Benefit payments that will be paid under all policies issued by us on the life of the Insured is $500,000.

For purposes of this benefit, the death benefit does not include any accidental death benefits, non-convertible term riders or convertible term riders not in their conversion period or any benefits payable because of the death of any person other than the Insured.

There is no premium for this rider.

We reserve the right to deduct a processing charge of up to $250.00 per policy from the accelerated death benefit payment.

We reserve the right to set a minimum of $5,000 on the amount you may receive under this rider.

To be eligible for this benefit you must provide satisfactory evidence to us that the Insured’s life expectancy is six months or less. This evidence must include, but is not limited to, certification by a physician licensed to practice medicine in the United States or Canada and who is acting within the scope of such license. A physician does not include the Owner, the Insured or a member of either’s family.

How This Rider Relates To The Policy. This rider is a part of the policy. Its benefits are subject to all the terms of this rider and the policy. This rider has no cash or loan value. This rider is non-participating.

Interest. Interest will be charged on the amount of the Accelerated Death Benefit and on any unpaid premium we advance after the payment of an Accelerated Death Benefit. The interest rate at the time the Accelerated Death Benefit payment is made, will not exceed the greater of the following on such date:

1. the yield on a 90-day treasury bill; or
2. the maximum adjustable policy loan interest rate permitted in the state in which this policy is delivered.

(continued on next page)
**Effect Of Accelerated Death Benefit Payment On The Policy.** The Accelerated Death Benefit payment, plus any accrued interest will be treated as a lien against the policy values. The amount of the lien will be pro-rated against the policy's net cash surrender value, if any, and the net amount at risk. (The net amount at risk is defined as the death benefit of the policy minus the cash surrender value, if any.) The amount payable at death under the policy will be reduced by the full amount of the lien and any other indebtedness outstanding under the policy. The Owner's access to the policy's cash surrender value will be limited to the excess of the policy's cash surrender value over the amount of the lien secured against the cash surrender value and any other outstanding policy loans and loan interest.

If premiums are required to be paid under the policy, they will continue to be due after the payment of the accelerated payment. If any premium is not paid when due, the amount of the unpaid premium will be added to the lien.

If a Disability Premium Waiver Rider is in effect under the policy, this policy's premiums will be waived as of the date we approve an Accelerated Death Benefit payment.

**Rider Limitations.** Your right to be paid under the Accelerated Death Benefit Rider is subject to the following conditions:

1. The policy must be in force other than as extended term insurance.
2. For term insurance policies, there must be at least one year left before the final term expiry date.
3. You must make a claim in writing in a form that is satisfactory to us.
4. If the policy is collaterally assigned, except to us as security for a policy loan or an Accelerated Death Benefit lien, we must receive a full release of this assignment for the election of this benefit.
5. An Accelerated Death Benefit payment must be approved in writing by any irrevocable beneficiary.
6. For joint last to die policies, a claim may be made under the rider only after the death of the first of the Insureds to die.
7. You may not be eligible for the Accelerated Death Benefit if we are notified that:
   a) you are required by law to elect this rider's benefit in order to meet the claims of creditors, whether in bankruptcy or otherwise; or
   b) you are required by a government agency to elect this rider's benefit in order to apply for, obtain, or keep a government benefit or entitlement.
8. You may request only one Accelerated Death Benefit Amount to be paid per policy.
9. We may require examination of the Insured by our medical representatives at our expense as part of any proof to establish eligibility for benefits under this rider.

**When This Rider Will Terminate.** You may terminate this rider by asking us in writing in a form satisfactory to us and by sending the rider to our Administrative Office. The effective date of the termination will be the beginning of the policy month which coincides with or next follows the date we receive your request. Once this rider has been terminated, another Accelerated Death Benefit Rider cannot be attached to the policy.

This rider will terminate when the policy terminates. If at any time the amount of the lien equals the total death benefit the policy will terminate. Termination will occur 31 days after we have mailed notice to the last known address of the Owner, unless the full amount of the lien is repaid within 31 days of the notice.
Disclosure. The receipt of the Accelerated Death Benefit Amount may be taxable. You should seek assistance from your personal tax advisor prior to electing the benefit.

Effective Date of this Rider. This rider is effective on the Register Date of this policy. If this rider is added after issue of this policy, the effective date of this rider is shown on the Additional Benefits Rider to which it is attached.

Cost Of This Rider. There is no premium or cost of insurance charge for this rider.

This Rider’s Benefit. We will pay an Accelerated Death Benefit in the amount requested by the owner, if the insured person is terminally ill, subject to the provisions of this rider. We will pay an Accelerated Death Benefit under this policy only once and in one lump sum.

The maximum Accelerated Death Benefit payment you may receive is the lesser of:
1. 75% of the death benefit payable under this policy, less any outstanding policy loan and accrued loan interest, and
2. $500,000.

The maximum aggregate amount of Accelerated Death Benefit payments that will be paid under all policies issued by us or our affiliated companies on the life of the insured person is $500,000.

For purposes of this benefit, the death benefit does not include any accidental death benefits, non-convertible term riders or convertible term riders with an expired conversion period, or any other benefits payable upon the death of any person other than the insured person under the base policy.

We reserve the right to deduct a processing charge of up to $250.00 per policy from the Accelerated Death Benefit payment.

We reserve the right to set a minimum of $5,000 on the amount you may receive under this rider.

To be eligible for this benefit you must provide satisfactory evidence to us that the insured person’s life expectancy is twelve months or less. This evidence must include, but is not limited to, certification by a physician licensed to practice medicine in the United States or Canada and who is acting within the scope of such license. A physician does not include the owner, the insured person, or a member of either the owner’s or insured person’s family.

How This Rider Relates To The Policy. This rider is a part of the policy. Its benefits are subject to all terms of this rider and the policy. This rider has no cash or loan value. This rider is non-participating.

Interest. Interest will be charged on the amount of the Accelerated Death Benefit and on any unpaid premium we advance after an Accelerated Death Benefit payment. The interest rate at the time of the Accelerated Death Benefit payment is made will not exceed the greater of the following on such date:
1. the yield on a 90-day treasury bill; or
2. the maximum adjustable policy loan interest rate permitted in the state in which this policy is delivered.

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Effect Of Accelerated Death Benefit Payment On The Policy. The Accelerated Death Benefit payment, plus any accrued interest, will be treated as a lien against the policy values. The amount of the lien will be pro-rated against the policy’s net cash surrender value, if any, and the net amount at risk. If your policy is a variable or universal life policy, the net amount at risk is the death benefit minus the policy account, if any. If your policy is a term or whole life policy, the net amount at risk is the death benefit minus the cash surrender value, if any.

Additionally, if your policy is a variable life policy, the portion of the cash surrender value that is on lien and is allocated to investment funds of the Separate Account (SA) will be transferred to and maintained as part of the unloaned portion of the Guaranteed Interest Account (GIA). You may tell us how much of the accelerated payment is to be transferred from each investment fund. Units will be redeemed from each investment fund sufficient to cover the amount that is on lien and transferred to the unloaned portion of the GIA. If you do not tell us how to allocate the payment, we will allocate it based on our rules then in effect.

However, if your variable policy does not have a GIA, the portion of the cash surrender value that is on lien will be transferred to and maintained in the Money Market Fund of our SA. Such transfers will occur as of the date we approve an Accelerated Death Benefit payment; there will be no charge for such transfers. The amount payable at death under the policy will be reduced by the full amount of the lien and any other indebtedness outstanding under the policy. Your access to the policy’s cash surrender value will be limited to the excess of the policy’s cash surrender value over the amount of the lien secured against the cash surrender value and any other outstanding policy loans and accrued loan interest.

Effect Of Accelerated Death Benefit Payment On Policy Premiums. If your policy is a term, whole life or any other fixed premium policy, premiums will be required to be paid after an Accelerated Death Benefit payment. If any premium is not paid when due, we will advance the amount of the unpaid premium and add it to the lien.

If your policy is a flexible premium variable or universal life policy, and after an Accelerated Death Benefit payment the policy at the beginning of a policy month is in default, we will advance a premium sufficient to keep the policy in force and add it to the lien.

However, if a Disability Premium Waiver Rider or a Disability Waiver of Monthly Deductions Rider is in effect under the policy, this policy’s premium or monthly deductions will be waived as of the date we approve an Accelerated Death Benefit payment.

Rider Limitations. Your right to an Accelerated Death Benefit payment is subject to the following conditions:

1. The policy must not be in the grace period.
2. The policy must be in force other than as extended term insurance.
3. For term insurance policies, there must be at least one year left before the final term expiry date.
4. You must submit a claim in writing to our Administrative Office in a form satisfactory to us.
5. Prior to the Accelerated Death Benefit payment, we will require from any assignee or irrevocable beneficiary a signed acknowledgment of agreement for such payment.
6. For joint last-to-die policies, a claim may be made under the rider only after the death of the first of the insured persons.
7. You may not be eligible for the Accelerated Death Benefit payment if we are notified that:
   a) you are required by law to elect this rider’s benefit in order to meet the claims of creditors, whether in bankruptcy or otherwise; or
   b) you are required by a government agency to elect this rider’s benefit in order to apply for, obtain, or keep a government benefit or entitlement.

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8. You may request only one Accelerated Death Benefit payment per policy.

9. We may require examination of the insured person by our medical representatives at our expense as part of any proof to establish eligibility for benefits under this rider.

**When This Rider Terminates.** Prior to any Accelerated Death Benefit payment you may terminate this rider by providing written notice in a form satisfactory to us and returning the rider to our Administrative Office. The effective date of termination will be the date your request is received at our Administrative Office. Once this rider has been terminated, another Accelerated Death Benefit Rider cannot be attached to the policy.

This rider will terminate when the policy terminates. If at any time the amount of the lien equals the total death benefit, the policy will terminate. Termination will occur 31 days after we have mailed notice to the last known address of the owner, unless the full amount of the lien is repaid within 31 days of the notice.
Life Insurance issued by:
AXA Equitable Life Insurance Company (AXA Equitable)
1290 Avenue of the Americas
New York, NY 10104    212-554-1234

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All guarantees are based on the claims paying ability of AXA Equitable.

Policy form numbers 150-LT and 150-54 or state variation; ICC09-150-LT and ICC09-150-54.

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