



ATHENA UNIVERSAL LIFESM

SERIES 150

GENERIC SPECIMEN RIDERS & BENEFITS

No Lapse
Guarantee Rider

In this rider "we", "our" and "us" mean AXA Equitable Life Insurance Company. "You" and "your" mean the owner of the policy at the time an owner's right is exercised.

Effective Date of this Rider. This rider is effective on the Register Date of the policy.

This Rider's Benefit. The policy, to which this rider is attached and in effect, is guaranteed not to lapse during the No Lapse Guarantee Period shown on Page 3-Continued of the policy, provided that certain conditions, as described below, are met.

At the beginning of each policy month, we compare the Net Policy Account Value (this is equal to the amount in your Policy Account minus any outstanding policy loan and accrued loan interest) to the total monthly deductions described in the "Monthly Deductions" provision of the policy. If the Net Policy Account Value is sufficient to cover the total monthly deductions, the policy is not in default (even if this rider is terminated, or you do not pay premiums sufficient to maintain this rider's guarantee, as described below).

However, if the Net Policy Account Value at the beginning of any policy month is not sufficient to cover the total monthly deductions, and this rider is in effect, we will perform the following calculations to determine whether the policy is in default:

1. Determine the No Lapse Guarantee Premium Fund. The No Lapse Guarantee Premium Fund for any policy month is the accumulation of all the monthly No Lapse Guarantee Premiums for the base policy and guarantee premiums for any additional benefit riders shown in the "Table of Guarantee Premiums" on Page 3-Continued of the policy, accumulated at the No Lapse Guarantee Accumulation Rate shown on Page 3-Continued of the policy, from the Register Date of the policy up to that month. (Certain policy changes after issue will change the No Lapse Guarantee Premiums; however, they will not start a new No Lapse Guarantee Period.)
2. Determine the actual premium fund. The actual premium fund for any policy month is the accumulation of all the premiums received for the policy, accumulated at the No Lapse Guarantee Accumulation Rate shown on Page 3-Continued of the policy, minus all partial withdrawals, accumulated at the No Lapse Guarantee Accumulation Rate shown on Page 3-Continued of the policy, from the Register Date of the policy up to that month.
3. If the result in Step 2 is greater than or equal to the result in Step 1, and any outstanding policy loan and accrued loan interest does not exceed the Policy Account Value, the policy is guaranteed not to lapse. The policy is not in default and we will take monthly deductions up to the amount in the Policy Account.
4. If the result in Step 2 is less than the result in Step 1, or if the result in Step 2 is greater than or equal to the result in Step 1 but an outstanding policy loan and accrued loan interest exceeds the Policy Account Value, the policy is in default as of the first day of that policy month. This is the date of default.

If default occurs during the No Lapse Guarantee Period, we will send you and any assignee on our records at last known addresses written notice stating that a grace period of 61 days has begun starting with the date the notice is mailed. The notice will also state the amount of payment that is due. This payment will not be greater than the sum of (1) the premium amount, if any, necessary to pass the No Lapse Guarantee Premium Fund test, as described above, and (2) the loan repayment amount necessary to repay any outstanding policy loan and accrued loan interest.

If we do not receive such amount at our Administrative Office before the end of the grace period, we will then (1) withdraw and retain any amount in your Policy Account; and (2) send a written notice to you and any assignee in our records at the last known addresses stating that the policy has ended without value.

Cost of This Rider. The charge for this rider, if any, is shown on Page 4 of the policy.

When This Rider Will Terminate. This rider will terminate on the earliest of the following dates:

- a) on the date the policy ends without value at the end of a Grace Period, is given up for its Net Cash Surrender Value, or otherwise terminates;
- b) on expiration of the No Lapse Guarantee Period shown on Page 3-Continued of the policy;
- c) on the date that a new insured person is substituted for the original insured person under the terms of any Substitution of Insured rider; and
- d) on the date any Loan Extension endorsement becomes effective.

You may also terminate this rider at any time after policy issue by asking for this in writing. The effective date of termination will be the beginning of the policy month that coincides with or next follows the date we receive your request.

Once this rider terminates for any reason, it may not be restored.

Incontestability and Suicide Exclusions. The Incontestability and Suicide Exclusion provisions of the policy also apply to this rider.

General. This rider is part of the policy. Its benefit is subject to all the terms of this rider and the policy. All provisions of the policy will continue to apply except as specifically modified by this rider.

AXA EQUITABLE LIFE INSURANCE COMPANY



Christopher M. Condon
Chairman and Chief Executive Officer



Karen Field Hazin, Vice President,
Secretary and Associate General Counsel

Specimen

Effective Date of this Rider. This rider is effective on the Register Date of the policy.

Cost of this Rider. There is no premium or charge for this rider.

This Rider's Benefit. We will pay the Charitable Benefit Amount to the Charitable Beneficiary, provided that the requirements of the "Insurance Benefits We Pay" provision shown in the policy are met and you (or otherwise your estate representative) have met the requirements specified in the "Verification of Charitable Beneficiary at the Time of Death Claim" provision of this rider. The Charitable Benefit Amount, which we will determine as of the date of death of the insured person, is described on Page 3-Continued of the policy. We will add interest to the Charitable Benefit Amount in accordance with the "Insurance Benefits We Pay" provision of the policy.

Charitable Beneficiary. The Charitable Beneficiary may be any organization exempt from federal taxation under Section 501 (c) of the Internal Revenue Code and listed in Section 170 (c) of the Internal Revenue Code, or any successor thereto, as an authorized recipient of charitable contributions.

The Charitable Beneficiary is as stated in the application, unless later changed. The Charitable Beneficiary is entitled to any Charitable Benefit Amount payable under the policy. However, more than one Charitable Beneficiary can be named in the application. If more than one Charitable Beneficiary is named, the share of the Charitable Benefit Amount for each Charitable Beneficiary must be stated in the application; otherwise, the Charitable Beneficiaries will share the Charitable Benefit Amount equally.

Changing the Charitable Beneficiary. While the policy and this rider are in force, you may change the Charitable Beneficiary by written notice in a form satisfactory to us. You can get such a form from your agent or by writing to us at our Administrative Office. The change will take effect on the date you sign the notice, unless otherwise specified by you, except that it will not apply to any payment we make or other action we take before we receive the notice at our Administrative Office.

Changing the Owner of the Policy. If the owner of the policy, as stated in the application, is later changed, and this rider is in force, we will require any new Charitable Beneficiary to be named or request confirmation of the existing Charitable Beneficiary.

Effect of Policy Transactions on Charitable Benefit Amount. The Charitable Benefit Amount will change if we approve your request for (1) an increase or reduction in the base policy face amount; (2) a partial Net Cash Surrender Value withdrawal (if the death benefit is Option A); and (3) a change in death benefit option.

Verification of Charitable Beneficiary at the Time of Death Claim. We will pay any Charitable Benefit Amount to any Charitable Beneficiaries, as shown in the application, after we verify that any such beneficiaries are still in existence and accredited under Sections 501 (c) and 170 (c) of the Internal Revenue Code, or any successor thereto, at the time of the insured's persons death. The share of the Charitable Benefit Amount that we will pay to each Charitable Beneficiary will be in accordance with the instructions shown in the most recent application or notice to change the Charitable Beneficiary we have on file. If only one of the Charitable Beneficiaries is in existence and accredited at the time of the insured person's death, we will pay the entire Charitable Benefit Amount to such beneficiary.

However, we will send you (or otherwise your estate representative) written notice if we verify that a sole Charitable Beneficiary, as shown in the application, is no longer in existence and accredited under Sections 501 (c) and 170 (c) of the Internal Revenue Code, or any successor thereto, at the time of the insured person's death. If this occurs, you (or otherwise your estate representative) must name a new, qualified Charitable Beneficiary before any Charitable Benefit Amount is payable to such beneficiary. Written designation of a new, qualified Charitable Beneficiary must be submitted to us at our Administrative Office on or before the date we receive the required documentation specified in the "Insurance Benefits We Pay" provision shown in the policy. If we do not receive such written designation within the time required, we will not pay a Charitable Benefit Amount under this rider.

When This Rider Will Terminate. This rider will terminate on the earliest of the following dates:

- 1) on the date of the insured person's death;
- 2) on the date the policy ends without value at the end of a Grace Period, is given up for its Net Cash Surrender Value, or otherwise terminates;
- 3) on the date any Loan Extension endorsement becomes effective; and
- 4) on the date that we receive your written request to terminate this rider.

Incontestability and Suicide Exclusions. The Incontestability and Suicide Exclusion provisions of the policy also apply to this rider.

General. This rider is part of the policy. Its benefit is subject to all the terms of this rider and the policy. All provisions of the policy will continue to apply except as specifically modified by this rider.

AXA EQUITABLE LIFE INSURANCE COMPANY



Christopher M. Condrón
Chairman and Chief Executive Officer



Karen Field Hazin, Vice President,
Secretary and Associate General Counsel

Specimen

Cash Value
Plus Rider

In this rider "we", "our" and "us" mean AXA Equitable Life Insurance Company. "You" and "your" mean the owner of the Policy at the time an owner's right is exercised.

This Rider's Benefit. This rider modifies the "Policy Information" section of this policy as detailed in items 1. and 2. below.

1. We will reduce the surrender charge shown in the "Table Of Surrender Charges For The Initial Base Policy Face Amount" if you give up this policy for its Net Cash Surrender Value during the first eight policy years. The applicable surrender charge for each indicated policy year will be reduced by the following percentage. If you give up this policy in any of years 1 through 4, 100%; year 5, 80%; year 6, 65%; year 7, 45%; year 8, 25%.

This reduction applies only upon a complete surrender of this policy for its Net Cash Surrender Value during the first eight policy years. It does not apply to proportionate surrender charges resulting from a face amount decrease. This reduction does not apply if this policy is being exchanged or replaced during the first eight policy years with another life insurance policy or annuity contract on the insured person(s); such an exchange or replacement includes (but is not limited to) any transaction qualifying for income tax free exchange treatment under section 1035 of the Internal Revenue Code or any similar or successor provision thereof.

2. We will refund to you a percentage of the cumulative deductions from premium payments shown under "Premium Charge" in the "Table of Expense Charges" if you give up this policy for its Net Cash Surrender Value during the first three policy years. The following refund percentages will apply if you give up this policy: year 1 – 100%; year 2 – 80%; year 3 – 33%.

This refund applies only upon a complete surrender of this policy for its Net Cash Surrender Value during the first three policy years. This refund does not apply if this policy is being exchanged or replaced during the first three policy years with another life insurance policy or annuity contract on the insured person(s); such exchange or replacement includes (but is not limited to) any transaction qualifying for income tax free exchange treatment under section 1035 of the Internal Revenue Code or any similar or successor provision thereof.

Any refund amount that would be applicable upon a complete surrender of this policy during the first three policy years will be included with the amount in your Policy Account to determine the death benefit, if it becomes payable during such time and is calculated as a percentage of the amount in your Policy Account.

Policy Loans and Partial Withdrawals. Amounts available under this policy for policy loans and partial withdrawals continue to be calculated as if this rider was not part of this policy.

Base Policy Face Amount Increases. Increases in the base policy face amount, even if they would otherwise be allowed, will not be permitted while this rider is in force.

The Cost of This Rider. The cost of this rider is shown in the "Table of Expense Charges" in the Policy Information section of this policy. We deduct this amount from the initial premium payment, after deduction of the premium charge.

Effective Date of this Rider. This rider is effective on the Register Date of this policy.

When This Rider Will Terminate. This rider will terminate on the earliest of the following dates:

1. At the end of the eighth policy year; or
2. On the date the policy ends without value at the end of a Grace Period or otherwise terminates.

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

AXA EQUITABLE LIFE INSURANCE COMPANY



Christopher M. Condrón
Chairman and Chief Executive Officer



Karen Field Hazin, Vice President,
Secretary and Associate General Counsel

Specimen

Accelerated Death Benefit Rider

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" and "your" mean the Owner of the policy at the time an Owner's right is exercised.

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 \$300,000.

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.

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.
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.

AXA Equitable Life Insurance Company



Karen Field Hazin, Vice President,
Secretary and Associate General Counsel



Christopher M. Condrón,
Chairman and Chief Executive Officer

**Accelerated Death Benefit for
Long-Term Care Services Rider**

In this Rider, "we", "our" and "us" mean AXA Equitable Life Insurance Company. "You" and "Your" mean the owner of the policy at the time an owner's right is exercised.

This Rider's Benefit. We will pay you, as an acceleration of the policy death benefit (but not to exceed the Long-Term Care Specified Amount), a portion of that death benefit each month as a result of the insured person being a Chronically Ill Individual who is receiving Qualified Long-Term Care Services. All benefits are subject to the provisions of this rider. Benefits accelerated under this rider will be treated as a lien against policy values. Rider benefits will also change other values of the policy; see "Effect of Rider Benefits on Policy" provision of this rider. The initial Maximum Monthly Benefit that we will pay for Qualified Long-Term Care Services is shown on page 3 of the policy.

Taxation. The benefits paid under this rider are intended to be treated for Federal income tax purposes as accelerated death benefits under section 101 (g) of the Internal Revenue Code (the "Code") on the life of a chronically ill insured receiving qualified long-term care services within the meaning of section 7702B of the Code. The benefit is intended to qualify for exclusion from income within the limits of those provisions of the Code in effect at the issuance of this rider. Receipt of these benefits may be taxable. Charges for this rider may be considered distributions for income tax purposes, and may be taxable. You should consult your own tax advisor as to your own situation regarding the taxation of any benefits received. This rider is not intended to be a qualified long-term care insurance contract under section 7702B(b) of the Code.

Caution. We issued this rider based on your and the insured person's answers to the questions on the application for this rider. Copies of your application for the policy and this rider are attached to the policy. If your or the insured person's answers are not complete, true, or correctly recorded, we have the right to deny benefits or rescind this rider, subject to this rider's "Representations and Contestability" provision. The best time to clear up any questions is now, before a claim arises! If, for any reason, any of your or the insured person's answers are incorrect, contact us at our Administrative Office shown in the policy.

Notice to Owner. This rider may not cover all of the costs associated with long-term care services during the insured person's Period of Coverage. You are advised to carefully review all policy and rider limitations. Receipt of accelerated death benefits under this rider may adversely affect your eligibility for governmental benefits or public assistance programs, such as Medicaid.

Effective Date of this Rider. This rider is effective on the Register Date of the policy.

Right to Examine this Rider. You may examine this rider, and if for any reason you are not satisfied with it, you may cancel it by returning it with a written request for cancellation to our Administrative Office or to the agent who sold it to you by the 30th day after you receive it. If you do this, we will reverse any charges that were applicable to this rider and this rider will be treated as if it had never been issued.

Cost of this Rider. The monthly cost for this rider is part of the monthly deductions described in the policy. The monthly rate for this rider is based on the insured person's sex, issue age, class of risk and tobacco user status, as well as the benefit percentage selected. We may revise the rider's rates from time to time. Any change in the rider's rates will be as described in the "Changes in Policy Cost Factors" provision of the policy. However, the rider's rate will never be more than the guaranteed rate shown in the "Policy Information" section of the policy.

The monthly cost for this rider is equal to the current monthly rate per \$1000 for this rider times the net amount at risk for this rider divided by \$1000. The net amount at risk for this rider is the current Long-Term Care Specified Amount minus your Policy Account Value, but not less than zero. The monthly cost for this rider will apply while this rider and policy are in effect, but not beyond the policy anniversary nearest the insured person's 100th birthday. The monthly cost for this rider will not be deducted while rider benefits are being paid.

Renewability. Unless this rider terminates (see "Rider Termination" provision) it will remain in force as long as the policy remains in force.

Lapse Protection. If the Net Policy Account Value is insufficient to cover the total monthly deductions for the base policy and any other riders while benefits under this rider are being paid, we will not lapse the policy.

Rider Definitions.

Accumulated Benefit Lien Amount. We establish a lien whenever benefits are paid under this rider. The amount of this lien will equal the cumulative amount of rider benefits paid (including any loan repayments) during a Period of Coverage, accumulated at 0% interest. We will subtract this lien amount from the base policy death benefit if the insured person dies before the end of a Period of Coverage.

For purposes of determining the Cash Surrender Value of this policy, the unloaned Policy Account Value, and surrender charge (if any) will be reduced pro rata for the portion of the policy face amount that we have accelerated to date. However, the unloaned Policy Account Value will not be reduced by more than the Accumulated Benefit Lien Amount.

If the insured person is alive at the end of a Period of Coverage, the Accumulated Benefit Lien Amount is reset to zero. However, policy values will at that time also be reduced as explained in the "Effect of Rider Benefits on Policy" provision of this rider.

Activities of Daily Living. Those activities that measure the insured person's ability for self care. The Activities of Daily Living used in this rider to determine the level of care needed by the insured person are:

1. Bathing, which means washing oneself by sponge bath; or in either a tub or shower, including the task of getting in or out of the tub or shower.
2. Continence, which means the ability to maintain control of bowel and bladder function; or, when unable to maintain control of bowel or bladder function, the ability to perform associated personal hygiene, including caring for a catheter or colostomy bag.
3. Dressing, which means putting on and taking off all items of clothing and any necessary braces, fasteners, or artificial limbs.
4. Eating, which means feeding oneself by getting food into his or her body from a receptacle (such as a plate, cup, or table) or by a feeding tube or intravenously.
5. Toileting, which means getting to and from the toilet, getting on and off the toilet, and performing associated personal hygiene.
6. Transferring, which means moving into or out of a bed, chair, or wheelchair.

Adult Day Care. A community based group program that provides health, social, and related support services in a facility which is licensed or certified by the jurisdiction as an Adult Day Care Center for impaired adults.

Assisted Living Facility. A facility that is engaged primarily in providing ongoing care and related services to inpatients in one location and meets all of the following criteria:

1. provides 24-hour-a-day care and services sufficient to support needs resulting from Cognitive Impairment or inability to perform Activities of Daily Living;
2. has a trained and ready to respond employee on duty at all times to provide that care;
3. provides 3 meals a day and accommodates special dietary needs;
4. is licensed or accredited by the appropriate agency to provide such care, if such licensing or accreditation is required by the state in which the care is received;
5. has formal arrangements for the services of a physician or nurse to furnish medical care in the case of emergency; and
6. has appropriate methods and procedures for handling and administering drugs and biologics.

Chronically Ill Individual. An individual who has been certified by a Licensed Health Care Practitioner as:

1. being unable to perform (without Substantial Assistance from another person) at least two Activities of Daily Living for a period of at least 90 days due to a loss of functional capacity; or
2. requiring Substantial Supervision to protect such individual from threats to health and safety due to Cognitive Impairment.

Cognitive Impairment. A severe deficiency in the insured person's short or long term memory; orientation as to person, place, and time; deductive or abstract reasoning; or judgment as it relates to safety awareness; included in this definition are nervous or mental disorders of organic origin, including Alzheimer's Disease and senile dementia, which are determined by clinical diagnosis or tests.

Custodial Care. Personal assistance and care provided as long as the insured person is confined as an inpatient in any facility licensed by the state. Custodial Care includes assistance in the Activities of Daily Living. Persons eligible for Custodial Care are those who are unable to care for themselves but who do not require Skilled Nursing Care or Intermediate Care. Custodial Care must be performed under the orders of a Physician.

Elimination Period. A required period of time while this rider is in force that must elapse before any benefit is available to you under this rider. This rider will have an Elimination Period of 90 days, beginning on the first day of any Qualified Long-Term Care Services that are provided to the insured person. Benefits under this rider will not be paid until the Elimination Period is satisfied, and benefits will not be retroactively paid for the Elimination Period. The Elimination Period can be satisfied by any combination of days of a Long-Term Care Facility stay or any days of Home Health Care. Each day of care or service will be counted towards the Elimination Period, whether or not continuous. The Elimination Period must be satisfied within a consecutive period of 24 months starting with the month in which such services are first provided. The Elimination Period must be satisfied only once while this rider is in effect.

Home Health Care. Personal assistance and care provided by a Home Health Care Provider in a private home or by an Adult Day Care Center to the insured person who is under the care of a Physician.

Home Health Care Provider. A licensed home health care agency or an Adult Day Care Center. This also includes an employee of a Hospital acting in the capacity of providing care in a private home.

Hospice Care Facility. A licensed hospice facility which provides palliative and supportive medical and other health services to meet the physical, social, spiritual, and special needs of terminally ill patients and their families in a group residential setting.

Hospital. A place which, by law, provides care and treatment for sick or injured persons as resident bed patients. It must provide:

1. a registered graduate nurse on duty or on call at all times to supervise 24-hour nursing services;
2. the means for diagnosis, treatment, and surgery; and
3. a doctor present or on call at all times to supervise all care.

Immediate Family. Your or the insured person's spouse, parents, grandparents, as well as siblings, children, stepchildren, grandchildren and their respective spouses. Immediate Family also includes family members of your or the insured person's spouse.

Intermediate Care. Medically necessary care provided under the supervision of a registered nurse or a Physician in a Long-Term Care Facility to the insured person who is admitted as a resident patient. These services are provided to persons who do not require the degree of care and treatment of Skilled Nursing Care but who, because of their Cognitive Impairment or physical condition, require care and services above the level of Custodial Care. It must be certified by an attending Physician that Intermediate Care in a Long-Term Care Facility is medically needed.

Licensed Health Care Practitioner. A Physician, a registered nurse (R.N.), a licensed social worker, or any other individual who meets the requirements as may be prescribed by the U.S. Secretary of the Treasury. A Licensed Health Care Practitioner does not include you, the insured person, a member of your or the insured person's Immediate Family, anyone who is under suspension from Medicare or Medicaid, or who is the owner or an employee of the Long-Term Care Facility in which the insured person is confined.

Long-Term Care Facility. A facility, other than the acute care unit of a Hospital, that provides Skilled Nursing Care, Intermediate Care, or Custodial Care, and is licensed by the appropriate state licensing agency. It must also have:

1. a registered graduate nurse on duty at all times to supervise 24-hour nursing service;
2. a doctor to supervise the operation of the facility;
3. a planned program of policies and procedures that were developed with the advice of a professional group of at least one doctor or nurse; and
4. a doctor available to furnish emergency medical care.

A Long-Term Care Facility does not mean:

1. a facility that primarily treats drug addicts or alcoholics;
2. a facility that primarily provides domiciliary, residency, or retirement care; or
3. a facility owned or operated by a member of your or the insured person's Immediate Family.

Long-Term Care Specified Amount. The maximum benefit that we will pay for Qualified Long-Term Care Services for the insured person during a Period of Coverage. The initial Long-Term Care Specified Amount is equal to the face amount of the base policy at issue. This amount may change due to subsequent policy transactions, and will be reduced at the end of a Period of Coverage to reflect benefits paid during that Period of Coverage. See the "Effect of Policy Transactions on Rider Benefits" and "Effect of Rider Benefits on Policy" provisions of this rider for more information.

Maintenance or Personal Care Services. Any care the primary purpose of which is the provision of needed assistance with any of the disabilities as a result of which the individual is a Chronically Ill Individual (including the protection to health and safety due to severe Cognitive Impairment).

Maximum Monthly Benefit. The maximum amount we or an affiliated company will pay in a month for Qualified Long-Term Care Services for the insured person. The Maximum Monthly Benefit is initially equal to the Long-Term Care Specified Amount multiplied by the benefit percentage, shown on Page 3 of the policy, that you have selected. This amount may change due to subsequent policy transactions; see the "Effect of Policy Transactions on Rider Benefits" provision of this rider for more information.

Upon submitting a claim, you may request that an amount less than the Maximum Monthly Benefit be paid; however, this may not be less than \$500. Requesting a lower Maximum Monthly Benefit could increase the length of time benefits may be payable.

Monthly Benefit Payment. The amount we will pay in a month for Qualified Long-Term Care Services for the insured person. This amount is equal to the lesser of:

1. the Maximum Monthly Benefit (or lesser amount as requested), or
2. the monthly equivalent of 200% of the per diem limit allowed by the Health Insurance Portability and Accountability Act. We reserve the right to increase this percentage.

We will pay a proportionate amount of the Monthly Benefit Payment for services rendered for less than a full month. We will assume for computation purposes a 30 day month and a 360 day year. Income tax consequences may result if the aggregate payments received with respect to an insured person exceed the exclusion limits allowed for benefits for Qualified Long-Term Care Services under applicable tax law. You should consult with a tax advisor regarding your circumstances.

Period of Coverage. The period of time during which the insured person receives services that are covered under this rider and for which benefits are payable. This begins on the first day of covered services received after the end of the Elimination Period. A Period of Coverage will end on the earliest of the following dates:

1. the date that we receive the Notice of Release which must be sent to us when the insured person is no longer receiving Qualified Long-Term Care Services;
2. the date we determine you are no longer eligible to receive benefits in accordance with the terms of this rider;
3. the date when you request that we terminate benefit payments under this rider;
4. the date when the Accumulated Benefit Lien Amount equals the current Long Term Care Specified Amount;
5. the date that you surrender the policy;
6. the date we make a payment under the Accelerated Death Benefit Rider for terminal illness; or
7. the date of death of the insured person.

Physician. A person, as defined in section 1861(r)(1) of the Social Security Act, who is licensed to practice the healing arts and is performing only those services within the scope of his or her license.

Plan of Care. A written plan for Qualified Long-Term Care Services designed especially for the insured person. This Plan of Care must specify the type, frequency, and providers of all the services the insured person requires.

Qualified Long-Term Care Services. Necessary diagnostic, preventive, therapeutic, curing, mitigating, and rehabilitative services, and maintenance or personal care services. These services must be required by a Chronically Ill Individual pursuant to a Plan of Care prescribed by a U.S. Licensed Health Care Practitioner. These services must be provided by a Long-Term Care Facility or by a Home Health Care Provider.

Skilled Nursing Care. Medically necessary care provided or supervised by a registered nurse or a Physician in a Long-Term Care Facility to the insured person who is admitted as a resident patient. It must be certified by an attending Physician that Skilled Nursing Care in a Long-Term Care Facility is medically needed on a daily basis.

Substantial Assistance. The physical hands-on assistance of another person without which the insured person is unable to perform the Activity of Daily Living; or the presence of another person within arm's reach that is necessary to prevent, by physical intervention, injury to the insured person while he or she is performing the Activity of Daily Living.

Substantial Supervision. Continual supervision (which may include cuing by verbal prompting, gestures, or other demonstrations) by another person that is necessary to protect the severely cognitively impaired individual from threats to his or her health or safety (such as may result from wandering).

Rider Benefits

Eligibility for the Payment of Benefits. We must receive the following documentation before any benefits are payable:

1. A written certification from a U.S. Licensed Health Care Practitioner that the insured person is a Chronically Ill Individual and is receiving Qualified Long-Term Care Services pursuant to a Plan of Care;
2. Proof that the Elimination Period has been satisfied; and
3. Written notice of claim and proof of loss in a form satisfactory to us.

Preexisting Conditions Limitation. Preexisting condition means a condition for which medical advice or treatment was received by (or recommended to) the insured person from a provider of health care services within six months preceding the effective date of this rider. No benefits will be provided under this rider during the first six months for long-term care services received by the insured person due to a preexisting condition. Days of service received by the insured person for a preexisting condition during the first six months that this rider is in force will not be counted toward satisfaction of the Elimination Period.

When Rider Benefits Begin. We will begin Monthly Benefit Payments under this rider when: (a) the Eligibility for the Payment of Benefits Conditions are met; and (b) a claim for benefits has been approved by us.

For continued Monthly Benefit Payments under this rider, a U.S. Licensed Health Care Practitioner must recertify, every twelve months from the date of the initial or subsequent certification, that the insured person is still a Chronically Ill Individual receiving Qualified Long-Term Care Services pursuant to a Plan of Care. Otherwise, benefit payments will terminate at the end of the twelve month period or, if earlier, as specified in the "Period of Coverage" provision of this rider.

Effect of Rider on Policy. While this rider is in force, policy face amount increases and death benefit option changes are not permitted.

Effect of Policy Transactions on Rider Benefits. The following policy transactions will affect rider benefits as follows:

1. Any request for a decrease in the policy face amount will reduce the current Long-Term Care Specified Amount to an amount equal to the lesser of (a) the new policy face amount or (b) the current Long-Term Care Specified Amount immediately prior to the face amount decrease. Any partial Net Cash Surrender Value withdrawal will reduce the current Long-Term Care Specified Amount by the amount of the withdrawal, but not to less than the Policy Account Value minus the withdrawal amount. The Maximum Monthly Benefit in either case will then be equal to the new Long-Term Care Specified Amount multiplied by the benefit percentage shown on Page 3 of the policy.

A reduction resulting from one of the above transactions will be effective on the date specified in the policy that the transaction is effective.

2. If, at any time, you request payment of an accelerated death benefit due to the insured person's terminal illness, as provided under any Accelerated Death Benefit Rider attached to the policy, we will terminate this rider as of the date of such request whether or not Monthly Benefit Payments are being made as of such date.

Effect of Rider Benefits on Policy.

(A) During a Period of Coverage:

1. Partial Net Cash Surrender Value withdrawals, face amount decreases and premium payments are not permitted.
2. Each Monthly Benefit Payment will increase the Accumulated Benefit Lien Amount by the amount of the payment. The Accumulated Benefit Lien Amount will be treated as a lien against the policy death benefit, Policy Account Value and Cash Surrender Value.
3. If there is an outstanding policy loan and accrued loan interest at the time that we pay benefits under this rider, an amount equal to a percentage of the loan and accrued loan interest will be deducted from the Monthly Benefit Payment and used as a loan repayment and will reduce the amount otherwise payable to you. This percentage will equal the Monthly Benefit Payment divided by the portion of the Long-Term Care Specified Amount that we have not accelerated prior to this date.
4. Loan Extension and Paid Up Death Benefit Guarantee endorsements of the policy will no longer be applicable at any time once benefits are paid under this rider.

If this is a variable life policy, transfers between any of your unloaned value in our Guaranteed Interest Account (GIA) and your values in the investment funds of our Separate Account (SA) may continue to be made in accordance with the "Transfers" provision of the policy. However, we reserve the right to restrict your investment options in the funds of our SA while a Period of Coverage continues. If we do this, we will give you advance written notice.

(B) After a Period of Coverage ends:

1. The face amount of the policy and the Long-Term Care Specified Amount are reduced by the Accumulated Benefit Lien Amount.
2. The unloaned Policy Account Value will be reduced pro rata to the reduction in the policy face amount, but not by more than the Accumulated Benefit Lien Amount.
3. Any applicable surrender charges will be reduced pro rata to the reduction in the policy face amount.
4. The Maximum Monthly Benefit will not be reduced.
5. Any premium fund value or lapse protection fund value that is used by us to determine whether a guarantee against policy lapse or a guarantee of death benefit protection is in effect will also be reduced pro rata to the reduction in the policy face amount.
6. Any remaining balance for an outstanding loan and accrued loan interest will not be reduced.
7. The Accumulated Benefit Lien Amount is reset to zero.

If this is a variable life policy, the reduction in your Policy Account Value will reduce your unloaned value in our Guaranteed Interest Account (GIA) and your values in the investment funds of our Separate Account (SA) in accordance with your monthly deduction allocation percentages then in effect. If we cannot make the reduction in this way, we will make the reduction based on the proportion that your unloaned values in our GIA and your values in the investment funds of our SA bear to the total unloaned value in your Policy Account.

If this is not a variable life policy, the reduction will be taken entirely from the unloaned value in your Policy Account.

After the Period of Coverage has ended, we will provide you with notice of the adjusted values. If the reduction in the Policy Account Value would exceed the unloaned portion of the Policy Account, this policy will terminate subject to the "Grace Period" provision of the policy.

- (C) If the entire Long-Term Care Specified Amount has been paid out, the Period of Coverage will end, policy values will be adjusted as described in (B) above, this rider will terminate and the policy may terminate.

Extension of Benefits. If this policy lapses before the current Long-Term Care Specified Amount has been paid out, terminating this rider while the insured person is confined in a Long-Term Care Facility but before any rider benefits have been paid, benefits for that confinement may be payable provided that the confinement began while this rider was in force and continues without interruption after rider termination. Benefits may continue until the earliest of the following dates: (a) the date the insured person is discharged from such confinement; (b) the date when the current Long-Term Care Specified Amount has been paid; or (c) the date of death of the insured person. If benefits are payable under this provision, there will be no death benefit payable to the beneficiary or beneficiaries named in the base policy.

This Extension of Benefits is subject to all other provisions of this rider (including but not limited to the "Elimination Period" and "Eligibility for the Payment of Benefits" provisions).

Exclusions. Qualified Long-Term Care Services do not include treatment or care:

1. for attempted suicide or intentionally self-inflicted injuries;
2. as a result of alcoholism or drug abuse (unless drug abuse was a result of the administration of drugs as part of treatment by a Physician);
3. due to war (declared or undeclared) or any act of war, or service in any of the armed forces or auxiliary units;
4. due to committing or attempting to commit or participating in a felony, riot or insurrection;
5. for a mental, psychoneurotic, or personality disorder without evidence of organic disease (Alzheimer's Disease and senile dementia are not excluded from coverage);
6. received outside the United States unless the initial and any annual renewal certifications are completed by a Physician licensed in the United States. For purpose of this exclusion, United States shall mean the 50 states, District of Columbia, Puerto Rico, and the U.S. Virgin Islands.

In addition, we will not pay any benefits under this rider if rider benefits are sought only because a third party requires that this rider be exercised (as, for example, to obtain or maintain a government assistance benefit).

General Provisions

Representations and Contestability. If this rider has been in effect for less than six months, we may rescind it or deny an otherwise valid claim if the application for this rider contained a misrepresentation that is material to the acceptance of the application.

If this rider has been in effect for at least six months, but less than two years, we may rescind it or deny an otherwise valid request for rider benefits if the application contained a misrepresentation that is both:

1. material to the acceptance of the application; and
2. pertains to the condition for which the claim is made.

After this rider has been in effect for two years, it is incontestable, except for relevant facts relating to the insured person's health that you or the insured person knowingly and intentionally misrepresented. In the event that this rider is rescinded after we have paid benefits under this rider, we may not recover the payments already made; however, any death benefit payable under the base policy will be reduced by the amount of such payment and policy values will be adjusted as described in subsection (B) of the "Effects of Rider Benefits on Policy" provision of this rider.

All statements in the rider application are deemed to be representations and not warranties.

Misstatement in Age or Sex. If we determine while the insured person is alive that the insured person's age or sex has been misstated on the application, we will recalculate all policy values from the date of policy issue. If the insured person's correct age on the date that this rider became effective was such that we would not have issued this rider, then our liability will be limited to the refund of all charges made for this rider.

Grace Period. The Grace Period provision of the policy will apply to this rider. During the Grace Period this rider will stay in effect.

Restoration of Rider Benefits When the Owner is the Insured Person. If this rider terminates while you would have otherwise met the eligibility criteria as described in the "Eligibility for the Payment of Benefits" provision, this rider may be restored if you provide a written request within 5 months after the date of termination, and provided that all of the following conditions are met:

1. the policy is restored in accordance with the terms of its restoration provision, to the extent necessary for restoration of rider benefits in effect at the time of termination;
2. we receive satisfactory proof that you would have qualified for benefits on the date of termination; and
3. we receive payment of all overdue rider charges.

The restored rider will not provide Monthly Benefit Payments during the period of lapse to the date of restoration. The effective date of the restored rider will be the beginning of the policy month that coincides with or next follows the date we approve your request.

Notice of Claim. Written notice of claim must be submitted to us to our Administrative Office within 30 days after a covered loss starts or as soon as reasonably possible. The notice should include your name, the insured person's name (if not the same), the policy number, and the type of care the insured person is receiving or plans to receive.

Claim Forms. We will furnish you with forms for filing proof of loss within 15 days after we receive notice of claim. If we do not, you can comply with this rider's Proof of Loss requirement by writing to us within 90 days after the loss occurs about the nature and extent of the loss.

Proof of Loss. Written proof of loss must be given in a form satisfactory to us at our Administrative Office during the insured person's lifetime and within 90 days after such loss. If it is not reasonably possible to give written proof in the time required, we shall not reduce or deny a claim for this reason if the proof is given as soon as reasonably possible. However, the proof must be given to us as soon as reasonably possible and during the insured person's lifetime, and in no event, except in the absence of legal capacity, later than one year from the time specified.

Time of Payment of Claims. Benefits for any loss covered under this rider will be paid as soon as we receive proper written proof of loss, as described above, and any Elimination Period requirement has been met.

Physical Examinations. We, at our own expense, reserve the right to have the insured person examined as often as we may reasonably require during a Period of Coverage.

Appeals. We will notify you in writing if we do not approve your request for benefits under this rider. We will provide you with a written explanation of the reasons for the denial. You have the right to appeal our claims decision and request that we make all information directly related to such denial available to you. We will provide you with such information within 60 days after the receipt of your written request.

Notice of Release. You must submit immediate notice to us at our Administrative Office when the insured person's confinement in a Long-Term Care Facility or Home Health Care is no longer required.

Legal Actions. No legal action may be brought to recover under this rider within 60 days after written proof of loss has been given as required by this rider. No such action may be brought after three years from the time written proof of loss is required to be given.

Rider Termination. This rider will terminate after all applicable adjustments to policy values as described in this rider have been made, and no further benefits will be payable (except as provided under the "Extension of Benefits" provision of this rider), on the earliest of the following:

1. at any time after the first policy year at the beginning of the policy month that coincides with or next follows the date we receive your written request to terminate this rider;
2. upon termination or surrender of the policy;
3. the date of death of the insured person;
4. the date when the Accumulated Benefit Lien Amount equals the current Long-Term Care Specified Amount;
5. the effective date of the election of a Paid Up Death Benefit Guarantee;
6. the date you request payment under an Accelerated Death Benefit Rider due to terminal illness of the insured person;
7. the date the policy goes on Loan Extension; or
8. on the date that a new insured person is substituted for the original insured person under the terms of any Substitution of Insured rider.

General. This rider is part of the policy. Its benefit is subject to all terms of this rider and the policy. All provisions of the policy continue to apply except as specifically modified by this rider. This rider has no cash or loan values.

AXA EQUITABLE LIFE INSURANCE COMPANY



Karen Field Hazin, Vice President,
Secretary and Associate General Counsel



Christopher M. Condrón,
Chairman and Chief Executive Officer

Disability Rider- Waiver of Monthly Deductions

In this rider, "we", "our" and "us" mean AXA Equitable Life Insurance Company. "You" and "your" mean the owner of the policy at the time an owner's right is exercised.

This Rider's Benefits and Its Cost. We will waive the monthly deductions from the Policy Account as described in the policy, when we receive proof that total disability of the insured person has existed continuously for at least six months, as provided in this rider.

If total disability begins on or after the insured person's fifth birthday and before the age 60 anniversary, we will waive all such deductions while total disability continues.

If total disability begins at or after the age 60 anniversary, we will waive only such deductions due to be made before the age 65 anniversary while total disability continues.

In this rider, "age 60 anniversary" and "age 65 anniversary" mean the policy anniversaries nearest the insured person's 60th and 65th birthdays, respectively.

While such deductions are being waived:

1. Insurance under the policy and under any additional benefit riders will be provided in accordance with their terms; and
2. You may not increase or decrease the Face Amount of Insurance; and
3. Except for the waiver of monthly deductions, your Policy Account will continue to operate as if monthly deductions were not being waived.

Monthly deductions made from your Policy Account during total disability that are later waived will be refunded as credits to your Policy Account as of the dates they were subtracted. The value of your Policy Account will be determined as if such deductions had never been made.

While this rider is in effect, its cost will be a part of the monthly deduction from the Policy Account. The monthly cost is a percentage of the total monthly deduction from the Policy Account, as described in the policy.

Such percentage will be determined by us from time to time, based on the insured person's sex, attained age and rating class. It will never be more than the percentage shown in the Table of Guaranteed Maximum Rates For Disability Waiver of Monthly Deductions on Page 4-Continued of the policy. Any change in the cost of insurance percentage we use for this benefit will apply to all individuals of the same class as the insured person.

What is Total Disability? Total disability means the insured person'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 person'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 person engages in any occupation.

What is Not Covered? We will not waive such monthly deductions:

1. For a total disability that begins before the insured person's fifth birthday, or that begins while this rider is not in effect; or
2. If total disability results from:
 - a. Intentionally self-inflicted injury; or
 - b. Service in the armed forces of any country at war, including declared and undeclared war and resistance to armed aggression.

You Must Give Us Proof of Disability. Before we waive any monthly deductions, we must be given written notice of claim, and proof that total disability of the insured person has existed continuously for at least six months. This must be done while total disability continues and while the insured person is still living, or as soon as reasonably possible. If notice or proof is not given as soon as reasonably possible, we will not refund as a credit monthly deductions due more than one year prior to the date that proof is given to us.

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 monthly deductions have been waived for the five preceding years.

We may require examination of the insured person by our medical representatives at our expense as part of any proof of total disability.

We will not waive monthly deductions if proof is not furnished as required.

When this Rider Will Terminate. This rider will not be in effect:

1. At and after the age 65 anniversary; or
2. If the policy terminates.

You may terminate this rider by asking for this in writing. The effective date of termination will be the beginning of the policy month which coincides with or next follows the date we receive your request.

A claim based on total disability that begins before termination of this rider will not be affected by the termination.

When This Rider is Incontestable. This rider will become incontestable only after it has been in effect, during the lifetime of the insured person and without the occurrence of total disability of the insured person, for two years from the later of: (a) the Date of Issue of the Policy; or (b) the date as of which this rider becomes effective if added or restored after issue of the policy.

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.

AXA Equitable Life Insurance Company



Karen Field Hazin, Vice President,
Secretary and Associate General Counsel



Christopher M. Condrón,
Chairman and Chief Executive Officer

Loan Extension Endorsement

In this Endorsement, "we", "our" and "us" mean AXA Equitable Life Insurance Company. "You" and "Your" mean the owner of the policy at the time an owner's right is exercised.

This Endorsement is made part of this policy as of the Register Date. It should be attached to and kept with your policy.

1. This Endorsement modifies your policy by adding the following provision:

This policy will go on loan extension at the beginning of any policy month starting with the policy anniversary nearest the insured person's 75th birthday, but not earlier than the twentieth policy anniversary, if:

- a) the Net Policy Account value is not sufficient to cover the monthly deductions then due;
- b) the outstanding loan amount and accrued loan interest is greater than the larger of the current base policy face amount or the initial base policy face amount;
- c) the Death Benefit option then in effect is Option A;
- d) the life insurance qualification test is the guideline premium test;
- e) the policy is not then in a Grace Period;
- f) no current or future distribution from the policy will be required to maintain its qualification as life insurance under the Internal Revenue Code;
- g) you have not exercised the Accelerated Death Benefit Rider; and
- h) the Return of Premium Death Benefit Rider is not in effect.

EFFECT OF LOAN EXTENSION. When loan extension takes effect, all additional benefit riders and endorsements will terminate. We will then take monthly deductions up to the amount in the unloaned Policy Account. Thereafter,

- the policy will not lapse;
- loan interest will continue to be due on each policy anniversary. If the interest is not paid when due, it will be added to your outstanding loan;
- any payments received while the policy is on loan extension will be applied as loan repayments and will be allocated to the unloaned portion of the Policy Account to the extent of any outstanding loan and accrued loan interest. Any excess will be refunded to you; and
- on each policy anniversary and any time you repay all of a policy loan, interest credited to the loaned portion of the Policy Account will be allocated to the unloaned portion of the Policy Account.

PROHIBITED TRANSACTIONS. The following transactions will not be permitted when loan extension is in effect:

- a) newly requested loans;
- b) partial withdrawals;
- c) premium payments;
- d) changes in face amount or death benefit option; and
- e) any other requested policy changes.

2. **This Endorsement further modifies your policy by replacing the Death Benefit provision with the following provision when loan extension is in effect:**

Death Benefit. The death benefit of this policy is the greatest of (a) the Policy Account Value or the outstanding loan and accrued loan interest on the insured person's date of death, multiplied by a percentage shown in the Table of Percentages on Page 4-continued for the insured person's age (nearest birthday) at the beginning of the policy year of determination, whichever is greater, (b) the outstanding loan and accrued loan interest on the insured person's date of death plus \$10,000, or (c) the current base policy face amount.

3. Once loan extension is in effect, it will remain in effect during the lifetime of the insured person, unless the policy is surrendered for the Net Cash Surrender Value.

Written notification that loan extension is in effect will be provided.

When This Endorsement Will Terminate. This Endorsement will terminate if this policy is surrendered for the Net Cash Surrender Value or is otherwise terminated.

AXA Equitable Life Insurance Company



Karen Field Hazin, Vice President,
Secretary and Associate General Counsel



Christopher M. Condrón,
Chairman and Chief Executive Officer

SPECIAL

Children's Term Insurance Rider

In this rider, "we", "our" and "us" mean AXA Equitable Life Insurance Company. "You" and "your" mean the owner of the policy at the time an owner's right is exercised.

This Rider's Benefit and its Cost. 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 on or before the earlier of: (a) the child's 25th birthday; or (b) the Expiry Date of this rider, which is the policy anniversary nearest the insured person's 65th birthday or any earlier termination of the insurance under the policy.

The amount of term insurance on each insured child is \$1,000 for each unit of coverage.

The Policy Information section of the policy or the rider that adds this benefit shows the number of units of coverage.

While this rider is in effect, its charge will be a part of the monthly deduction from the Policy Account. The maximum monthly charge for this benefit is shown in the Table of Maximum Monthly Charges For Benefits on Page 4 of this policy.

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 person, 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 person after the date of the application for this rider; or
- a child legally adopted by the insured person 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 Beneficiary for the benefit payable at the death of an insured child will be the insured person, if living; if not living, the surviving children of the insured person, 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 person" as used in this rider means: (1) surviving children (including legally adopted children) of the insured person, 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 person, 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 person 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 person.

Conversion Privilege. While this rider is in effect, you may convert term insurance on an insured child to a new policy on the life of that child. You may do this as of the day following the earlier of: (a) the child's 25th birthday; or (b) the Expiry Date of this rider. We will not ask for evidence of insurability, except as stated herein for additional benefit riders.

The new policy will have an insurance amount equal to the amount of term insurance on the child. Or, if the conversion date is determined by (a) of the paragraph above, you may choose that the insurance 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 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 permanent plan of insurance for which it qualifies under our rules then in effect as to plan, amount, age and class of risk.

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 on or within 31 days before the conversion date. We will tell you the amount of the first premium for the new policy on request.

When this Rider will Terminate. This rider will not be in effect:

1. On and after its Expiry Date;
2. If the insurance under this rider is replaced by paid-up insurance; or
3. If the policy terminates.

You may terminate this rider by asking for this in writing. The effective date of termination will be the beginning of the policy month which coincides with or next follows the date we receive your request.

How You May Restore this Rider's Benefit. If you restore the policy's benefits, you may restore it with this rider in accordance with the section of the policy entitled "Restoration of Policy Benefits." You must also provide evidence satisfactory to us of the insurability of each child who will be insured under this restored rider. No benefit will be payable for any insured child who died between the end of the grace period and the date of restoration of rider benefits.

Suicide Exclusion. If the insured person commits suicide, while sane or insane, within two years after the later of: (a) the Date of Issue of the policy; or (b) the date as of which this rider becomes effective if added or restored after issue of the policy, our liability under this rider will be limited to the payment of a single sum equal to the monthly deductions made for it.

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

When this Rider is Incontestable. We have the right to contest the validity of this rider based on material misstatements made in the application for it. 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 later of: (a) the Date of Issue of the policy; or (b) the date as of which this rider becomes effective if added or restored after issue of the policy. All statements made in such application are representations and not warranties.

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.

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 for the benefit of the Beneficiary in accordance with the payment options described in the section of the policy entitled "How Benefits Are Paid." 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. You may choose a payment option for the new Beneficiary in accordance with such section of the policy.

AXA Equitable Life Insurance Company



Karen Field Hazin, Vice President,
Secretary and Associate General Counsel



Christopher M. Condron,
Chairman and Chief Executive Officer

Option to Purchase Additional Insurance Rider

In this rider, "we", "our" and "us" mean AXA Equitable Life Insurance Company. "You" and "your" mean the owner of the policy at the time an owner's right is exercised.

You may buy new insurance policies on the life of the Insured under Options A, B and C, subject to the terms of this rider. We will not ask for evidence of insurability, except as stated in Option B and except where required for additional benefit riders. The consent of the Insured is required.

OPTION AMOUNT. This amount is shown on page 3 of the policy or on the Additional Benefits Rider if this rider is added after issue of the policy.

THIS RIDER'S COST. While this rider is in effect, its charge will be a part of the monthly deduction from the Policy Account. The maximum monthly charge for this benefit is shown in the Table of Maximum Monthly Charges For Benefits on Page 4 of the policy.

OPTION A - REGULAR OPTION (AVAILABLE ON OPTION DATES). You may buy a new policy with a face amount up to the Option Amount on each of the Option Dates that applies to the Insured while this rider is in effect. These dates are the policy anniversaries after issue of this rider on which the Insured's age at nearest birthday is 22, 25, 28, 31, 34, 37 and 40. The number of Option Dates available depends on the Insured's age at issue of this rider.

You must submit an application for the new policy and pay its first premium on or within 60 days before the Option Date. The new policy will not take effect until the Option Date, which will be its Register Date.

OPTION B - ALTERNATIVE OPTION (AVAILABLE INSTEAD OF NEXT REGULAR OPTION). Within three years before an Option Date specified in Option A and while this rider is in effect, you may buy a new policy on the life of the Insured with a face amount up to the Option Amount. You may do this only if evidence of insurability satisfactory to us is furnished.

We will issue the new policy with a current Register Date and at a premium rate based on the same rating class as applies to this rider if the following condition is met. We must be satisfied that the Insured then qualifies for a permanent plan of life insurance policy, with premiums payable for life and at a premium rate not more than 150% of the premium rate then in effect for that policy at the same class of risk as under this rider.

You must submit an application for the new policy and pay its first premium while the Insured is living. Any purchase under this option automatically cancels the regular option on the next Option Date.

OPTION C - BIRTH OR ADOPTION OF A CHILD.

You may also buy a new policy on the life of the Insured if a live birth of a child of the Insured or a legal adoption of a child by the Insured occurs while this rider is in effect. Its face amount may be up to the Option Amount. In the case of multiple live births, its face amount may be up to the Option Amount times the number of live births.

You must submit an application for the new policy and pay its first premium within 90 days after the birth or adoption while this rider is in effect. The new policy will not take effect until its Register Date. This date will be the earlier of (1) the 90th day after the date of birth or adoption; or (2) the day after this rider terminates. We may require evidence of birth or adoption.

TEMPORARY INSURANCE UPON BIRTH OR ADOPTION.

We will provide temporary insurance on the life of the Insured starting on the date of the live birth of a child of the Insured or legal adoption of the child by the Insured, if this rider is then in effect. If the Insured dies before the 90th day following such date and while this rider is in effect, we will pay an amount equal to the Option Amount upon receipt of proof of death. In the case of multiple births, we will pay the Option Amount times the number of live births. We will include this amount with the other insurance benefits of this policy.

THE NEW POLICY. You may choose that the new policy be on any permanent plan of insurance for which it qualifies under our rules in effect on its Register Date as to plan, amount, age and class of risk. You may not choose a policy of term insurance, a policy which includes term insurance, or one that provides insurance on more than one life. Premiums will be at our rate then in effect for the Insured's attained insurance age and for the same class of risk as under this rider.

The new policy may contain an Accidental Death Benefit rider if such a rider is then in effect under this policy. The amount of its benefit may not be more than the face amount of the new policy. The new policy may also contain a Disability Waiver of premium or monthly deductions rider if such a rider is then in effect under this policy. Otherwise, inclusion of an additional benefit rider will require our consent and evidence of insurability satisfactory to us. The new policy may not contain an Option to Purchase Additional Insurance.

TERMINATION. This rider will no longer be in effect:

1. on and after the policy anniversary nearest the Insured's 40th birthday (except as to any Regular Option then available);
2. if the insurance under the policy terminates.

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

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

The Suicide Exclusion and Incontestability provisions of the policy apply to this rider. However, if this rider is added after the policy is issued, the periods referred to in them are measured for this rider from its Date of Issue as shown on the Additional Benefits Rider.

AXA Equitable Life Insurance Company



Karen Field Hazin

Karen Field Hazin, Vice President,
Secretary and Associate General Counsel



Christopher M. Condon

Christopher M. Condon,
Chairman and Chief Executive Officer

SPECIMEN

Return of Premium Death Benefit Rider

In this Rider, "we", "our" and "us" mean AXA Equitable Life Insurance Company. "You" and "Your" mean the owner of the policy at the time an owner's right is exercised.

Effective Date of this Rider. This rider is effective on the Register Date of this policy.

This Rider's Benefit. This rider provides a benefit payable upon the death of the insured person while this policy is in force. The total death benefit for the base policy and this rider will equal the greater of (1) the sum of the base policy face amount and this rider's face amount, or (2) a percentage of the amount in your Policy Account at that time. However, if the policy offers a death benefit Option B and this is in effect on the date of death, the total death benefit for the base policy and this rider will equal the greater of (1) the sum of the base policy face amount, this rider's face amount, and the amount in your Policy Account, or (2) a percentage of the amount in your Policy Account at that time. The percentages used are those shown in the "Table of Percentages" in the policy. The death benefit of this rider is equal to any excess of the total death benefit described above over the death benefit for the base policy.

This rider's face amount is determined as follows:

- (1) this rider's face amount has an initial value equal to a percentage, as selected by you in the application for this rider and as permitted by our rules in effect at that time, of the initial premium paid. This percentage is shown in the "Policy Information" section;
- (2) any subsequent premium payment will increase this rider's face amount by the same percentage of the premium paid effective as of the date that we receive the payment at our Administrative Office;
- (3) each partial withdrawal of Net Cash Surrender Value will reduce this rider's face amount by the amount of the withdrawal, but not to less than zero, effective on the date of the withdrawal as specified in the policy;
- (4) this rider's face amount is increased on each policy anniversary to reflect accumulation at the Return of Premium Accumulation Rate that was in effect during the preceding policy year, taking into account any changes in rider face amount that took place during such year due to premium payments or partial withdrawals. The increase will take effect only on the policy anniversary and only if the policy is in force at that time;
- (5) each request for a decrease in this rider's face amount will reduce the rider face amount by the amount of requested decrease, but not to less than zero, effective on the policy anniversary that coincides with or next follows the date we approve your request.

At issue of this rider, the Return of Premium Accumulation Rate is the annual rate selected by you on the application as permitted by our rules in effect at that time. This rate will be 0% if you do not make a selection. The initial rate is shown in the "Policy Information" section. You may make a written request to our Administrative Office to change this rate. This request is subject to our approval and the following:

- (1) a requested decrease in the rate will take effect on the policy anniversary that coincides with or next follows the date we approve your request; and
- (2) a requested increase in the rate requires evidence of insurability of the insured person satisfactory to us. The increase will take effect on the policy anniversary that coincides with or next follows the date we approve your request.

You may ask for a change in this rider by completing an application for change, which you can get from your agent or by writing to us at our Administrative Office. A copy of your application for change will be attached to the new "Policy Information" section that we will issue when the change, if approved, is made. The new section and the application for change will become a part of this policy. We may require you to return this policy to our Administrative Office to make a policy change.

Maximum Rider Face Amount. In no event will this rider's face amount exceed the maximum rider face amount shown in the "Policy Information" section.

Cessation of Increases. Increases in this rider's face amount will cease on the earliest of the following dates:

- (1) on the date that this rider's face amount equals the maximum rider face amount;
- (2) at the beginning of the policy month that coincides with or next follows the date we receive your written request to stop any further increases;
- (3) on the policy anniversary nearest the 100th birthday of the insured person;
- (4) on the effective date that the death benefit option of this policy is ever changed to Option B; or
- (5) on the effective date of any requested increase in the base policy face amount.

Once increases in this rider's face amount cease, they cannot be started again. After increases cease, and even if there is a subsequent reduction in this rider's face amount, it will not increase due to premium payments or by application of the Return of Premium Accumulation Rate.

Decrease in Rider Face Amount. You may write to our Administrative Office to request a decrease in the face amount of this rider. This request must be made prior to the policy anniversary nearest the 100th birthday of the insured person. The decrease will take effect on the policy anniversary that coincides with or next follows the date we approve your request. The rider face amount will be reduced by the amount of the requested decrease, but not to less than zero. Unless you specify otherwise, any subsequent increases in rider face amount due to premium payments or by application of the Return of Premium Accumulation Rate will continue as specified in this rider, subject to the "Cessation of Increases" provision of this rider.

Partial Net Cash Surrender Value Withdrawal. A partial withdrawal under this policy will first reduce this rider's face amount by the amount of the withdrawal, but not to less than zero. If the withdrawal exceeds this rider's face amount, the excess amount will reduce the base policy face amount. However, if the policy offers a death benefit Option B and this is in effect on the date of the withdrawal or where the death benefit is a percentage of the amount in the Policy Account, any partial withdrawal will also reduce the base policy death benefit under the provisions of the policy. In all cases, the Cash Surrender Value and Policy Account of the policy will be reduced by the full amount of the withdrawal, as specified in the "Partial Net Cash Surrender Value Withdrawal" provision of this policy.

The Cost of This Rider. While this rider is in effect, its charge will be part of the monthly deductions from the Policy Account. The maximum monthly charge for this rider is shown in the Policy Information section of the policy.

Lapse Protection. If there is a Lapse Protection Rider in effect, it also applies to this benefit. The Lapse Protection Total Death Benefit for the base policy and this rider will equal the greater of (1) the base policy face amount plus the rider face amount, or (2) a percentage of the amount in the Lapse Protection Fund at that time. The percentages used are those shown in the "Table of Percentages" in the policy. The Lapse Protection Return of Premium Death Benefit is equal to any excess of the Lapse Protection Total Death Benefit for the base policy and this rider over the Lapse Protection Death Benefit for the base policy. None of these quantities are used to determine actual values or benefits under the base policy or this rider. They are only used in calculating Lapse Protection Monthly Deductions from the Lapse Protection Fund, as further described in the Lapse Protection Rider.

When This Rider Will Terminate. This rider will terminate on the date the policy ends without value at the end of a Grace Period, is given up for its Net Cash Surrender Value, or otherwise terminates. You may also terminate this rider at any time after policy issue by submitting a written request for this to our Administrative Office. The effective date of termination will be the beginning of the policy month that coincides with or next follows the date we approve your request. If you request termination of this rider, it may not again be added at a later date.

Restoration. If this rider was in force when the policy ended without value at the end of a Grace Period, it may be restored along with the policy. This will be subject to the conditions of the "Restoring Your Policy Benefits" provision of the policy. If restoration is approved, this rider face amount will be equal to the rider face amount at termination plus the selected percentage of the premium paid for restoration (but not more than the maximum rider face amount), subject to any earlier cessation of increases as detailed in the "Cessation of Increases" provision of this rider.

Incontestability and Suicide Exclusions. The Incontestability and Suicide Exclusion provisions of this policy also apply to this rider.

General. This rider is part of the policy. Its benefit is subject to all the terms of this rider and the policy. Any requested change in this rider is subject to our approval.

AXA Equitable Life Insurance Company



Karen Field Hazin, Vice President,
Secretary and Associate General Counsel



Christopher M. Condrón,
Chairman and Chief Executive Officer

Specimen

Substitution of Insured Rider

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.

After the second policy year you may substitute coverage on the life of a new insured person for coverage on the life of the original insured person, subject to conditions we determine. These conditions include but are not limited to the following:

1. We must be satisfied that the new insured person is insurable for the amount of insurance applied for.
2. The new insured person must join in the request for substitution and the owner of the policy must have an insurable interest in the new insured person. If the policy is assigned, the assignee must consent to the substitution of coverage.
3. The substitution may be made as of the beginning of any policy month if the new insured person is not then over age 65.
4. The new insured person's date of birth must not be later than the Register Date of the policy.
5. This policy must be in effect on the date of substitution with all monthly deductions from the Policy Account having been made, and with no such deductions or premiums then being waived nor amounts credited to the Policy Account by a disability rider.
6. Within 31 days before the date of substitution, we must receive: (a) written request for the substitution on our application form; (b) evidence of the new insured person's insurability satisfactory to us, and (c) any extra sum we may require.
7. Insurance on the original insured person will cease when insurance on the new insured person takes effect.
8. Any additional benefit riders in effect under the policy will terminate at the time of substitution of insureds. You may apply for any of them as to the

new insured person. The issue of such riders will require our consent and evidence of insurability satisfactory to us.

9. In our determination the substitution must not affect the qualification of this policy as life insurance under the Internal Revenue Code or successor legislation, as interpreted by us.

EFFECTS OF SUBSTITUTION. Premiums for the policy will be based on our rules in effect on its Register Date for the insurance age of the new insured person on that date. The Register Date for the policy will not be affected by the substitution of insureds. The face amount of insurance and the death benefit option in the policy will be the same as in effect immediately before the substitution, unless either (i) you ask for a change or (ii) a change is required in order to continue the qualification of the policy as life insurance under the Internal Revenue Code or successor legislation.

We reserve the right to charge an administrative fee of \$100 for the substitution. This fee will be deducted from the policy account.

The substitution of a new insured person for the original insured person shall not preclude additional later substitutions of insureds, in which case reference to the "original insured person" shall include such substituted insureds as the context requires.

The time periods in the Incontestability and Suicide Exclusion provisions of the policy will begin on the date of substitution.

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.

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