



Producer Guide

LIFE | UNIVERSAL

Brighthouse Premier
Accumulator Universal Life



Brighthouse
FINANCIAL®
Build for what's ahead™

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We're Brighthouse Financial

We are on a mission to help
people achieve financial security.

As one of the largest providers of annuities and life insurance in the U.S., we specialize in products designed to help people protect what they've earned and ensure it lasts. We are built on a foundation of experience and knowledge, which allows us to keep our promises and provide the value they deserve.

Give Clients the Best of Both Worlds

With protection and growth
in one product.

Both financial professionals and clients agree that purchasing life insurance can be a confusing and difficult process. While the details and terminology might sound confusing for your clients, our goal at Brighthouse Financial® is to provide transparency in showing how life insurance can play an important role by providing both death benefit protection and helping your clients in satisfying the needs they envision. There are hard choices to make in life, but life insurance doesn't have to be one of them.

Here's the good news: Brighthouse Financial is making life insurance easier to understand through our marketing materials and our wholesaling support. We want to help you and your clients understand the benefits that life insurance can provide.



7 out of 10 American households

would have trouble covering everyday living expenses within two years if the primary wage earner died.¹

¹ 2017 Insurance Barometer Study. LIMRA, 2017.

Brighthouse Premier Accumulator Universal Life (PAUL)

Give clients both protection and growth. The dollars your clients save may be the dollars they value most of all. That's why we built a product that provides life insurance protection for their family and generates returns at the same time.

- **On the protection side**, PAUL includes a generally income tax-free death benefit and offers an optional feature that gives the owner the ability to access policy values to help pay for costs should the insured suffer from a chronic or terminal illness.
- **On the growth side**, it helps clients generate returns and provides access to the policy's benefits, including its cash value, with no surrender charges² – just in case clients need their money to work for them elsewhere.

This way, clients can grow their money while feeling confident that their family will be taken care of financially. **This is the best of both worlds – protection and growth in one product.**

PAUL is a life insurance product with no surrender charges, designed to provide your clients both death benefit protection and coverage flexible enough to meet changing needs.



Death benefit if the insured passes away



Coverage if the insured becomes chronically or terminally ill⁵



Access for your clients to their money with no surrender charges³



Asset-based compensation for you based on the policy's cash value; similar to the asset-based compensation of a managed account



Growth in cash value fueled by competitive interest rates⁴

² Cash value that is accessed from a policy that is a Modified Endowment Contract (MEC) may be subject to income tax.

³ Policy loans and withdrawals may reduce the policy's cash value and death benefit and may cause the policy to lapse. If the policy lapses, your client may incur tax consequences. In addition, policy loan interest will be charged annually on any outstanding loan balance. If the policy is a MEC, loans and withdrawals may be subject to income tax.

⁴ Cost of insurance and other charges are deducted monthly from cash value. Interest rates are subject to a guaranteed contractual minimum.

⁵ This coverage is available through a rider for an additional charge. The Chronic and Terminal Care Rider is not available in CA, FL, or NY.

Don't Just Tell Them – Show Them

To help your clients understand PAUL, you may consider running an illustration that shows them how they can benefit from death benefit coverage, high early cash value, growth, and our Chronic and Terminal Care Rider.

Who may be an ideal client for PAUL?

Consider starting a conversation about PAUL with clients who have diverse income sources and varied planning objectives, and who meet the following criteria:

- **Need for protection:** Clients who need to provide for their family with death benefit protection or who want an optional feature that gives them the ability to use the policy, if they choose, to help pay for costs should the insured suffer from a chronic or terminal illness.
- **Money earning little to no return:** Clients with assets that could be working harder for them such as CDs, savings, and checking accounts.
- **Want easy access:** Clients who desire easy access to policy cash values with high early liquidity.⁶
- **Desire non-correlated asset:** Clients who do not wish to have their policy values impacted by market fluctuations.



1 in 3
Americans

say they do not
have enough
life insurance
coverage.⁷

⁶ Policy loans and withdrawals may reduce the policy's cash value and death benefit and may cause the policy to lapse. If the policy lapses, your client may incur tax consequences. In addition, policy loan interest will be charged annually on any outstanding loan balance. If the policy is a MEC, loans and withdrawals may be subject to income tax.

⁷ 2017 Insurance Barometer Study. LIMRA, 2017.

Before purchasing PAUL, your clients should consider their other assets, income, and investments – such as the equity in their homes, their Social Security benefits, any IRAs, savings accounts, and other sources of retirement income – as those other assets are not included in this hypothetical example.

Let's see how it works using a 55-year-old female, Standard, Nonsmoker who pays a one-time premium of \$250,000 or \$100,000 for a PAUL policy.

The data below reflects values at the end of the representative policy year and are based on non-guaranteed charges and a non-guaranteed 4.00% interest crediting rate. Values that are based on guaranteed charges and a guaranteed interest crediting rate are available in an illustration.

One-Time Premium	Year 1		Year 5		Year 20
	Year 1	Year 3	Year 5	Year 5	Year 20
\$250,000	\$248,872 (CSV)	\$266,355 (CSV)	\$283,910 (CSV) 2.58% (IRR)	\$283,910 (CSV) 2.58% (IRR)	\$702,883 (DB) \$527,163 (CAT ⁸)
\$100,000	\$99,423 (CSV)	\$106,097 (CSV)	\$112,652 (CSV) 2.41% (IRR)	\$112,652 (CSV) 2.41% (IRR)	\$269,147 (DB) \$201,861 (CAT ⁸)

Availability of their money with no surrender charges.

Growth potential for their money with competitive interest rates not directly tied to market fluctuations.⁹

Coverage to help provide financial protection for their loved ones.

CSV: Cash Surrender Value
IRR: Internal Rate of Return
DB: Death Benefit
CAT: Chronic and Terminal Care Rider

Hypothetical example for illustrative purposes only.

Underwriting

BrightHouse Simple Underwriting key features for qualifying cases:

- Simple, less-invasive process – no exams and no labs
- Simple underwriting offer – yes or no answer
- Faster underwriting decision – generally within 24 hours following the completed application and cognitive interview if applicable

We still offer fully underwritten policies.

⁸ The Chronic and Terminal Care Rider benefit amount is the total amount that can be accelerated over the life of the policy. This amount is determined at the time of claim and is equal to 75% of the death benefit at the time of claim.

⁹ High early cash values are based on the assumptions of current interest crediting rates and current charges, which are not guaranteed and assume the policy is optimally funded. Guaranteed rates and charges will result in lower values. Cost of insurance and other charges are deducted monthly from cash value. Interest rates are subject to a guaranteed contractual minimum. Any presentation of non-guaranteed values to clients must be part of a complete company illustration.

Product Highlights



Please note: State variations may apply to all sections in this document.
For full details, see the policy for the relevant state.

Risk Class

Standard, Nonsmoker
and Smoker

Issue Ages

21-85

Face Amounts

Minimum Face Amount:

\$50,000

Maximum Face Amount:

\$5,000,000

Product Highlights

Face Amount Breakpoints

- Breakpoint 1: \$50,000
 - Breakpoint 2: \$100,000
 - Breakpoint 3: \$250,000
 - Breakpoint 4: \$500,000
 - Breakpoint 5: \$1,000,000
-

Death Benefit Options

Level – Death Benefit Option A
Increasing – Death Benefit Option B

Interest Rates

Guaranteed Interest Crediting Rate: 2.00%
Current Interest Crediting Rate: Portfolio Rate (see page 10)

Surrender Charges

No Surrender Charges

Policy Charges

Premium Based Charges: Percent of Premium Charge	Monthly Deduction: Monthly Policy Charge Monthly Coverage Expense Charge Monthly Cost of Insurance Charge Monthly Rider Charges (if applicable)
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Policy Loans

Available at any time after policy issue as long as the policy has loan value

Cash Withdrawals

Available after the first policy year as long as the policy has cash surrender value

1035 Exchanges

Allowed, including carryover loans

Policy Changes

Available after the first policy year:

- Face Amount Decreases
- Face Amount Increases
- Death Benefit Option Changes

Riders

- Chronic and Terminal Care Rider
 - Acceleration of Death Benefit Rider
 - Waiver of Specified Premium Rider
-

Availability

Is this product available for Term Conversions, Group Conversions, or exercise of other Contractual Obligations?

No. Brighthouse Conversion Whole Life is the sole product available for Group and Term conversions.

What is Brighthouse Simple Underwriting?

Brighthouse Simple Underwriting is an underwriting process available on single premium PAUL cases for issue ages 21-65 for face amounts up to \$2,500,000 and for ages 66-75 for face amounts up to \$1,000,000. For cases that qualify, no exams or labs will be required and a final underwriting decision may be delivered within 24 hours. In lieu of labs and full medical requirements, we leverage a telephone application and interview, and database checks (Medical Information Bureau [MIB], Prescription Database [Rx], Motor Vehicle Report [MVR], and public records). For full details, please call your wholesaler. Unisex rates are available for all policies issued in Montana. Check current state approval lists for base policy and rider availability.

How is the Issue Age determined?

The Proposed Insured's issue age is determined using the Age Nearest Birthday. The Policy Start Date can be backdated up to 180 days (state variations may apply) from the application signature date to conserve age at the request of the Policy Owner.

What is the benefit of the higher breakpoints?

In general, higher breakpoints result in lower costs per thousand of coverage. Breakpoints are determined at issue and upon an applied-for increase in face amount.

What are the available Death Benefit Options?

Two death benefit options are available:

- **Death Benefit Option A (Level)** provides for a death benefit equal to the policy face amount.
- **Death Benefit Option B (Increasing)** provides for a death benefit equal to the policy face amount plus the current cash value.

The death benefit under either Death Benefit Option will be increased to an amount that equals the policy's cash value multiplied by the minimum death benefit factor, if this amount is greater.

Premiums

What premium designs are available?

PAUL is designed for a single premium payment, but allows for flexible premiums. Once a policy is in force, additional premium payments may be subject to underwriting. Clients should ensure that the premium amount is sufficient to keep the policy in force. A policy will remain in force as long as the cash surrender value is sufficient to cover all monthly policy charges on each monthly anniversary.

What is the Target Premium?

The Target Premium is a calculated premium used for commissions and premium load determinations. Paying the Target Premium does not ensure that the policy will remain in force.

Is there a limit on premium payments?

The maximum face amount for this product is \$5,000,000. We will not accept premiums that result in a face amount that would exceed this limit.

Are 1035 exchanges allowed?

1035 exchanges, including carryover loan amounts, are allowed. Exchange amounts are expected to be paid within 12 months of the Policy Start Date. Carryover loans are existing debts on 1035 exchanges that are accepted by the new carrier.

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Tax

What is the 7-pay premium?

Section 7702A of the Internal Revenue Code defines the maximum premium, or the 7-pay limit, as the amount that can be paid into a policy during the first seven policy years, or seven policy years after a material change, in order to avoid having the policy classified as a Modified Endowment Contract (MEC).

What is a MEC?

A life insurance policy becomes a MEC when the cumulative premiums paid into the policy during the first seven years exceed the 7-pay limit. If the policy is purchased with a single premium, it will generally become a MEC. Even after the first seven policy years, a life insurance policy may become a MEC if it undergoes a "material change," which may include excessive premium payments or an increase in death benefit that requires evidence of insurability. The addition of a benefit or rider may be considered a material change.

How are MEC policies taxed?

A policy considered a MEC generally pays the death benefit income tax-free to the beneficiary upon the death of the insured, just like a life insurance policy that is not a MEC. However, loans and withdrawals are treated differently, as shown below.

In very general terms, the federal income tax impact of MEC and non-MEC status on distributions:

Distribution	Non-MEC	MEC
Withdrawal to Basis	Generally income tax-free ¹¹	Taxable up to the gain (gain taxed first) ¹²
Loan	Generally income tax-free ¹¹	Taxable up to the gain (gain taxed first) ¹²
Death Benefit	Generally income tax-free ¹¹	Generally income tax-free ¹¹

Is being classified a MEC always disadvantageous?

A MEC may still have some benefits for specific types of Policy Owners, including clients who:

1. Want to maximize their legacy planning by leveraging premium dollars today into income tax-free death benefit dollars upon the insured's death.
2. Want to maximize the amount available for tax-deferred cash value accumulation.
3. Have money that could be satisfying more needs than cash held in CDs or checking accounts. That money can be used to purchase the coverage they need and may offer these clients a more attractive rate of return on a tax-deferred basis, while also helping to protect their families.

Policy Charges

What is the Percent of Premium Charge?

We generally deduct a Percent of Premium Charge from the gross premium received. This charge involves sales expenses and taxes.

Percent of Premium Charge (Current Non-Guaranteed Basis)

Premium	Year 1	Years 2+
Up to Target Premium	33%	8%
In Excess of Target Premium	3%	3%

¹¹ A portion of death benefit proceeds received from employer-owned life insurance or from policies transferred for value may be subject to income tax. Other exceptions to the income tax-free treatment may apply.

¹² May also be subject to a 10% penalty tax if distribution occurs prior to age 59½.

Which premiums are subject to the Percent of Premium Charge?

Gross premiums, including but not limited to cash and cash equivalent payments, 1035 exchanges (including carryover loan amounts), and payments applied to the policy under a Waiver of Specified Premium Rider, are subject to the Percent of Premium Charge. Loan repayments are not considered gross premium.

What is the Monthly Deduction?

We deduct the monthly policy charges from the cash value at the beginning of each policy month. The sum of these charges is called the Monthly Deduction. The charges can include the Monthly Policy Charge, Monthly Coverage Expense Charge, Monthly Cost of Insurance Charge, and Monthly Rider Charges, if applicable.

What is the Monthly Policy Charge?

Generally, this is a \$10 per month charge that includes administrative costs such as record keeping, processing death benefit claims and policy changes, preparing and mailing reports, and overhead costs.

What is the Monthly Coverage Expense Charge?

The Monthly Coverage Expense Charge (MCEC) is a monthly charge that usually includes the costs of underwriting, issuing, and administration of the policy (including sales commissions). The charge is based on the policy's face amount.

What is the Monthly Cost of Insurance Charge?

The Monthly Cost of Insurance Charge (COI) includes the cost of providing death benefit coverage. The charge is based on the policy's Net Amount at Risk (NAR). Generally, the NAR equals the policy's death benefit less its cash value.

What are the Monthly Rider Charges?

These are the monthly costs for the Waiver of Specified Premium Rider. They are based on the rider's monthly benefit amount, and only apply when there is a Waiver of Specified Premium Rider on the policy. There are no monthly rider charges for either the Chronic and Terminal Care Rider or the Acceleration of Death Benefit Rider.

Are policy charges guaranteed?

No. Policy charges are not guaranteed. However, policy charges will never be more than the guaranteed rates detailed in the policy.

Interest Crediting Rate

How is the interest crediting rate determined?

The current interest crediting rate is a portfolio rate based on the rate of return earned on the Company's investment portfolio, which is part of what is called the Company's "general account." A portion of that return is paid to Policy Owners as the interest crediting rate.

The current interest crediting rate will not fall below the guaranteed interest crediting rate stated in the policy.

Accessing Policy Cash Value

For complete details about Accessing Policy Cash Value, please refer to the policy.

What options are available for accessing the policy's cash value?

The policy's cash value can be accessed through loans, withdrawals, and surrender.

How much of the policy's cash value is available for withdrawals?

The minimum partial withdrawal amount is \$100.

The maximum withdrawal is the greater of:

- 90% of the policy's net cash surrender value as of the beginning of the policy year, and
- Last year's maximum allowable withdrawal amount less any prior withdrawals in the current year.

For additional details and restrictions please refer to the policy.

What is the maximum number of withdrawals allowed per policy year?

Currently, up to 12 withdrawals per policy year are allowed. There is currently no charge for withdrawals.

How does a withdrawal impact policy values?

For Death Benefit Option A policies, a withdrawal reduces the face amount dollar for dollar.

For Death Benefit Option B policies, the death benefit is reduced by the amount of the withdrawal, but the face amount does not decrease.

How much of the policy's cash value is available for loans?

The maximum amount available for a loan is 100% of the current cash value as of the loan request date, minus an amount to keep the policy in force to the next policy anniversary.

For additional details and restrictions please refer to the policy.

What is the Net Cost of taking out a loan?

Policy Year	Loan Type	Current Loan Interest Rate	Loan Crediting Rate ¹³	Net Loan Cost
1-20	Regular	3.0%	2.0%	1.0%
1-20	Carryover ¹⁴	2.5%	2.0%	0.5%
21+	Both	2.0%	2.0%	0.0%

Note that in policy years 21 and later, the Net Cost of a loan is 0.0%

How does a loan impact policy values?

Any outstanding loan and accrued loan interest balances will reduce the policy's death benefit and cash surrender value.

Loan interest accrues daily at the current loan interest rate and is due each anniversary. The cash value covering any outstanding loan is credited interest at the current loan crediting rate. In order for a policy to remain in force, the total amount of the loan, including accrued interest, must not exceed the policy's cash value.

How can the entire cash surrender value be accessed?

A policy may be surrendered at any time for its cash surrender value.

¹³ These rates are current as of January 1, 2018, and will vary over time.

¹⁴ Carryover loans receive the same rates as regular loans in New York.

How quickly is net cash surrender value paid out in the event of a full surrender?

The current procedure is to pay out the cash surrender value within a few business days after receiving and processing the appropriate paperwork. However, while we reserve the right to defer payment for up to six months; we have no plans to change our current process.

Policy Lapse

What happens if the cash surrender value is insufficient to cover the Monthly Deduction?

On the day the monthly policy charges are deducted, if the cash surrender value is insufficient to cover all of the charges, the policy enters a 62-day grace period. If the amount due remains unpaid at the end of that grace period, the policy will lapse without value.

Notification of grace period and lapse will be mailed to the Policy Owner, any assignee(s), secondary addressees, if any, and the servicing producer.

What happens if the outstanding loan, including interest, exceeds the policy's cash value?

We will send a notification to the Policy Owner, any assignee(s), secondary addressees, if any, and the servicing producer if a premium or loan payment needs to be made to keep the policy in force. There is a 62-day grace period in the policy. If the amount due remains unpaid at the end of that grace period, the policy will lapse without value.

Policy Changes

When can a Policy Owner change the face amount?

A Policy Owner may increase or decrease the face amount at any time after the first policy year. However, face amount increases will be subject to underwriting.

Are face amount increases subject to any conditions?

Any increase in face amount is subject to the following conditions:

- Proof of insurability for the increased coverage
- Minimum increase amount is \$5,000
- The total policy face amount cannot exceed \$5,000,000
- Maximum attained age of the insured is 85 on the date of the increase

Are face amount decreases subject to any conditions?

Any decrease in face amount is subject to the following conditions:

- Minimum allowed face amount decrease is \$5,000
- The face amount generally cannot be reduced below the minimum of \$50,000

When can a Policy Owner change the Death Benefit Option?

Death Benefit Option changes are allowed after the first policy anniversary and are available until maturity.

Does the face amount change after a Death Benefit Option change?

The face amount of the policy will change. The death benefit payable after the change must remain the same as before the change.

How does a Death Benefit Option change impact policy values?

If the Death Benefit Option is changed from Death Benefit Option A to Death Benefit Option B, then the policy face amount is decreased by the cash value amount. A Death Benefit Option change that would reduce the face amount below the product minimum of \$50,000 will not be allowed.

If the policy is changed from Death Benefit Option B to Death Benefit Option A, then the face amount will be increased by the current cash value amount to equal the previous death benefit on the effective date of the change. A Death Benefit Option change that would increase the face amount above the product maximum of \$5,000,000 will not be allowed.

Does a Death Benefit Option change require underwriting?

The Company reserves the right to require underwriting for a Death Benefit Option change if the change causes an increase in the policy's Net Amount at Risk.

Riders

Chronic and Terminal Care Rider

What benefit does the Chronic and Terminal Care Rider provide?

The Chronic and Terminal Care Rider provides early access to the policy's death benefit on a tax-favorable basis if the insured suffers from a chronic or terminal illness. The Policy Owner may request a payment of up to 20% of the policy's death benefit once per calendar year. Lifetime payments are capped at the lesser of 75% of the death benefit or \$2 million. Payments are not limited to an amount of reimbursable payments for chronic and terminal care. They can be used for anything, and no receipts are required.

Is this rider available on all policies?

The rider is available for issue ages 21-65. The minimum total base face amount for the rider is \$100,000. The rider is only available at issue. The Chronic and Terminal Care Rider is not available in California, Florida, or New York.

What is the cost of this rider?

There is no monthly charge for this rider. A \$250 administrative fee is charged each time the rider is exercised. Payments made under this rider are not reduced through discounting.

Can requests for accelerated death benefit payments be submitted for both chronic and terminal illnesses?

Yes. The rider can be exercised once per calendar year under the chronic illness provision or the terminal illness provision.

How do payments under this rider impact policy values?

Rider payments reduce the policy's death benefit on a dollar-for-dollar basis. The policy's cash value is reduced in the same proportion as the reduction in death benefit. Future monthly deductions are based on the new policy values.

How are payments received on a tax-favorable basis?

Payments from this rider are intended to qualify for favorable income tax treatment under Section 101(g) of the federal Internal Revenue Code. Before submitting any rider claims, Policy Owners should consult a tax advisor to determine the tax consequences of any payments received. Payments resulting from chronic illness claims that exceed the annualized IRS per-diem limitation may be subject to income taxation.

Acceleration of Death Benefit Rider

What benefit does the Acceleration of Death Benefit Rider provide?

The Acceleration of Death Benefit Rider provides early access to the policy's death benefit on a tax-favorable basis when the insured suffers from a terminal illness. The Policy Owner may request a one-time payment of all or a portion of the policy's death benefit.

The maximum amount that can be requested is the greater of \$250,000 or 10% of the Eligible Proceeds under this and all other similar riders issued by Brighthouse Financial and our affiliates. If the eligible proceeds are between \$250,000 and \$275,000, the Policy Owner may elect to accelerate the full amount.

Is this rider available on all policies?

This rider is available at issue for all issue ages and risk classes, in states that have not approved the Chronic and Terminal Care Rider. It can also be added after issue in any state if the Chronic and Terminal Care Rider is not on the policy.

What is the cost of this rider?

There is no monthly charge for this rider. A one-time administrative fee, not to exceed \$150, is charged when the rider is exercised. Payments made under this rider will be discounted.

How do payments under this rider impact policy values?

Under a partial acceleration, these payments reduce the policy's death benefit on a dollar-for-dollar basis. The policy's cash value is reduced in the same proportion as the reduction in death benefit. Future monthly deductions are based on the new policy values.

Under a full acceleration, the policy will terminate.

How are payments received on a tax-favorable basis?

Payments made under this rider are intended to qualify for favorable tax treatment under Section 101(g) of the federal Internal Revenue Code. Before submitting any rider claims, Policy Owners should consult a tax advisor to determine the tax consequences of any payments received.

Waiver of Specified Premium Rider

What benefit does the Waiver of Specified Premium Rider provide?

The Waiver of Specified Premium (WSP) Rider credits a specified premium amount monthly to the policy if the insured becomes totally disabled, as defined by the rider, before the policy anniversary at the insured's attained age of 65.

Is the rider available on all policies?

This rider can be added to policies up to issue age 60, at issue or after issue, subject to underwriting approval.

The maximum total base face amount for the rider is \$5,000,000, inclusive of coverage with any of the Brighthouse Financial companies.

How much is the monthly benefit amount?

The monthly benefit amount is selected when the rider is issued.

The minimum monthly WSP benefit is \$10. The maximum monthly WSP benefit is equal to $\frac{1}{12}$ of the base policy guideline annual premium, calculated without any riders.

What is the cost of this rider?

There is a monthly charge for this rider that is based on the insured's attained age.

Does the monthly benefit amount guarantee the policy will remain in force?

No. The monthly WSP benefit amount is not guaranteed to keep the policy in force and all monthly policy charges will continue to be deducted during the insured's disability, including charges for the WSP Rider.

Let's Get to Work on Providing the Best of Both Worlds

Visit brighthousefinancialpro.com
to see how PAUL can become
an essential part of your clients'
overall financial strategy.

Please note: Brighthouse Life Insurance Company and Brighthouse Life Insurance Company of NY have designed this document to provide introductory information on the subject matter. State variations apply. Certain riders may not be available in all states. Descriptions herein are incomplete – for a full explanation of the terms and exclusions, please refer to the policy and the riders.

Life insurance is medically underwritten. If a client is seeking a replacement or 1035 exchange, they should not cancel their current coverage until their new coverage is in force. Surrender charges may be due on an exchange of one contract for another. A change in policy may require a medical examination. Surrenders may be taxable. Clients should consult their own tax advisors regarding tax liability on surrenders.

This material should not be interpreted as a recommendation or as fiduciary investment advice by Brighthouse Life Insurance Company, Brighthouse Life Insurance Company of NY, or Brighthouse Securities, LLC.

Any discussion of taxes is for general informational purposes only, does not purport to be complete or cover every situation, and should not be construed as legal, tax, or accounting advice. Clients should confer with their qualified legal, tax, and accounting advisors as appropriate.

All guarantees, including any optional benefits, are subject to the claims-paying ability and financial strength of the issuing insurance company. Each issuing insurance company is solely responsible for its own financial condition and contractual obligations.

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1808 BDUL523541
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