

PROVISIONS
INSURANCE PRODUCT

UNIT LINKED – REGULAR PREMIUM
(VERSION 7)

(This insurance product was approved under Decision No. 1983/BTC-QLBH of MOF dated 13/02/2026.

This Provisions are issued under Decision No. 00555/2026/MVL-Product dated 24/02/2026 of CEO of Manulife Company Limited (Vietnam))

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For Reference Only

PART 1: GENERAL TERMS

In the Insurance Policy, the general provisions in Part 1 shall apply to the entire Insurance Policy, unless otherwise specified in the Provisions of each insurance product that the Policy Owner participated in.

ARTICLE 1. INSURANCE POLICY

The Insurance Policy (hereinafter referred to as the "**Policy**") is a written agreement between the Policy Owner and Manulife, including the following documents:

- a) Insurance Certificate;
- b) Application Form;
- c) Sales Illustration;
- d) Summary of the Provisions of the insurance product(s) that the Policy Owner chooses to participate in within this Policy;
- e) Provisions of the insurance product(s) that the Policy Owner chooses to participate in within this Policy;
- f) Policy Change (if any);
- g) Document(s) related to changing and supplementing policy (if any).

A Policy will include a Main Insurance Product and may or may not include Supplemental Products.

ARTICLE 2. PARTICIPATION IN THE INSURANCE POLICY

To enroll in insurance, the Policy Owner and the Policy Insured must complete and submit the Application Form, then pay the initial premium. This allows Manulife to underwrite and approve the issuance of the insurance policy.

2.1. Insurable benefits

At the time of participation in the Policy or when the request to add a Supplemental Product is approved by Manulife, the Policy Owner and the Policy Insured must have an insurable interest in accordance with applicable laws.

2.2. Designation of Beneficiaries

- a) The Policy Owner may designate one or multiple Beneficiaries. This designation requires the written consent of the Policy Insured of the Main Product or the legal representative (if the Policy Insured of the Main Product is a minor or other cases as prescribed by law).
- b) If the Policy includes multiple Beneficiaries, the Policy Owner must specify the allocation ratio for each Beneficiary. If the allocation ratio is not specified or is unclear, the benefits will be distributed equally among all Beneficiaries.

2.3. Obligation of honest disclosure

The Policy Owner and the Policy Insured are obligated to fully, honestly, and accurately disclose information in the Insurance Application and any forms related to the Policy.

Manulife reserves the right to cancel the Policy or the related insurance product (as applicable) if the Policy Owner, the Policy Insured intentionally provides incomplete or false information to obtain claim or insurance payment.

2.4. Contestability

Manulife will not contest inaccurate or omitted information after 24 months from the Policy Effective Date or from the most recent Reinstatement Date, whichever is later.

The following cases will not be exempt from contestability:

- a) Mistakes or omissions due to unintentional errors when declaring the age or gender of the Policy Insured as stipulated in Article 3.9;
- b) The Policy Owner or the Policy Insured intentionally provides incomplete or false information, which, if known, would have led Manulife to postpone or decline issuing the Policy or the related insurance product.

ARTICLE 3. IMPLEMENTATION OF THE INSURANCE POLICY

3.1. Freelook Period

The Freelook Period of the Policy is 21 days from the date the Policy Owner confirms receipt of the hard copy of the Policy documents as required by law. The Policy remains inforce during this period.

During the Freelook Period, the Policy Owner may request in writing to Manulife for the Policy cancellation. In this case, the Policy will be canceled, Manulife will not be liable for any risks that occurred from Policy Effective Date, and the Policy Owner is obligated to return any insurance benefits received (if any) to Manulife.

3.2. Payment of premium

The Policy Owner must pay in full the due premiums to keep each insurance product in the Policy inforce according to the Provisions of those insurance products.

3.3. Change of Face Amount

While the insurance product is inforce, the Policy Owner may request in writing to Manulife to increase or decrease the Face Amount of each insurance product.

3.4. Change of Supplemental Products

a) Add Supplemental Product

While the Policy is inforce, after the Freelook Period, the Policy Owner may request in writing to Manulife to add a Supplemental Product, provided that all of the following conditions are met:

- (i) Manulife offers the Supplemental Product at the time of the request;
- (ii) The Policy Insured is eligible to participate in the Supplemental Product (such as age, gender, health status, occupation);
- (iii) The premium for the newly requested Supplemental Product is fully paid;
- (iv) All due premiums have been fully paid, specifically:
 - During the Compulsory Period (the first 3 Policy Years): all due Basic Premiums must be fully paid; and
 - From the 4th Policy Year onward:
 - **Regarding the Option prioritizing premium payment for the Main Product:** the Policy Owner must have paid all Basic Premiums up to the time of the request to add Supplemental Product. Otherwise, the Policy Owner must switch to the Option prioritizing premium payment for the Supplemental Product.
 - **Regarding the Option prioritizing premium payment for the Supplemental Product:** the Policy Owner may request to add a Supplemental Product without having to pay Basic Premium, provide that the Policy Account Value is sufficient to cover the Monthly Deductions. Otherwise, the Policy Owner must pay the premium to keep the Policy in force.

Once the request is approved by Manulife, the effective date of the Supplemental Product will be recorded in Policy Change.

b) Termination of Supplemental Product

While the Supplemental Product is in force, the Policy Owner may terminate the enrolled Supplemental Product by request in writing to Manulife.

The termination date of the Supplemental Product will be the last day of the premium payment mode that has been paid for that product and will be recorded in Policy Change.

3.5. Change of Beneficiary, allocation of benefit

- a)** The Policy Owner may change the Beneficiary or the allocation of benefit at any time during the term of the Policy by requesting in writing to Manulife.

Such a change requires written consent from the Policy Insured of the Main Product or from the legal representative (if the Policy Insured of the Main Product is a minor or other cases as prescribed by law).

The above changes will only take effect after written approval from Manulife and will be recorded in the Policy Change.

- b)** Manulife will verify the validity of the request to change the Beneficiary or the allocation of benefit but will not be responsible for the legality of any disputes arising from such changes.

3.6. Transfer of the Policy

While the Policy is in force, the Policy Owner may transfer the Policy by requesting writing to Manulife when all of the following conditions are met:

- a) There is written consent from the Policy Insured or the legal representative (if the Policy Insured is a minor);
- b) The Policy Insured of the Main Product in the Policy remains unchanged;
- c) The transferee must have an insurable interest with the Policy Insured.

In the event that the transferee does not have an insurable interest with any Insured Person other than the Policy Insured of the Main Product, the related Supplemental Product for that Insured Person will automatically terminate.

The transfer of the Policy only becomes effective after Manulife provides written approval and records it in the Policy Change.

At that point, the transferee becomes the new Policy Owner and inherits all rights and obligations of the original Policy Owner under the Policy.

Manulife will verify the validity of the transfer request but will not be responsible for the legality of any disputes arising from the transfer.

3.7. Policy implementation succession

3.7.1. Policy Owner is an individual

If the Policy Owner who is not the Policy Insured of the Main Product dies, upon receiving notification of the Policy Owner's death, Manulife will determine the new Policy Owner in accordance with the inheritance laws in effect at the time of the Policy Owner's death.

3.7.2. Policy Owner is an organization

- a) If the Policy Owner undergoes a merger, consolidation, division, or separation ("restructuring"), the new organization after restructuring will become the new Policy Owner if it meets all conditions of this Policy.
- b) If the Policy Owner is bankrupt, dissolved, ceases operations, or after restructuring the new entity does not meet the Policy conditions, the determination of the new Policy Owner will follow applicable laws at the time. If no new Policy Owner can be determined, the Policy will terminate at the time of bankruptcy, dissolution, cessation of operations, or restructuring.

3.7.3. The new Policy Owner will inherit all rights and obligations under this Policy. Manulife is responsible for fulfilling its obligations to the new Policy Owner as stipulated in this Policy.

3.8. Change of personal information

The Policy Owner and the Policy Insured must notify Manulife immediately of any changes as follows:

- a) Personal information (such as identity card, citizen ID, passport, phone number, email, address in Vietnam): The Policy Owner and the Policy Insured must provide the necessary documents to Manulife as soon as possible to avoid affecting the implementation of the Policy.
- b) If the Policy Insured leaves the territory of Vietnam for a continuous period of 03 months or more, or if there is a change in occupation or the nature of their work, the Policy Owner must notify Manulife as soon as possible. After such a change, if an insurance event occurs, Manulife will conduct a reassessment and:
 - (i) If the changes do not increase the insurance risk, the Policy may continue under the same conditions;
 - (ii) If the changes increase the insurance risk and fall within Manulife's acceptable range, the following adjustments may be applied to the Policy:
 - Adjust premium, Face Amount; or
 - Continue the Policy with additional exclusions on certain insurance benefits; or
 - Termination relevant Supplemental Product and refund the premium paid for the remaining period of that Supplemental Product.
 - (iii) If the changes increase the insurance risk and fall out of Manulife's acceptable range, the Policy will be terminated, and Manulife will:
 - Refund the Surrender Value of the Main Product after deducting any outstanding Debt (if any); and
 - Refund the premium paid for the remaining period of the Supplemental Product (if any).

These changes will take effect from the time the Policy Insured leaves the territory of Vietnam or changes their occupation or the nature of their work.

3.9. Misstatement of Age, gender

- 3.9.1.** If the Policy Owner unintentionally declares incorrect or omits information regarding the Age or gender of the Policy Insured, the premium and Face Amount for the remaining term of the Policy will be adjusted to correspond with the correct Age and gender.
- 3.9.2.** If the correct Age of the Policy Insured falls out of the age group accepted by Manulife for insurance, Manulife will handle the Policy according to the Provisions of each insurance product in the Policy.

ARTICLE 4. RESPONSIBILITY FOR PROVIDING AND SECURING INFORMATION AND PROCESSING PERSONAL DATA OF MANULIFE

4.1. Responsibility for providing information of Manulife

When participating in the Policy, Manulife is responsible for providing complete and accurate information related to the Policy and for explaining the terms and conditions to the Policy Owner.

4.2. Data privacy and personal data processing

Please refer to the *Personal Data Protection Policy* published on Manulife's official website from time to time for more information about Manulife's responsibilities, rights, and obligations regarding personal data protection.

ARTICLE 5. CLAIM SETTLEMENT OF INSURANCE BENEFITS

5.1. Time limit for submitting a claim

The claimant must notify Manulife of the insurance event as soon as possible after becoming aware of it and must provide the required documents for claim settlement.

The time limit for submitting a claim is 01 year from the Insurance Event Date (excluding delays caused by objective obstacles or force majeure events). After this period, Manulife has the right to deny the claim.

5.2. Time limit for claim settlement

Manulife will settle the insurance benefit within 30 days from the date of receiving all valid documents.

If the claim is approved but not paid within the above-mentioned 30-day period, Manulife will pay additional interest on the benefit amount for the overdue period. The applicable interest rate will be the *Loan interest rate under the Policy* as published on the official website www.manulife.com.vn at the relevant time.

ARTICLE 6. POLICY TERMINATION

6.1. Policy surrender

6.1.1 While the Policy is in force, the Policy Owner may surrender the Policy by requesting in writing to Manulife.

6.1.2 Upon approval of the surrender request by the Policy Owner, Manulife will handle the Policy in accordance with the Provisions of each insurance product under the Policy.

6.2. Policy termination

Except for other Policy termination cases as prescribed by law, the Policy will terminate in any of the following circumstances:

- a) The Policy Owner requests to surrender the Policy;
- b) The Policy Owner or the Policy Insured violates legal regulations leading to termination of the Policy;
- c) The Policy is terminated as stipulated in Article 3.7.2.b;
- d) Manulife terminates the Policy as stipulated in Article 3.8;
- e) The Policy Insured of the Main Product was certified as suffering Total and Permanent Disability and Manulife approves the benefit payment as stipulated in Article 9.1, Article 9.2.1, Article 9.2.2.b;
- f) Manulife terminates the Policy because the Policy Owner does not agree with the adjustment of the premium or the Face Amount for the remaining time of the Policy Term (in the case of misstatement of age or gender) stipulated in Article 31.1;
- g) The Policy Insured of the Main Product dies;
- h) The Policy remains lapsed for more than 02 consecutive years;
- i) The Policy reaches maturity.

Upon termination of the Policy, any Supplemental Products under the Policy (if any) will also terminate.

ARTICLE 7. POLICY IS INVALID (VOIDED)

- 7.1. The Policy will be voided and have no effect from the Policy Effective Date in any of the following cases:
- a) The Application Form does not include written consent or is not signed and verified by the Policy Insured or the legal representative (if the Policy Insured is a minor or other cases as prescribed by law) and Policy Owner has notified Manulife of this matter during the Freelook Period;
 - b) The Main Product of the Policy is voided;
 - c) The Policy Owner, the Policy Insured violates the obligation of honest disclosure, leading to Manulife canceling the Policy as stipulated in Article 2.3;
 - d) Policy Owner cancels the Policy during the Freelook Period as stipulated in Article 3.1;
 - e) The Policy Owner voids the Policy due to Manulife's failure to fulfill its obligation to provide information as stipulated in Article 4.1;
 - f) Manulife voids the Policy because the age of the Policy Insured falls outside the insurable age range for the Main Product (in case of misstatement of age) as stipulated in Article 31.2.
- 7.2. When the Policy is voided, Manulife will handle the Policy in accordance with the Provisions of each insurance product under the Policy.

ARTICLE 8. CONFLICT AND DISPUTE SETTLEMENT

- 8.1.** The Policy shall be governed by and interpreted in accordance with the laws of the Socialist Republic of Vietnam.
- 8.2.** Any disputes arising from or related to the Policy that cannot be resolved through mutual agreement shall be submitted to a competent court where the Policy Owner has legal residence or where Manulife places its head office.

For Reference Only

PART 2: PROVISIONS OF THE MAIN PRODUCT

Within the scope of this Main Product's Provisions, references to the Policy Insured, Face Amount, and Insurance Event Date specifically refer to the Policy Insured, Face Amount, and Insurance Event Date of this Main Product.

CHAPTER I: INSURANCE BENEFITS

ARTICLE 9. TOTAL PERMANENT DISABILITY BENEFIT ("TPD")

9.1. TPD due to loss of body part/ function

9.1.1. While the Policy is in force, if the Policy Insured was certified as suffering TPD due to loss of body part/ function before attaining the Age of 75, Manulife will pay the insurance benefit as mentioned in Article 11.

9.1.2. TPD due to loss of body part/ function means the Policy Insured has complete lost, complete paralysis and has no possibility of recovery of functions, due to an injury/ illness, of:

- (a) Two arms; or
- (b) Two legs; or
- (c) Two eyes; or
- (d) One arm and one leg; or
- (e) One arm and one eye; or
- (f) One leg and one eye.

In this case, complete lost or complete paralysis and has no possibility of recovery of functions of (i) the arm is from the wrist upward; (ii) the leg is from the ankle upward; (iii) the eye is understood as complete lost or total blindness.

Certification of the Policy Insured's complete loss of body parts (arms, legs or eyes) can be performed immediately after the insurance event occurs or after treatment is completed.

The determination of the Policy Insured to be completely paralyzed and has no possibility of recovery of functions of body parts or to be total blindness needs to meet all of the following conditions:

- (i) Certified by the medical center or provincial, municipal Medical Review Council;
- (ii) The certification is performed no earlier than 180 days from the insurance event date occurs or from the date the disease is diagnosed.

9.1.3. In case Manulife approves the payment of this insurance benefit, the Policy shall be terminated on the date the Insured Person was certified as suffering TPD.

9.2. TPD due to bodily injury

9.2.1 While the Policy is in force, if the Insured Person was certified as suffering TPD due to body injury as mentioned in Article 9.2.3 (not include the bodily injury rate due to thyroid cancer) before attaining the Age of 75, Manulife will pay the insurance benefit as mentioned in Article 11.

In case Manulife approves the payment of this insurance benefit, the Policy shall be terminated on the date the Policy Insured was certified as suffering TPD.

9.2.2 While the Policy is in force, if the Policy Insured was certified as suffering TPD due to thyroid cancer as mentioned in Article 9.2.3, after Waiting Period and before attaining the Age of 75:

a) Manulife will pay 10% of the Face Amount (not exceed 100 million VND) if the Policy Insured is diagnosed with TPD due to thyroid cancer that is not stage IV (according to the TNM cancer staging system) and has no distant metastasis (*distant metastasis corresponds to classification M1 according to the TNM cancer staging system*).

The Face Amount is determined on the date the Policy Insured is diagnosed with TPD. The total amount Manulife pays for the TPD benefit mentioned in Article 9.2.2.a, calculated across all insurance products effective from July 1, 2025 onward at Manulife for the same Policy Insured, will not exceed the largest Cap under such insurance products. The Policy will continue to remain in force after this insurance benefit is approved for payment.

b) Manulife will pay the insurance benefit as specified in Article 11 if the Policy Insured was certified as suffering TPD due to thyroid cancer that is stage IV (*according to the TNM cancer staging system*) or has distant metastasis (*distant metastasis corresponds to classification M1 according to the TNM cancer staging system*).

In the event that Manulife approves the payment of this benefit, the Policy will terminate on the date the Policy Insured was certified as suffering TPD.

9.2.3 TPD due to bodily injury needs to meet all of the following conditions:

- a) The bodily injury rate needs to meet the TPD definition as per regulatory requirement;
- b) Certified by the provincial, municipal Medical Review Council;
- c) The certification is performed no earlier than 180 days from the insurance event date occurs or from the date the disease is diagnosed.

ARTICLE 10. DEATH BENEFIT

10.1. Death benefit

While the Policy is in force, if the Policy Insured dies, Manulife will pay the insurance benefit as mentioned in Article 11.

The Policy shall be terminated on the date the Policy Insured's death occurs.

10.2. Funeral benefit

When the death event occurs while the Policy is inforce, after receiving the death claim request, Manulife will pay in advance 10% Face Amount of Main Product but not exceed 30 million VND, even if the Policy Insured has more than 01 inforce insurance product at Manulife.

ARTICLE 11. DETERMINATION OF INSURANCE BENEFITS

In case Manulife approves the payment for insurance benefits as mentioned in Article 9 and Article 10, the actual amount payable will be determined as following steps:

11.1. Insurance benefit is determined based on the Insurance Plan chosen by the Policy Owner:

Basic Insurance Plan	Advanced Insurance Plan
The total amount of: (i) The greater amount of Face Amount and Basic Account Value; and (ii) Top-up Account Value.	The total amount of: (i) Face Amount; and (ii) Basic Account Value; and (iii) Top-up Account Value.

In which:

- a) Face Amount is determined as of Insurance Event Date.
 - b) Basic Account Value and the Top-up Account Valuer is determined based on:
 - (i) The number of Fund Units on the Insurance Event Date; and
 - (ii) The Fund Unit Price on the Next Valuation Date immediately following the Insurance Event Date.
- 11.2. The insurance benefit is determined based on the Age of the Policy Insured at the event date of TPD or death.
- In the event that the Policy Insured was certified as suffering TPD or death before attaining the Age of 04, Manulife will pay insurance benefit with the Face Amount adjusted as per Article 12.
- 11.3. Total TPD benefit payable for 01 Policy Insured, across all inforce insurance product at Manulife will not exceed the maximum limit stated in the conditional letter (Letter of conditional insurance acceptance).
- 11.4. The actual amount payable for insurance benefit mentioned in Article 9 and Article 10 will be adjusted by adding and deducting the following amounts (if any):
- a) **Add:** The premiums (without interest) paid after Insurance Event Date.

b) Deduct:

- (i) The withdrawals from Policy Account Value after Insurance Event Date, including the case where the Basic Account Value is withdrawn to pay the Basic Premium upon the Policy Owner's request during the first 3 Policy Years; and
- (ii) The advanced funeral benefit; and
- (iii) Debts; and
- (iv) Paid TPD benefit due to thyroid cancer benefit as mentioned in Article 9.2.2.a (applies to the case where the Policy Insured dies due to thyroid cancer or was certified as suffering TPD due to thyroid cancer as mentioned in Article 9.2.2.b).

ARTICLE 12. JUVENILE LIEN

In the event that the Policy Insured was certified as suffering TPD or dies before attaining the Age of 04, Manulife will pay insurance benefit with the Face Amount mentioned in Article 9 and Article 10 adjusted as follows:

Age	Under Age 01	Age 01	Age 02	Age 03
Adjusted Face Amount	Equals 20% Face Amount	Equals 40% Face Amount	Equals 60% Face Amount	Equals 80% Face Amount

This adjustment does not apply for the funeral benefit mentioned in Article 10.2.

ARTICLE 13. INVESTMENT BENEFIT FROM UNIT-LINKED FUNDS

While the Policy is in force, the Policy Owner will benefit from the actual investment returns (after deducting Fund Management Fee) of the selected Funds and bear all investment risks associated with those Funds. The actual investment returns are reflected in the Policy Account Value, where:

- a) The Policy Account Value is determined by the total value of the Funds chosen by the Policy Owner.
- b) The value of each Fund is determined by the number of Fund Units multiplied by the Fund Unit Price on each Valuation Date.
- c) The Fund Unit Price is published on the Manulife's official website on the working day right after Valuation Date.

ARTICLE 14. THE LOYALTY ACCOUNT VALUE PAYOUT BENEFIT

14.1. The Loyalty Account Value

The Loyalty Account Value is an amount equivalent to the Premium Load deducted from the Basic Premium of each Policy Year. This value is accumulated at each point in time when the Premium Load is deducted and accrues interest (at the applicable interest rate for each case as shown in the table below) until the time of the Loyalty Account Value payment.

Case	Interest rate per annum <i>(applicable from the time of Premium Load deduction until the time of Loyalty Account Value payment)</i>
The due Basic Premium for the first 5 Policy Years are fully paid within 60 days from the Premium Due Date	2.5%
The due Basic Premium for the first 6 Policy Years are fully paid within 60 days from the Premium Due Date	3.0%
The due Basic Premium for the first 7 Policy Years are fully paid within 60 days from the Premium Due Date	3.5%
The due Basic Premium for the first 8 Policy Years are fully paid within 60 days from the Premium Due Date	4.0%
The due Basic Premium for the first 9 Policy Years are fully paid within 60 days from the Premium Due Date	4.5%
The due Basic Premium for the first 10 Policy Years are fully paid within 60 days from the Premium Due Date	5.0%

14.2. Conditions for The Loyalty Account Value payout

The Policy must satisfy all the following conditions from the Policy Effective Date up to the time the Loyalty Account Value benefit is paid:

- a) Policy has not been lapsed;
- b) No withdrawal from Basic Account Value during the first 10 Policy Years (except the case of deduction from the Policy Account Value to pay Basic Premium as requested by the Policy Owner during the first 3 Policy Years);

- c) The due Basic Premium must be fully paid within 60 days from each Premium Due Date as stipulated in Article 14.1;
- d) The Face Amount throughout the first 10 Policy Years shall not be lower than the Face Amount at the Policy Effective Date (except the case where Face Amount changes due to misstatement in declaring Age, gender);
- e) The Annualized Basic Premium throughout the first 10 Policy Years shall not be lower than the Annualized Basic Premium on the Policy Effective Date (except the case where the Annualized Basic Premium changes due to misstatement in declaring Age, gender).

14.3. The Loyalty Account Value payout benefit at the 20th Policy Anniversary Date

On the 20th Policy Anniversary Date, Manulife will pay **100%** of the Loyalty Account Value.

The Loyalty Account Value deducting the total **Excess Withdrawal Amount For Each Policy Year** from Policy Year 11 to before the 20th Policy Anniversary Date will be transferred into the Top-up Account based on:

- a) the most recent Fund Allocation Ratio prior to that date; and
- b) the Fund Unit Price determined on the Next Valuation Date immediately following the 20th Policy Anniversary Date.

The **Excess Withdrawal Amount For Each Policy Year** is the withdrawal amount from the Basic Account:

- (i) exceeding 10% of the total Basic Premiums paid during the first 10 Policy Years; and
- (ii) made during the period from Policy Year 11 to the time of Loyalty Account Value benefit payout.

14.4. The partial Loyalty Account Value payout benefit upon surrender before the 20th Policy Anniversary Date

From Policy Year 11 onward, if the Policy Owner requests to surrender the Policy, Manulife will pay a portion of the Loyalty Account Value at the time of Policy surrender as shown in the table below:

Time of surrender	Payout portion (% of the Loyalty Account Value at the time of surrender)
From Policy Year 11 to Policy Year 15	50%
From Policy Year 16 to before the 20th Policy Anniversary Date	75%

Before paying this benefit, Manulife will deduct the total **Excess Withdrawal Amount**

For Each Policy Year from Policy Year 11 up to the time of surrender.

The partial Loyalty Account Value payout benefit does not apply if the Policy is surrendered at any time before Policy Year 11.

ARTICLE 15. MATURITY BENEFIT

If the Policy is in force at the Maturity Date, Manulife will pay the Policy Account Value determined on the Next Valuation Date after the Maturity Date, after deducting Debts (if any).

CHAPTER II. EXCLUSIONS

ARTICLE 16. WAITING PERIOD

16.1. The Waiting Period applicable to the TPD due to thyroid cancer benefit (mentioned in Article 9.2.2) is 90 days, starting from the following dates, whichever comes later:

- a) Policy Effective Date;
- b) The most recent Reinstatement Date;
- c) Effective date of the increase in the Face Amount (applicable to the increased portion).

16.2. Manulife does not apply the Waiting Period in the following cases:

- a) The Policy Insured suffers TPD due to Accident or due to other reasons; or
- b) The Policy Insured dies.

ARTICLE 17. TOTAL PERMANENT DISABILITY EXCLUSIONS

Manulife will not pay the Total Permanent Disability benefit mentioned in Article 9 if the Policy Insured suffers TPD due to any of the following cases:

- 17.1.** Due to intentional fault or criminal act of the Policy Insured themselves;
- 17.2.** Due to intentional fault or criminal act of the Policy Owner;
- 17.3.** Due to a Pre-Existing Illness that was not disclosed, or not fully and honestly provided to Manulife at the time of application or reinstatement of the Policy, which, if known, would have led Manulife to exclude insurance liability for events related to that Pre-Existing Illness. This exclusion clause does not apply if the Pre-Existing Illness was declared and accepted by Manulife;
- 17.4.** Due to the use of drugs, any narcotics, toxic substances, stimulants, except when prescribed by a Doctor;
- 17.5.** Due to participation in Professional Sports, Adventure Sports and Activities, or Combat Sports;
- 17.6.** Due to participation in war (whether declared or not), riots, fighting, protests, strikes, or terrorism;

- 17.7. Due to aviation Accident while being present on a flight. This exclusion is not applicable in cases where the Policy Insured is a passenger on a commercial flight;
- 17.8. Due to intentionally obstructing or resisting arrest by law enforcement officers, or as a direct or indirect result of operating a motor vehicle exceeding the speed limit from 05 km/h and above or operating a vehicle with a blood alcohol concentration exceeding the normal limits according to Ministry of Health's guideline.

In such cases, Policy Owner can:

- a) continue paying premiums to maintain the Policy. At this time, permanent bodily injuries determined to be caused by any of the exclusions from insurance liability will not be considered when Manulife reviews the claim for TPD benefits; or
- b) request to surrender the Policy.

ARTICLE 18. DEATH BENEFIT EXCLUSIONS

Manulife will not pay the Death benefit mentioned in Article 10 if the Policy Insured dies due to any of the following cases:

- 18.1. Due to suicidal act within 02 years from the date of the first premium fully paid or from the most recent Reinstatement Date, whichever is later.

In the event that the Policy Owner requests an increase in the Face Amount, the above-mentioned 02-year period will apply to the increased portion of the Face Amount starting from the effective date of the increase;

- 18.2. Due to execution of the death penalty or criminal act of the Policy Insured;
- 18.3. Due to the intentional fault or criminal act of the Policy Owner;
- 18.4. Due to the intentional fault or criminal act of the Beneficiary.

In the event that the Policy has more than 01 Beneficiary and the Beneficiar(ies) intentionally causes the death of the Policy Insured, Manulife will still consider paying the insurance benefits to the remaining Beneficiaries corresponding to their respective shares.

In case Manulife does not pay death benefit due to one of the above exclusions, the Policy will be terminated. Manulife will pay to the Policy Owner the Policy Account Value (if any) after deducting advanced funeral benefit which has been paid (if any).

In which, the Policy Account Value is determined based on:

- a) The number of Fund Units on the date the Policy Insured dies; and
- b) The Fund Unit Price on the Next Valuation Date following the death event date of the Policy Insured.

In the event that the amount(s) paid by Manulife exceeds the Policy Account Value (if any), Manulife resevers the right to request the Policy Owner to refund the different amount.

CHAPTER III: PREMIUM, FEES AND CHARGES

ARTICLE 19. PREMIUM AND PREMIUM ALLOCATION

19.1. Premium

The premium of the Main Product includes:

- a) **Basic Premium:** is the insurance premium paid by the Policy Owner for the Main Product and is allocated to the Basic Account.

Basic Premium is specified in the Insurance Certificate or Policy Change (if any).

- b) **Top-up Premium:** is the additional premium paid by the Policy Owner for the Main Product (on top of the Basic Premium) and is allocated to the Top-up Account.

Subject to Manulife's approval, the maximum Top-up Premium in each Policy Year shall not exceed 05 times the Annualized Basic Premium of the current Policy Year, unless otherwise stipulated by law.

19.2. Premium allocation method

After deducting the Premium Load, the remaining amount of the premium allocated to the corresponding account according to the Fund Allocation Ratio designated by Policy Owner and is used to purchase Fund Units. In the absence of a specific designation, this amount will be allocated according to the most recent Fund Allocation Ratio selected by the Policy Owner.

- a) **Regarding the Basic Premium:**

The Fund Unit Price is determined in each specific case as follows:

- (i) For the initial payment period: The Fund Unit Price is determined on the Next Valuation Date right after the Policy Effective Date.
- (ii) For subsequent payment periods: The Fund Unit Price is determined on the Next Valuation Date right after the date Manulife accepts the payment transaction.

- b) **Regarding the Top-up Premium:**

The Fund Unit Price is determined in each specific case as follows:

- (i) Premium payment before Free-look Period: The Fund Unit Price is determined on the Next Valuation Date right after the end of Free-look Period.
- (ii) For subsequent payment periods: The Fund Unit Price is determined on the Next Valuation Date right after the date Manulife accepts the payment transaction.

Details in **Appendix 2: Premium allocation method.**

ARTICLE 20. INSURANCE TERM, PREMIUM TERM, PREMIUM PAYMENT MODE, GRACE PERIOD

20.1. Insurance term

Insurance term of Main Product is the period from the Policy Effective Date to the Policy Anniversary Date when the Policy Insured reaches the Age of 99.

20.2. Premium Term

Detailed information about the Premium Term of the Main Product is as follows:

a) **Compulsory Premium Term** (first 03 Policy Years) is the period during which the Policy Owner is responsible for paying the full periodic Basic Premium on time.

(i) During the Compulsory Premium Term, Manulife will pay the Monthly Deduction to keep the Main Product inforce (“Non-lapse guarantee benefit”) when the Policy Account Value is insufficient to cover the Monthly Deduction, provided that the Policy meets all the following conditions:

- All due Basic Premium have been fully paid; and
- There is no partial withdrawal from the Basic Account Value (including automatically withdrawal from Basic Account Value for paying Basic Premium at the request of the Policy Owner during the first 3 Policy Years).

Thereafter, the Monthly Deduction paid by Manulife will be recorded as a Debt of the Policy.

To keep the Supplemental Product(s) inforce, the Policy Owner must pay the due Supplemental Product Premium.

(ii) After the compulsory Premium Term, Policy Owner must pay Basic Premium and settle any outstanding Debt (if any) to keep the Policy inforce.

b) From Policy Year 04 onwards, Policy Owner may:

- (i) Pay premiums according to the **planned Premium Term**; or
- (ii) Pay premiums flexibly at any time during the Policy Year.

However, the Policy Owner should ensure that the Policy Account Value is sufficient to cover Monthly Deduction to keep the Policy inforce.

c) **The maximum Premium Term** is equal to the Policy Term.

The compulsory Premium Term, planned Premium Term and maximum Premium Term are recorded in the Insurance Certificate.

20.3. Premium payment mode

Policy Owner may choose a premium payment mode that suits their needs at the time of participate in the Policy, which will be recorded in the Insurance Certificate.

While the Policy is in force, the Policy Owner may request to change the premium payment mode in accordance with Manulife's regulations. Once the request is approved by Manulife, the new premium payment mode will be recorded in Policy Change.

20.4. Grace period

If the Policy Owner does not pay the Basic Premium by the Premium Due Date, a grace period of 60 days will be granted for the payment.

- a) During compulsory Premium Term (first 03 Policy Years): 60 days of grace period is calculated from:
 - (i) Premium Due Date if the due Basic Premium is not fully paid; or
 - (ii) Policy Monthiversary Date on which the Policy Account Value is insufficient to cover the Monthly Deduction, in the event that the Policy does not meet the conditions for the Non-lapse guarantee benefit as mentioned in Article 20.2.a.
- b) From Policy Year 04 onwards: 60 days of grace period is calculated from the Policy Monthiversary Date which the Policy Account Value is insufficient to cover Monthly Deduction.

During the grace period, Policy is still in force.

ARTICLE 21. POLICY LAPSATION AND REINSTATEMENT

21.1. Policy lapsation

After 60 days of grace period of the Main Product, Policy is lapsed if:

- a) During compulsory Premium Term (first 03 Policy Years):
 - (i) Basic Premium is not fully paid; or
 - (ii) Policy Account Value is insufficient to cover the Monthly Deduction, in the event that the Policy does not meet the conditions for the Non-lapse guarantee benefit as stipulated in Article 20.2.a.
- b) From Policy Year 04 onwards: Policy Account Value is insufficient to cover Monthly Deduction.

During the period when the Policy is lapsed, no Monthly Deduction or other charges will be incurred, and no insurance benefits will be paid.

21.2. Policy reinstatement

21.2.1. Reinstatement period:

Within 02 years from the date that the Policy lapsed as specified in Article 21.1, Policy Owner may request in writing for the reinstatement of either:

- a) The Main Product; or
- b) The entire Policy.

If the request is approved by Manulife, the Policy Reinstatement Date will be recorded in Policy Change.

Upon Policy reinstatement, new premiums will be allocated to the Funds according to the most recent Fund Allocation Ratio designated by the Policy Owner.

21.2.2. Reinstatement conditions:

- a) The Policy Owner and the Policy Insured still have the insurable interests; and
- b) The Policy Insured is fully eligible for insurance coverage as stipulated by Manulife; and
- c) Policy Owner fully pays all required premiums for reinstatement, specifically:
 - (i) Regarding the Main Product reinstatement**
 - Any due and unpaid Basic Premium arising during the compulsory Premium Term (first 03 Policy Years); and
 - The outstanding Monthly Deduction (if any) before the Policy lapses; and
 - One mode of Basic Premium if the reinstatement request arising from Policy Year 04 onwards.
 - (ii) Regarding the entire Policy reinstatement (including Main Product and Supplemental Product)**
 - **For the Option of prioritizing Basic Premium**
 - Any due and unpaid Basic Premium up to the time of reinstatement request; and
 - The outstanding Monthly Deduction (if any) and any unpaid Supplemental Premium of grace period (if any) prior to the Policy lapsed; and
 - Supplemental Premium for the period from the Policy Reinstatement Date to the Premium Due Date.
 - **For the Option of prioritizing Supplemental Product**
 - Any due and unpaid Basic Premium within the compulsory Premium Term (first 03 Policy Years); and
 - The outstanding Monthly Deduction (if any) and any unpaid Supplemental Premium of grace period (if any) prior to the Policy lapsed; and
 - One mode of Basic Premium if the reinstatement request arising from Policy Year 04 onwards; and
 - Supplemental Premium for the period from the Policy Reinstatement Date to the Premium Due Date.

ARTICLE 22. FEES AND CHARGES

22.1. Premium Load

The Premium Load is the amount that Manulife deducts as a percentage (%) from the Basic Premium and Top-up Premium before allocating it to the Policy Account Value, as specified in the following table:

Premium Year	% Basic Premium	% Top-up Premium
Premium Year 01	30%	1.5%
Premium Year 02	20%	
Premium Year 03 to 05	10%	
From Premium Year 06 onwards	0%	0%

22.2. Policy Fee

Policy Fee shall be deducted on each Policy Monthiversary Date. Policy Fee shall be firstly deducted from the Basic Account Value, then deducted from the Top-up Account Value.

In 2026, Policy Fee is 47,000 VND/ Policy/ month and shall be automatically increased by 2,000 VND every following year. However, Policy Fee shall not exceed 70,000 VND/ Policy/ month.

In the event that Manulife applies a Policy Fee higher than the above-mentioned maximum fee (after obtaining approval the Ministry of Finance), Manulife will provide written notice to the Policy Owner 03 months prior to implementation.

22.3. Cost Of Insurance

Cost Of Insurance shall be deducted on each Policy Monthiversary Date, initially from the Basic Account Value and then from the Top-up Account Value.

The Cost Of Insurance varies by Age, gender, health condition and occupation of the Policy Insured and the Face Amount at the time of deduction. The Face Amount at the time of deduction is the Face Amount after changing (increasing or decreasing) (if any).

22.4. Surrender Charge

The Surrender Charge applies only to the Basic Account and is proportioned by the Annualized Basic Premium on the Policy Effective Date, as specified in the following table:

The time of Policy surrender	Surrender Charge
	% Annualized Basic Premium on the Policy Effective Date
Policy Year 01	75%
Policy Year 02	75%
Policy Year 03	50%
Policy Year 04	20%
Policy Year 05	10%
From Policy Year 06 onwards	0%

22.5. Fund Management Fee

The Fund Management Fee is deducted before determining the Fund's investment performance, which is when Manulife publishes the Fund Unit Price on each Valuation Date. It is proportioned by the Fund's total net assets and varies by each Fund.

The maximum Fund Management Fee is based on the investment policy of each Fund, specifically as follows:

- a) Fund with at least 70% investment allocation in stocks: up to 2.5% per year;
- b) Fund with at least 70% investment allocation in bonds: up to 1.5% per year;
- c) Fund with at least 70% investment allocation in deposits and other fixed income assets: up to 1% per year;
- d) Fund with other investment allocations: the maximum rate is calculated as weighted average of the investment assets in the Fund, based on the maximum rates of the abovementioned Funds.

In the event that Manulife applies a Fund Management Fee higher than the abovementioned maximum fee (after obtaining approval from the Ministry of Finance), Manulife will notify the Policy Owner in writing 03 months prior to implementation.

22.6. Fund Switching Fee

Manulife does not charge a Fund Switching Fee for requests to switch between Funds throughout the Policy Term.

CHAPTER IV: INFORMATION ABOUT UNIT-LINKED FUNDS

ARTICLE 23. INFORMATION ABOUT UNIT-LINKED FUNDS (“FUND”)

23.1. Establishment and composition of Funds

- a) Manulife establishes and maintains Funds according to the investment objectives and policies outlined in the Unit-Linked Fund Portfolio specified in Appendix 3 or in any announcements regarding the establishment, modification, or termination of Funds issued by Manulife from time to time.
- b) Manulife has the full authority to delegate part or all of its investment decision-making rights to any third party in accordance with legal regulations.
- c) Manulife may establish new Funds after obtaining approval from the Ministry of Finance. The Terms and Conditions of the Main Product will apply to the newly established Fund unless otherwise specified by law.
- d) The Policy Owner has the right to choose a Fund that aligns with their investment objectives and risk tolerance level.

23.2. Valuation of Fund Units

- a) Manulife will determine the net asset value of the Fund on the Valuation Date to establish the Fund Unit Price.

$$\begin{array}{l} \text{Fund Unit Price} \\ \text{of each Fund} \end{array} = \frac{\text{Net asset value of each Fund}}{\text{Total number of Fund Units of the} \\ \text{corresponding Fund}}$$

In which, the net asset value of the Fund reflects:

- (i) All income, profits or losses, collected or uncollected, including profits or losses related to the investment activities of the Fund;
 - (ii) All taxes, fees as prescribed by law related to investment income or capital gains of the Fund;
 - (iii) Fund Management Fees according to Article 23.5.
 - (iv) All other reasonable expenses are incurred (if any) in accordance with legal regulations.
- b) According to Manulife's current regulations (excluding public holidays as prescribed by law), Manulife will conduct valuations on:
 - (i) Every Tuesday: applicable for transactions where the transaction request is received after 3:00 PM on the preceding Wednesday until 3:00 PM on that Monday; and
 - (ii) Every Thursday: applicable for transactions where the transaction request is received after 3:00 PM on that Monday until 3:00 PM on that Wednesday.

The regulations regarding the valuation period may change but will not be less frequent than once a week (excluding public holidays as prescribed by law) unless otherwise specified by law.

For clarification, the transaction request date mentioned above is the day on which Manulife receives a valid request form and full premium payment (if any) from 8:30 AM to 3:00 PM on the same day. If the request form and premium payment (if any) are received in full and valid after 3:00 PM, the request will be recorded and processed as if submitted on the morning of the next business day. The next transaction will be processed after the current transaction is completed.

If the Valuation Date coincides with public holidays as prescribed by law, Manulife will conduct the valuation on the first working day after the holiday (unless otherwise specified by law).

23.3. Methods to protect and enhance benefits of the Policy Owner

To protect and enhance the benefits of the Policy Owner, Manulife may implement one or a combination of the following methods:

- a) Close the Fund to transfer assets to a new Fund with the same investment objectives;
- b) Change the name of the Fund;
- c) Split or merge existing Fund Units;
- d) Suspend the valuation of Fund Units and related transactions of the Policy in cases that the stock exchange in which the Fund is invested is temporarily suspended from trading;
- e) Other methods as required by competent state authorities and in accordance with legal regulations.

When implementing the methods mentioned in points (a), (b), (c), and (e) above, Manulife will report to the Ministry of Finance and notify the Policy Owner at least 30 days before officially applying to them.

23.4. Closure or renaming of Funds

- a) Manulife has the right to close (after obtaining approval from the Ministry of Finance) or change the name of a Fund and notify the Policy Owner at least 30 days prior to implementation.

The notification is considered completed once Manulife has sent the notice to the Policy Owner, and from the date it is posted on Manulife's website.

- b) After receiving the notification from Manulife, the Policy Owner has 30 days to request Manulife to purchase or transfer Fund Units from the closed Funds to other Funds established by Manulife by request in writing to Manulife.

If Manulife does not receive a request from the Policy Owner within the stipulated time, Manulife has the full authority to cancel the Fund Units of the closed Funds and reallocate the Fund Units to the remaining Funds according to Article 26.

This allocation is binding on the Policy Owner. Manulife will not be obliged to cancel the transaction or compensate the Policy Owner for the reallocation of Fund Units according to this Article.

23.5. Fund withdrawal limits

Manulife may limit the total value of the Fund Units' selling transactions to a maximum percentage of the net asset value of each Fund on a Valuation Date, in accordance with Manulife's current regulations and in compliance with the law at any given time.

23.6. Purchasing and selling of Fund Units

a) **Purchasing of Fund Units** applies to transactions involving:

- (i) Allocation of Basic Premium;
- (ii) Allocation of Top-up Premium;
- (iii) Allocation of Loyalty Account Value benefit;
- (iv) Fund switching.

b) **Selling of Fund Units** applies to transactions involving:

- (i) Deduction of Monthly Deductions
- (ii) Partial withdrawal of Account Value
- (iii) Fund switching;
- (iv) Payment of insurance benefits;
- (v) Termination of the Policy.

CHAPTER V: POLICY CHANGE

ARTICLE 24. PARTIAL WITHDRAWAL

While the Policy is in force, after the Freelook Period, the Policy Owner may partially withdraw the Policy Account Value from the Basic Account or from Top-up Account by requesting in writing to Manulife. The withdrawal of the Policy Account Value will be prioritized from the Top-up Account.

Manulife does not apply any fee for partial withdrawals from the Policy Account Value throughout the Policy Term.

The amount for each withdrawal must comply with the following regulations:

(i) Regarding the Basic Account:

- The maximum amount is 80% of [the Basic Account Value less Surrender Charge]; and
- The minimum amount is 2,000,000 VND; and
- The remaining value of each Fund after withdrawal must not be less than 2,000,000 VND.

(ii) Regarding the Top-up Account:

- The Policy Owner may withdraw the entire Top-up Account Value; or
- If the Policy Owner only partial withdrawal of the Top-up Account Value:
 - The minimum amount is 2,000,000 VND; and
 - The remaining value of each Fund after withdrawal must not be less than 2,000,000 VND.

For the Basic Insurance Plan, following a partial withdrawal from the Basic Account Value, the Face Amount may be adjusted on a case-by-case basis as follows:

- Case 1: If the Basic Account Value prior to the withdrawal is less than the Face Amount, the Face Amount shall be reduced by an amount equal to the withdrawn amount;
- Case 2: If the Basic Account Value prior to the withdrawal exceeds the Face Amount and the Basic Account Value after the withdrawal is less than the Face Amount, the adjusted Face Amount shall be equal to the Basic Account Value after the withdrawal;
- Case 3: If the Basic Account Value after the withdrawal exceeds the Face Amount, the Face Amount shall remain unchanged.

Upon adjustment, the new Face Amount shall not be less than the minimum Face Amount required by Manulife for this Main Product.

After reduction in the Face Amount, the Cost Of Insurance will be adjusted accordingly to reflect the new Face Amount. In addition, the Face Amount of Supplemental Products (if any) may be adjusted correspondingly in accordance with the new Face Amount of the Main Product.

ARTICLE 25. FUND SWITCHING

- 25.1.** While the Policy is in force, the Policy Owner may partially or entirely transfer the amount of the Basic Account or the Top-up Account from one Fund to one or more other Funds by requesting in writing to Manulife.
- 25.2.** The Fund switching will be executed when all of the following conditions are met:
- a) The Policy Owner submits a request using Manulife's form, specifying the Fund Allocation Ratio for the Funds to be switched to;
 - b) The Policy Owner requests to switch Funds within Basic Account or within Top-up Account;
 - c) The minimum amount for each time of Fund switching is 2,000,000 VND;
 - d) The remaining value of each Fund after the Fund switching transaction must not be less than 2,000,000 VND. Otherwise, all Fund Units of that Fund must be switched to another Fund as chosen by the Policy Owner.
- 25.3.** The Fund switching will be carried out based on the Unit Price of each Fund on the Next Valuation Day right after Manulife approves the Policy Owner's request.

ARTICLE 26. CHANGE OF FUND ALLOCATION RATIO

- 26.1.** While the Policy is in force, the Policy Owner may change the Fund Allocation Ratio by requesting in writing to Manulife.
- 26.2.** The change in the Fund Allocation Ratio must meet all the following conditions:
- a) The Fund Allocation Ratio for each Fund must be at least 10% and in multiples of 5%. This requirement may be changed by Manulife from time to time;
 - b) The total Fund Allocation Ratio is 100%;
 - c) The new Fund Allocation Ratio will apply to all amounts allocated to the Account Value after the request for change is approved by Manulife.

ARTICLE 27. CHANGE OF FACE AMOUNT

- 27.1.** From Policy Year 04 onwards, the Policy Owner may change the Face Amount by requesting in writing to Manulife.
- 27.2.** The change of Face Amount can be executed maximum 01 time per Policy Year, when all the following conditions are met:
- a) Regarding requests to increase the Face Amount**
 - (i) The Policy Insured has not attained the Age of 70 at the date of request;
 - (ii) The minimum increase in the Face Amount each time is 100,000,000 VND;
 - (iii) The Policy Insured meets Manulife's underwriting conditions;
 - (iv) The Policy Owner must pay any outstanding Monthly Deductions (if any);
 - (v) The new Face Amount does not exceed the maximum limit as determined by Manulife's underwriting decision;

- (vi) The new Face Amount Multiple is not higher than the maximum Face Amount Multiple based on the Policy Insured's Age at the Policy Effective Date.

b) Regarding requests to decrease the Face Amount

- (i) The minimum decrease in the Face Amount each time is 100,000,000 VND;
- (ii) The maximum decrease in the Face Amount each time is 20% of the Face Amount at the date of request;
- (iii) The new Face Amount is not lower than the minimum limit as stipulated by Manulife;
- (iv) The new Face Amount Multiple is not lower than the minimum Face Amount Multiple based on the Policy Insured's Age at the Policy Effective Date.

Once the request is approved by Manulife, the change in Face Amount will take effect on the next Monthiversary Date.

After the new Face Amount takes effect, the Cost Of Insurance and insurance benefits will be adjusted accordingly to reflect the new Face Amount.

ARTICLE 28. CHANGE OF BASIC PREMIUM

28.1. From Policy Year 04 onwards, the Policy Owner may change the Basic Premium by requesting in writing to Manulife.

28.2. The change of Basic Premium can be executed maximum 01 time per Policy Year, when all the following conditions are met:

a) Regarding requests to increase the Basic Premium

- (i) The Policy Owner must pay any outstanding Monthly Deductions (if any);
- (ii) The new Basic Premium must comply with the maximum Basic Premium regulation stipulated by Manulife at any given time;
- (iii) If the Face Amount needs to be adjusted to align with the new Basic Premium, the Policy Owner must request in writing to change the Face Amount as stated in Article 27.

b) Regarding requests to decrease the Basic Premium

- (i) The Policy Owner must pay any outstanding Monthly Deductions (if any);
- (ii) The new Basic Premium must comply with the minimum Basic Premium regulation stipulated by Manulife at any given time;
- (iii) If the Face Amount needs to be adjusted to align with the new Basic Premium, the Policy Owner must request in writing to change the Face Amount as stated in Article 27.

Once the request is approved by Manulife, the change in Basic Premium will take effect on the Premium Due Date that is closest in time.

ARTICLE 29. CHANGE OF INSURANCE PLAN

- 29.1.** From Policy Year 04 onwards, the Policy Owner may change the Insurance Plan by requesting in writing to Manulife.
- 29.2.** The change of the Insurance Plan will be executed when all the following conditions are met:
- a) The Policy Owner must pay any outstanding Monthly Deductions (if any);
 - b) Specifically for requests to change from the Basic Insurance Plan to the Advanced Insurance Plan:
 - (i) The Policy Insured has not attained the age of 70 at the date of request; and
 - (ii) The Policy Insured meets Manulife's underwriting conditions.
- 29.3.** The Face Amount of the Policy will not change when changing the Insurance Plan.
- 29.4.** Once the request is approved by Manulife, the change in the Insurance Plan will take effect on the next Policy Monthiversary Date. After that, the Cost Of Insurance and insurance benefits will be adjusted accordingly to reflect the new Insurance Plan.

ARTICLE 30. POLICY SURRENDER

- 30.1.** While the Policy is in force, the Policy Owner may request in writing to Manulife to terminate the Main Product to surrender the Policy.
- 30.2.** Upon approval of the surrender request by the Policy Owner, Manulife will pay the Surrender Value (if any) to the Policy Owner. The date of surrender is the date on which Manulife receives the Policy Owner's valid request form. The Surrender Value is determined as follows:
- a) The Policy Account Value calculated on the Next Valuation Date after the date on which the Policy is surrendered; subtracted by
 - b) The Surrender Charge; subtracted by
 - c) Any fees or amounts that the Policy Owner must pay to Manulife (if any); plus
 - d) The partial Loyalty Account Value payout benefit upon Policy surrender as mentioned in Article 14.4 (if any).

ARTICLE 31. MISSTATEMENT OF AGE OR GENDER

- 31.1.** If the Policy Owner unintentionally declares incorrect or omits information regarding the Age or gender of the Policy Insured, and the correct Age and gender of the Policy Insured fall within Manulife's insurance acceptance range:
- a) If the current Face Amount falls within the limit of the Face Amount Multiple according to the correct Age and gender of the Policy Insured: the Cost of Insurance according to the correct Age and gender will be adjusted from the date Manulife accepts insurance based on the correct Age and gender.
 - b) If the current Face Amount falls out of the limit of the Face Amount Multiple according to the correct Age and gender of the Policy Insured: The Basic Premium,

Face Amount may be adjusted so that the new Basic Premium and Face Amount fall within the limit of the Face Amount Multiple according to the correct Age and gender of the Policy Insured. At this point, the Cost Of Insurance according to the correct Age and gender will be adjusted from the date Manulife accepts insurance based on the correct Age and gender.

If the Policy Owner does not accept the above adjustment, Manulife has the right to unilaterally terminate the Main Product, notify in writing and refund the Surrender Value (if any) to the Policy Owner.

- 31.2.** If the Policy Owner unintentionally declares incorrect or omits information regarding the Age or gender of the Policy Insured, and the correct Age and gender of the Policy Insured fall out of Manulife's insurance acceptance range, Manulife has the right to void the Main Product.

ARTICLE 32. THE MAIN PRODUCT IS INVALID (VOIDED)

When the Main Product is voided, Manulife will refund the total premiums paid (without interest), after deducting the following expenses (if any):

- a) Medical examination costs; and
- b) Amounts that Manulife has previously paid, including:
 - (i) Withdrawals from the Policy Account Value, except for withdrawals from the Basic Account to pay the Basic Premium at the request of the Policy Owner within the first 03 Policy Years; and
 - (ii) The funeral benefit that was paid in advance; and
 - (iii) The TPD due to thyroid cancer benefit as mentioned in Article 9.2.2.a that has been paid.

In the event that the total amounts mentioned in Article 32.a and Article 32.b exceeds the total premiums paid (without interest), Manulife reserves the right to request the Policy Owner to refund the difference.

CHAPTER VI: CLAIM SETTLEMENT OF INSURANCE BENEFITS

ARTICLE 33. ORDER OF INSURANCE BENEFIT PAYMENT

Unless otherwise agreed between Manulife and the Policy Owner, Manulife will pay insurance benefits in the following order. This order applies sequentially when the preceding party:

- Does not exist; or
- Has died before or at the time the benefit arises.

33.1. Regarding death benefit

a) Policy Owner is an individual:

- (i) The Beneficiary. If there is more than one Beneficiary, the benefit will be paid according to the designated proportions. If any Beneficiary is deceased at the time of the Policy Insured's death, their share will be equally distributed among the remaining Beneficiaries;
- (ii) The Policy Owner;
- (iii) The legal heir of the Policy Owner.

b) Policy Owner is an organization:

- (i) The Beneficiary. If there is more than one Beneficiary, the benefit will be paid according to the designated proportions. If any Beneficiary is deceased at the time of the Policy Insured's death, their share will be equally distributed among the remaining Beneficiaries;
- (ii) The legal heir of the Policy Insured.

33.2. Regarding TPD benefit

a) Policy Owner is an individual:

- (i) The Policy Owner;
- (ii) The Policy Insured, if the Policy Owner is not the same person and has died.

b) Policy Owner is an organization:

- (i) The Policy Insured.

33.3. Regarding maturity benefits

a) Policy Owner is an individual:

- (i) The Policy Owner;
- (ii) The legal heir of the Policy Owner.

b) Policy Owner is an organization:

- (i) The Policy Insured;
- (ii) The legal heir of the Policy Insured.

ARTICLE 34. DOCUMENTS REQUIRED FOR CLAIM SETTLEMENT

34.1. Documents Required for Death Benefit Claim

- a) Claim request form;
- b) Letter of attorney for information collection, notarized or certified by local authorities;
- c) Death certificate extract;
- d) Death notice or equivalent document;
- e) Statement of cause of death;
- f) Medical documents: summary of medical records (if any), forensic examination report (if any), medical history from the Vietnam Social Security application (VssID) (if applicable), or other medical documents (if any)
- g) In the event of Death due to Accident, the following documents are required:
 - (i) If the Accident was investigated by competent authorities: accident report, investigation conclusion report issued by the authorities;
 - (ii) If the Accident was a domestic Accident or not investigated by authorities: a detailed accident statement certified by local authorities;
- h) Identification documents of the insurance beneficiaries.

34.2. Documents Required for TPD Benefit Claim

- a) Claim request form;
- b) Letter of attorney for information collection, notarized or certified by local authorities;
- c) Medical documents:
 - (i) In case of complete and irreversible loss of function of body parts: summary of medical records, medical history from the Vietnam Social Security application (VssID) (if applicable), or other medical documents (if any).
 - (ii) In case of complete paralysis or disability of 81% or more: disability assessment report issued by the provincial or municipal Medical Review Council;
- d) In the event of TPD due to Accident, the following documents are required:
 - (i) If the Accident was investigated by competent authorities: accident report, investigation conclusion report issued by the authorities;
 - (ii) If the Accident was a domestic Accident or not investigated by authorities: a detailed accident statement certified by local authorities.

In all cases, Manulife reserves the right to request additional documents or evidence from the claimant to facilitate the assessment and ensure accurate benefit payment in accordance with the applicable product provisions.

APPENDIX 1: TERM DEFINITION

A. GENERAL TERMS OF THE POLICY

In this Policy, the capitalized terms used will be defined as below, unless specifically stipulated or separately explained in the Provisions of each insurance product in the Policy.

1. **Doctor:** Is a person who has been granted a medical examination and treatment practice certificate by a competent state agency and performs medical examination and treatment.

Unless otherwise assigned in writing by a competent authority, the treating Doctor or the Doctor who signs the medical records must not simultaneously be:

- a) Policy Owner or Main Insured or Beneficiary; or
 - b) A person having a family relationship with the Policy Owner, the Policy Insured, Beneficiary; or
 - c) The agent of the Policy.
2. **Policy Owner:** Is an organization legally established and operating in Vietnam or an individual who is 18 years of Age and above, is living in Vietnam and having full civil act capacity; and is recorded as the Policy Owner as in the Insurance Certificate, or Policy Changes (if any).
 3. **Pre-Existing Illness:** Is the Policy Insured's illness or injury which has been diagnosed or treated by a Doctor prior to: (i) the effective date of each insurance product or the effective date of the addition of insurance benefits (applicable for optional benefits); or (ii) the reinstatement date of each insurance product, in accordance with applicable legal regulations.
 4. **Surrender Value:** Is the amount that the Policy Owner receive when the Policy is terminated before the Policy Term.
 5. **Insurance Certificate:** Is a document issued by Manulife for the purpose of confirming the establishment of the Policy, detailing the basic information related to the Policy.
 6. **Application Form:** Is the set of documents in the format defined by Manulife (including the insurance application form and related documents) that the Policy Owner and the Policy Insured provided and filled out, signed for confirmation, and submitted to Manulife to request insurance participation.
 7. **Manulife:** Is Manulife (Vietnam) Co., Ltd.
 8. **Policy Year:** Is the one-year period starting from either the Policy Effective Date or the Policy Anniversary Date.
 9. **Policy Maturity Date:** Is the final date of policy insurance term which is shown on Insurance Certificate.
 10. **Premium Due Date:** Is the date by which the Policy Owner must pay the premium for the insurance products.
 11. **Policy Effective Date:** Is the date on which the Policy becomes effective and is shown on Insurance Certificate.

12. **Policy Reinstatement Date:** Is the date on which Manulife approves the request to reinstate the Policy of the Policy Owner.
13. **Policy Monthiversary Date:** Is the monthly anniversary corresponding to the Policy Effective Date of the Policy or the last day of the month if there is no corresponding date in that month.
14. **Policy Anniversary Date:** Is the annual anniversary corresponding to the Policy Effective Date of the Policy or the last day of the month if there is no corresponding date in that month.
15. **Beneficiary:** Is the individual designated to receive the insurance benefit according to the agreement in the Policy. The Beneficiary is recorded in the Application Form or Policy Change (if any).
16. **Policy Insured:** Is the person whose life and health are the subjects covered under the Policy.

Depending on the requirements of the Policy Owner and the approval of Manulife, the Policy Insured must reside and be present in Vietnam on the effective date of the insurance product. The Policy Insured is recorded in the Insurance Certificate or the Policy Change (if any).
17. **Debt:** Is any fee, premium of which Policy Owner has to pay to keep their Policy in force, or any amount has to pay to Manulife according to the Provisions of each insurance product under the Policy.
18. **Main Insurance Product ("Main Product"):** Is the Unit Linked Insurance Product - Regular Premium (Version 7). The Main Product is a mandatory part of the Policy and is recorded in the Insurance Certificate.
19. **Supplemental Insurance Product ("Supplemental Product"):** Is an insurance product that can be attached to the Main Product within the Policy. The Supplemental Product is recorded in the Insurance Certificate or the Policy Change (if any).
20. **Face Amount:** Is the amount Manulife agrees to insure for the insurance product, as recorded in the Insurance Certificate or the Policy Change (if any).
21. **Accident:** Is an objective or continuous, objective sequence of events occurring due to the impact of an unexpected force or object from outside on the Policy Insured 's body and causing Injury or death to the Policy Insured.

The foregoing event or sequence of events must be the direct, sole and unrelated cause of Injury or death to the Policy Insured within 180 days of the occurrence from the date of the event or sequence of events.
22. **Professional Sports:** Is a form of sport in which the Policy Insured participates in training, performing, or competing as his or her profession and receives salary, bonuses, allowances, allowances, sponsorship, or remuneration from this activity.
23. **Combat Sports:** Is a form of sport that involves direct combat with body parts such as arms, legs, head or torso without using or using very little support equipment and accessories. Combat Sport involves an athlete competing against an athlete, for example judo, taekwondo, karate, wrestling, fencing, boxing, kickboxing, muay Thai, sumo.

24. **Adventurous Sports and Activities:** Is a form of sport or activity performed in dangerous conditions that requires strict compliance with specific methods and requirements to ensure the safety of the health and life of participants in the activity and activities and recognized by law or competent state agencies as risky activities.
- Including but not limited to activities such as: animal hunting; all forms of racing other than foot racing, go-karts, road racing and car trials; ice skating, roller skating, skiing, snowboarding, skateboarding; boxing, karate, martial arts, wrestling; parachuting (except in life-saving situations), ascending or traveling in a balloon, gliding, bungee jumping; scuba diving, diving with underwater breathing apparatus, recreational sports diving; mountain bike riding.
25. **Freelook Period:** Is the period during which the Policy Owner can consider whether this Policy meets their needs and has the right to decline to continue participating in the insurance.
26. **Waiting Period:** Is the period during which if the date of examination, diagnosis, or start of treatment occurs, Manulife will not pay any insurance benefits related to the diagnosed condition.
27. **Premium Payment Term:** Is the period during which the Policy Owner pays the premiums for each insurance product, as recorded on the Insurance Certificate or the Policy Change (if any).
28. **Policy Term:** Is the period from the Policy Effective Date to the Policy Maturity Date. The Policy Term is equal to the insurance term of the Main Product.
29. **Insurance Age (“Age”):** Is the age of Policy Owner, Policy Insured.
- a) At the first Policy Year: Age is calculated at the last birthday prior to the Effective Date;
- b) From the following Policy Years: Age is calculated at the last birthday prior to the most recent past Policy Anniversary Date.
- If the Policy Insured’s birthday falls on 29/02 and there is no 29/02 in the current year, the birthday used to calculate the Age in this year is 28/02.
30. **Policy Change:** Is the document issued by Manulife to confirm the changes made to the Policy.

B. TECHNICAL TERMS OF THE MAIN PRODUCT

The capitalized terms defined below will only apply to the Provisions of the Main Product.

1. **Fund Unit:** Is the asset of the Unit-Linked Fund divided into equal parts.
2. **Fund Unit Price:** Is the price of one Fund Unit. The Fund Unit Price may vary between different Funds. When conducting a buy or sell transaction, the Fund Unit Price is equal to the purchase and sale price.
3. **Basic Account Value:** Is the value of the Basic Account determined based on the Fund Unit Price on the Next Valuation Date.
4. **Top-Up Account Value:** Is the value of the Top-Up Account determined based on the Fund Unit Price on the Next Valuation Date.

5. **Policy Account Value:** Is the sum of the Basic Account Value and the Top-up Account Value.
6. **Loyalty Account Value:** is an amount equivalent to the Premium Load deducted from the Basic Premium of each Policy Year. This value is accumulated at each point in time when the Premium Load is deducted and accrues interest until the time of the Loyalty Account Value payment. The applicable interest rate for each case is stipulated in Article 14.1.
7. **Face Amount Multiple:** specifically as follows:

$$\text{Face Amount Multiple} = \frac{\text{Face Amount}}{\text{Annualized Premium}}$$

The minimum and maximum Face Amount Multiple depends on the Age at Policy Effective Date, gender, and health of the Insured Person.

8. **Insurance Plan:** Is either the Basic Insurance Plan or the Advanced Insurance Plan regarding the benefits of the Policy that has been selected and recorded in the Insurance Certificate or Policy Change (if any).
9. **Monthly Deduction:** Is the monthly amount deducted by Manulife from the Policy Account Value, including the Cost of Insurance and the Policy Fee.
10. **Premium Year:** is a year in which all Basic Premiums are fully paid.
11. **Valuation Date:** Is the date on which Manulife determines the Fund Unit Price of the Fund Units.
12. **Next Valuation Date:** Is the Valuation Date right after the date on which events occur, or the date Manulife receives valid requests that result in the need to execute buy or sell transactions of Fund Units.
13. **Insurance Event Date:** Is the date on which one of the following events occurs:
 - a. The date the Insured Person is certified as suffering from Total and Permanent Disability (TPD) for the TPD insurance benefit; or
 - b. The date of the Policy Insured's death for the death insurance benefit.
14. **Basic Premium:** Is the premium paid by the Policy Owner for the Main Insurance Product.
15. **Annualized Basic Premium:** Is the Basic Premium per period multiplied by the number of payment periods in a year.
16. **Top-up Premium:** Is the additional premium paid by the Policy Owner for the Main Insurance Product, on top of the Basic Premium, and is subject to the regulations of Manulife as stated in the Policy.
17. **Supplemental Premium:** Is the premium paid by the Policy Owner for the Supplemental Product.
18. **Premium Load:** Is the fee deducted by Manulife from the Basic Premium and the Additional Premium before allocation to the Policy Account.
19. **Surrender Charge:** Is the fee incurred when the Policy is terminated prematurely.

20. **Fund Switching Fee:** Is the fee that the Policy Owner must pay when exercising the right to change between Unit-Linked Funds.
21. **Policy Fee:** Is the fee used to cover the management and maintenance of the Policy and to provide related information to the Policy Owner.
22. **Fund Management Fee:** Is the fee used to cover the investment activities, asset valuation, supervision, and management of the Fund.
23. **Cost of Insurance:** Is the fee used to ensure the payment of risk insurance benefits according to the Policy.
24. **Unit-Linked Fund:** Is a Fund formed from the insurance premiums of Unit-Linked insurance policies. The Fund is established from time to time, managed and invested by Manulife according to a selected portfolio, and in full compliance with the laws and regulations of Vietnam.
25. **Excess Withdrawal Amount For Each Policy Year:** is the withdrawal amount from the Basic Account:
 - (i) exceeding 10% of the total Basic Premiums paid during the first 10 Policy Years; and
 - (ii) made during the period from Policy Year 11 to the time of Loyalty Account Value benefit payout.
26. **Basic Account:** Is the account formed from the Basic Premium after deducting Premium Load, Monthly Deduction.
27. **Top-up Account:** Is the account formed from the Top-up Premium after deducting Premium Load, Monthly Deduction (if any); adding the Loyalty Account Value payout benefit (if any).
28. **Policy Account:** Include Basic Account and Top-up Account.
29. **Fund Allocation Ratio:** Is the ratio used to allocate the paid Basic Premium, Top-up Premium, and any bonuses (if applicable), after deducting related fees (if any), into the Funds selected by the Policy Owner. The Fund Allocation Ratio is applied according to the Policy Owner's designation.

APPENDIX 2: PREMIUM ALLOCATION METHOD

When participating in the Unit Linked Insurance Product - Regular Premium (Version 7), the Policy Owner has the right to choose the premium allocation method of the Policy (including Basic Premium, Supplemental Premium, and Top-up Premium). The premium allocation method chosen by the Policy Owner is indicated on the Application Form.

A. DURING THE COMPULSORY PERIOD (FIRST 03 POLICY YEAR)

I. Within 15 days before the Premium Due Date

If the premiums are paid within 15 days before the Premium Due Date, the premiums will be allocated in the following order:

- 1) Any outstanding regular Basic Premiums (if any);
- 2) The regular Basic Premium for the next premium period;
- 3) Any outstanding regular Supplemental Product Premiums (if any);
- 4) The regular Supplemental Product Premium for the next premium period;
- 5) Top-up Premiums up to the maximum allowed for the current Policy Year (each Policy Year, the maximum Top-up Premium is 05 times the annualized Basic Premium for the current Policy Year);
- 6) Any remaining insurance premiums (if any) will be held by Manulife (hereafter referred to as "Suspended Premiums").

II. Within 60 days from the Premium Due Date

Within 60 days from the Premium Due Date, the Policy Owner can supplement the outstanding premium for the Policy. The premiums will be allocated according to the following rules:

- 1) If the total of paid premiums, supplemental premiums, and Suspended Premiums is **sufficient** for all outstanding regular Basic Premiums, it will be applied to these outstanding Basic Premiums. Any remaining premiums (if any) will be allocated as follows:

- a) If **sufficient** for all outstanding regular Supplemental Product Premiums, it will be applied to these outstanding Supplemental Product Premiums. Any remaining premiums (if any) will be applied to Top-up Premiums. After fulfilling the maximum allowed for Top-up Premiums, any remaining premiums (if any) will be held as Suspended Premiums.
 - b) If **not sufficient** for all outstanding regular Supplemental Product Premiums, it will be applied to each outstanding regular Supplemental Product Premium. Any remaining premiums (if any) will be held as Suspended Premiums.
- 2) If the total of paid premiums, supplemental premiums, and Suspended Premiums is **not sufficient** for all outstanding regular Basic Premiums, it will be applied to each outstanding regular Basic Premium. Any remaining premiums (if any) will be held as Suspended Premiums.

III. At the end of 60 days from the Premium Due Date

- 1) If the outstanding regular Basic Premiums **have been fully paid** and:
 - a) The outstanding regular Supplemental Product Premiums **have been fully paid**: The Policy remains in force.
 - b) The outstanding regular Supplemental Product Premiums **have not been fully paid**: All Supplemental Products will lapse. Suspended Premiums (if any) will be applied to Top-up Premiums. After fulfilling the maximum allowed for Top-up Premiums, any remaining premiums (if any) will be held as Suspended Premiums.
- 2) If the outstanding regular Basic Premiums **have not been fully paid** and:
 - a) **The Policy Owner has registered** to use the Policy Account Value to pay for the outstanding regular Basic Premiums, Manulife will **use Suspended Premiums, supplemental premiums, and withdrawals from the Policy Account Value (if any)** to pay for the outstanding regular Basic Premiums.
 - (i) If the total of these premiums is **sufficient** to pay the outstanding regular Basic Premiums, the Supplemental Products will lapse.
 - (ii) If the total of these premiums is **not sufficient** to pay the outstanding regular Basic Premiums, the Policy will lapse.
 - b) **The Policy Owner has not registered** to use the Policy Account Value to pay for the outstanding regular Basic Premiums, the Policy will lapse.

B. DURING THE FLEXIBLE PERIOD (FROM YEAR 04 ONWARDS)

Policy Owner has the right to choose the order of premium allocation and can change this choice throughout the Policy Term:

- **Option 1 - Priority on Basic Premium:** Premiums will be allocated in the order of (1) regular Basic Premium, (2) regular Supplemental Product Premium, and (3) Top-up Premium; or
- **Option 2 - Priority on Supplemental Product Premium:** Premiums will be allocated in the order of (1) regular Supplemental Product Premium, (2) regular Basic Premium, and (3) Top-up Premium.

Option	Premium allocation
Option 1: Priority on Basic Premium	<p>I. Within 15 days before the Premium Due Date</p> <p>If premiums are paid within 15 days before the Premium Due Date, they will be allocated in the following order:</p> <ol style="list-style-type: none">1) Any outstanding regular Basic Premiums (if any);2) The regular Basic Premium for the next premium period;3) Any outstanding regular Supplemental Product Premiums (if any);4) The regular Supplemental Product Premium for the next premium period;5) Top-up Premiums up to the maximum allowed for the current Policy Year;6) Any remaining premiums (if any) will be held as Suspended Premiums. <p>II. Within 60 days from the Premium Due Date</p> <p>Within 60 days from the Premium Due Date, PO can supplement the outstanding premium for the Policy. The premiums will be allocated according to the following rules:</p>

- 1) If the total of paid premiums, supplemental premiums, and Suspended Premiums is **sufficient** to cover all outstanding regular Basic Premiums, it will be applied to these outstanding Basic Premiums. Any remaining premiums (if any) will be allocated as follows:
 - a) If **sufficient** for all outstanding regular Supplemental Product Premiums, it will be applied to these outstanding Supplemental Product Premiums. Any remaining premiums (if any) will be applied to Top-up Premiums. After fulfilling the maximum allowed for Top-up Premiums, any remaining premiums (if any) will be held as Suspended Premiums.
 - b) If **not sufficient** for all outstanding regular Supplemental Product Premiums, it will be applied to each outstanding regular Supplemental Product Premium. Any remaining premiums (if any) will be held as Suspended Premiums.
- 2) If the total of paid premiums, supplemental premiums, and Suspended Premiums is **not sufficient** for all outstanding regular Basic Premiums, it will be applied to each outstanding regular Basic Premium. Any remaining premiums (if any) will be held as Suspended Premiums.

III. At the end of 60 days from the Premium Due Date

- 1) If the outstanding regular Basic Premiums **have been fully paid** and:
 - a) The outstanding regular Supplemental Product Premiums **have been fully paid**: The Policy remains in force if the Policy Account Value is sufficient to cover the Monthly Deductions.
 - b) The outstanding regular Supplemental Product Premiums **have not been fully paid**: All Supplemental Products will lapse. Suspended Premiums (if any) will be applied to Top-up Premiums. After fulfilling the maximum allowed for Top-up Premiums, any remaining premiums (if any) will be held as Suspended Premiums.
- 2) If the outstanding regular Basic Premiums **have not been fully paid**, the Supplemental Products will lapse. The Base Product remains in force if the Policy Account Value is sufficient to cover the Monthly Deductions.

	<p>IV. From the end of 60 Days from the Premium Due Date to 15 days before the next Premium Due Date</p> <p>If premiums are paid from the end of 60 days from the Premium Due Date to 15 days before the next Premium Due Date, they will be allocated in the following order:</p> <ol style="list-style-type: none"> 1) Any outstanding regular Basic Premiums (if any); 2) Any outstanding regular Supplemental Product Premiums (if any); 3) Top-up Premiums up to the maximum allowed for the current Policy Year; 4) Any remaining premiums (if any) will be held as Suspended Premiums.
<p>Option 2: Priority on Supplemental Product Premium</p> <p><i>Note: If the Policy does not have Supplemental Products or if the Supplemental Products have been lapsed, premiums will be allocated with priority to regular Basic Premiums and then to Top-up Premiums.</i></p>	<p>I. Within 15 days before the Premium Due Date</p> <p>If premiums are paid within 15 days before the Premium Due Date, they will be allocated in the following order:</p> <ol style="list-style-type: none"> 1) Any outstanding regular Supplemental Product Premiums (if any); 2) The regular Supplemental Product Premium for the next premium period; 3) Any outstanding regular Basic Premiums (if any); 4) The regular Basic Premium for the next premium period; 5) Top-up Premiums up to the maximum allowed for the current Policy Year; 6) Any remaining premiums (if any) will be held as Suspended Premiums. <p>II. Within 60 days from the Premium Due Date</p> <p>Within 60 days from the Premium Due Date, the Policy Owner can supplement the outstanding premium for the Policy. The premiums will be allocated according to the following rules:</p>

- 1) If the total of paid premiums, supplemental premiums, and Suspended Premiums is **sufficient** to cover all outstanding regular Supplemental Product Premiums, it will be applied to these outstanding Supplemental Product Premiums. Any remaining premiums (if any) will be allocated as follows:
 - a) If **sufficient** for all outstanding regular Basic Premiums, it will be applied to these outstanding Basic Premiums. Any remaining premiums (if any) will be applied to Top-up Premiums. After fulfilling the maximum allowed for Top-up Premiums, any remaining premiums (if any) will be held as Suspended Premiums.
 - b) If **not sufficient** for all outstanding regular Basic Premiums, it will be applied to each outstanding regular Basic Premium. Any remaining premiums (if any) will be held as Suspended Premiums.
- 2) If the total of paid premiums, supplemental premiums, and Suspended Premiums is **not sufficient** for all outstanding regular Supplemental Product Premiums, it will be applied to each outstanding regular Supplemental Product Premium. Any remaining premiums will be held as Suspended Premiums.

III. At the End of 60 Days from the Premium Due Date

- 1) If the outstanding regular Supplemental Product Premiums **have been fully paid**, the Policy remains in effect if the Policy Account Value is sufficient to cover the Monthly Deductions.
- 2) If the outstanding regular Supplemental Product Premiums **have not been fully paid**, the Supplemental Products will lapse. Suspended Premiums (if any) will be allocated as follows:
 - a) If **sufficient** for all outstanding regular Basic Premiums, it will be applied to these outstanding Basic Premiums. Any remaining premiums (if any) will be applied to Top-up Premiums. After fulfilling the maximum allowed for Top-up Premiums, any remaining premiums (if any) will be held as Suspended Premiums.
 - b) If **not sufficient** for all outstanding regular Basic Premiums, it will be applied to each outstanding regular Basic Premium. Any remaining premiums (if any) will be held as Suspended Premiums.

IV. From the end of 60 Days from the Premium Due Date to 15 days before the Next Premium Due Date

	<p>If premiums are paid from the end of 60 days from the Premium Due Date to 15 days before the next Premium Due Date, they will be allocated in the following order:</p> <ol style="list-style-type: none">1) Any outstanding regular Supplemental Product Premiums (if any);2) Any outstanding regular Basic Premiums (if any);3) Top-up Premiums up to the maximum allowed for the current Policy Year;4) Any remaining premiums (if any) will be held as Suspended Premiums.
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Note:

- (i) The Policy Owner has the right to request withdraw Suspended Premiums at any time.
- (ii) In the case of using the Policy Account Value to pay for regular Basic Premiums during the first 3 Policy Years at the request of the Policy Owner , premium will be prioritize withdrawn from the Top-up Account Value first, then from the Basic Account Value (if necessary).
- (iii) The Policy Owner can change their choice of premium allocation method by submitting a request to Manulife. The effective date of change will be recorded in the Policy Change issued by Manulife.

APPENDIX 3: LIST OF UNIT-LINKED FUNDS

The investment asset allocation of Unit-Linked Funds may deviate from the target allocation ratios, but such deviations must not exceed the maximum limits allowed by law. These deviations must result from increases or decreases in the market value of the invested assets (passive deviations) and the lawful payments of the Fund.

1. Fund groups allocated according to the customer's risk tolerance level

Fund name	Investment objectives	Investment policies and risks	List of investment assets
Money Market	<ul style="list-style-type: none"> ▪ The primary objective is capital preservation. 	<ul style="list-style-type: none"> ▪ It is a low risk linked fund, a temporary choice for investors before deciding to invest in other funds. ▪ This is a cautious investment group. 	<ul style="list-style-type: none"> ▪ Invests directly or indirectly from 80% to 100% in terms of deposits and money market instruments. ▪ The rest is invested directly or indirectly in bonds in the Vietnamese market, non-term deposits, and other investment tools.
Fixed Income	<ul style="list-style-type: none"> ▪ Mid to long-term capital growth. 	<ul style="list-style-type: none"> ▪ Provides stable investment opportunities with low risk through the fund's advantage of investing in corporate bonds, government bonds, and other fixed-income tools. ▪ This is a relatively cautious investment group. 	<ul style="list-style-type: none"> ▪ Invests from 80% to 100% in bonds and term deposits in the Vietnamese market. ▪ The rest is invested directly or indirectly in non-term deposits and other investment tools.
Diversified	<ul style="list-style-type: none"> ▪ Mid to long-term capital growth. 	<ul style="list-style-type: none"> ▪ Designed for those with a tendency for long-term investment with medium-low risk and who accept minor fluctuations in the value of investment 	<ul style="list-style-type: none"> ▪ Invests from 10% to 30% in stocks of companies operating in Vietnam. rest is invested directly or indirectly in bonds, term deposits, non-term deposits, and other investment

		items.	tools.
Balanced	<ul style="list-style-type: none"> ▪ Mid to long-term capital growth. 	<ul style="list-style-type: none"> ▪ This is a balanced investment group. ▪ Provides investment opportunities with medium-level capital preservation and growth. ▪ This is a relatively aggressive investment group. 	<ul style="list-style-type: none"> ▪ Invests from 40% to 60% in stocks of companies operating in Vietnam. ▪ The rest will be invested directly or indirectly in bonds, term deposits, non-term deposits, and other investment tools.
Growth	<ul style="list-style-type: none"> ▪ Mid to long-term capital growth. 	<ul style="list-style-type: none"> ▪ Provides investment opportunities with capital growth in the medium to long-term. ▪ This is a relatively aggressive investment group. 	<ul style="list-style-type: none"> ▪ Invests from 50% to 80% in stocks of companies operating in Vietnam. ▪ The rest is invested directly or indirectly in bonds, term deposits, non-term deposits, and other investment tools.
Aggressive	<ul style="list-style-type: none"> ▪ Long-term capital growth. 	<ul style="list-style-type: none"> ▪ Provides investment opportunities with long-term capital growth for investors. ▪ This is an aggressive investment group. 	<ul style="list-style-type: none"> ▪ Invests from 70% to 100% in stocks of companies operating in Vietnam. ▪ The rest is invested directly or indirectly in bonds, term deposits, non-term deposits, and other investment instruments.

2. Fund groups that actively adjust their investment portfolios annually

The **Lifestyle Funds 2035/2040/2045** were established to meet retirement savings needs. These funds are designed with investment allocations that change annually to automatically balance risk for customers. They start with higher-risk investments (equities) at the time of issuance (when customers first join) and gradually shift to lower-risk investments (fixed-income tools/ bonds/ money market tools) as they approach the target years of 2035/2040/2045, which are the customers' target retirement years.

Year	Maximum investment allocation (%)								
	Lifestyle Fund 2035			Lifestyle Fund 2040			Lifestyle Fund 2035		
	Equities (*)	Fixed-income tools/ Bonds (**)	Money market tools (***)	Equities (*)	Fixed-income tools/ Bonds (**)	Money market tools (***)	Equities (*)	Fixed-income tools/ Bonds (**)	Money market tools (***)
2026	70%	55%	10%	75%	50%	10%	85%	40%	10%
2027	66%	58%	11%	74%	51%	10%	83%	43%	10%
2028	63%	60%	13%	73%	53%	10%	80%	45%	10%
2029	59%	63%	14%	71%	54%	10%	78%	48%	10%
2030	55%	65%	15%	70%	55%	10%	75%	50%	10%
2031	55%	65%	15%	70%	55%	10%	75%	50%	10%
2032	53%	68%	19%	66%	58%	11%	74%	51%	10%
2033	50%	70%	23%	63%	60%	13%	73%	53%	10%
2034	48%	73%	26%	59%	63%	14%	71%	54%	10%
2035	45%	75%	30%	55%	65%	15%	70%	55%	10%
2036	45%	75%	30%	55%	65%	15%	70%	55%	10%
2037	44%	75%	30%	53%	68%	19%	66%	58%	11%
2038	43%	75%	30%	50%	70%	23%	63%	60%	13%
2039	41%	75%	30%	48%	73%	26%	59%	63%	14%
2040	40%	75%	30%	45%	75%	30%	55%	65%	15%
2041	40%	75%	30%	45%	75%	30%	55%	65%	15%
2042	39%	75%	30%	44%	75%	30%	53%	68%	19%
2043	38%	75%	30%	43%	75%	30%	50%	70%	23%
2044	36%	75%	30%	41%	75%	30%	48%	73%	26%
2045	35%	75%	30%	40%	75%	30%	45%	75%	30%
2046+	35%	75%	30%	40%	75%	30%	45%	75%	30%

(*) Equities: Focused on equities

(**) Fixed-income tools/ Bonds: Focused on Fixed-income tools /Bonds

(***) Money market tools: Focused on Money market tools

For Reference Only