#### FORM D



# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
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hours per response.........................16.00

	SEC	USE ONLY
Prefix		Serial
	DATI	RECEIVED

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)  AGL Separate Account VL 43
Filing under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section 4(6) ☐ ULOE
Type of Filing:   New Filing □ Amendment
A. BASIC IDENTIFICATION DATA
Enter the information requested about the issuer
Name of Issuer (☐ check if this is an amendment and name has changed, and indicate change.)
AGL Life Assurance Company Separate Account VL 43
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
610 West Germantown Pike, Suite 460, Plymouth Meeting, PA 19462 (484) 530-4890
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone (umber (Including Area Code)
(if different from Executive Offices)
Brief Description of Business  Investment of variable life policy separate account assets  AUG 14 2003
Type of Business Organization
Type of Business Organization  Corporation  Imited partnership, already formed  Other (please specify): Insurance Company
Type of Business Organization

# **General Instructions**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on the ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

## A. BASIC IDENTIFICATION DATA

## 2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.
- Each executive officer and director of corporate issuers and of corporate general managing partners of partnership issuers; and

Each gener	al and managing	partnership of partnership	o issuers.		
Check Box(es) that Apply:	⊠ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
AGL Life Assurance Co					
Business or Residence Addr	ress (Numbe	er and Street, City, State, Zip	Code)		
610 West Germantown	<del></del>		Plymouth Meeting	PA	19462
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,	f individual)				
Business or Residence Add	ress (Numbe	er and Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	f individual)				
Business or Residence Add	ress (Numbe	er and Street, City, State, Zip	Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Add	ress (Numbe	er and Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Add	ress (Numbe	er and Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Add	ress (Numbe	er and Street, City, State, Zip	Code)		
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1. Has th	ne issuer s	old, or do	es the issue	r intend to	sell, to no	n-accredite		s in this				1,-1	Yes	No
2. What	is the mini	mum inve	stment that	will be acc	epted from	n any indivi	idual?					\$	§	100,000
3. Does	the offerin	ıg permit j	oint owners	hip of a sir	igle unit? .								Yes ⊠	No
comn offeri and/o	nission or s ng. If a pe or with a st	similar rer rson to be tate or sta	uested for en nuneration for listed is an tes, list the contact the contact is th	or solicitat associate name of th	ion of purc d person o e broker o	hasers in our agent of realer. It	connection a broker or f more than	with sal dealer five (5)	es of secu registered persons t	irities in with the o be lis	n the ie SEC sted are			
			f individual)		,									
Busines	s or Reside	ence Addı	ess (Numbe	er and Stre	et, City, St	tate, Zip Co	ode)							
Name of	f Associate	d Broker	or Dealer	***										
States in			ed Has Solid or check ind											All States
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Full Nan	ne (Last na	ame first, i	f individual)											
Busines	s or Reside	ence Addi	ess (Numbe	er and Stre	et, City,	State, Zip (	Code)							
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Name of	f Associate	ed Broker	or Dealer											
States in	n Which Pe (Check "A	erson List	ed Has Solid or check ind	cited or Inte dividual Sta	ends to So ates)	licit Purcha	asers							All States
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE  1. Enter the aggregate offering price of securities included in this offering and the total amount already sold.  Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box  and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	OF PROCEEDS	· · · · · · · · · · · · · · · · · · ·
Type of Security	Aggregate Offering Price	Amount Alread Sold
Debt	. \$	\$
Equity	. \$	\$
Convertible Securities (including warrants)	. \$	\$
Partnership Interests	. \$	\$
Other (Specify Variable life insurance policies )	. \$Unlimited	\$ <u>1,077,723</u>
Total	\$	\$
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number of Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	1_	\$ <u>598,000</u>
Non-accredited Investors	3_	\$479,723
Total (for filing under Rule 504 only)		\$
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amoun
Type of offering	Security	Sold
Rule 505	·	\$
Regulation A	•	\$
Rule 504		\$
Total	·	\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees		\$
Printing and Engraving Costs		\$
Legal Fees		<b>\$</b>
Accounting Fees		\$
Engineering Fees		] \$
Sales Commissions (specify finders' fees separately)		<b>\$</b>
Other Expenses (identify) DAC taxes, premium taxes, underwriting charges		₫ \$33,582
	-	7 ¢ 22 E02

C. OFFERING PRIC	E, NUMBER OF INVESTORS, EXPENSES AND L	ISE OF PROCEEDS	
tion 1 and total expenses furnished in res	ate offering price given in response to Part C- Quessponse to Part C - Question 4.a. This difference is er."		· \$ 1,044,141
for each of the purposes shown. If the amo	pross proceeds to the issuer used or proposed to be usefunt for any purpose is not known, furnish an estimate ne total of the payments listed must equal the adjusted sponse to Part C- Question 4.b. above.	and	Payments To
Salaries and fees		Affiliates . □ \$	Others
Purchase of real estate		. 🗆 \$	□ \$
Purchase, rental or leasing and in	stallation of machinery and equipment	. 🗆 \$	<b>\$</b>
Construction or leasing of plant but	ildings and facilities	. 🗆 \$	□ \$
offering that may be used in excha	iding the value of securities involved in this nge for the assets or securities of another	. 🗆 \$	□ \$
Repayment of indebtedness		. 🗆 \$	□ \$
Working capital		. 🗆 \$	□ \$
Other (specify): Investments in v	variable life policy separate accounts		<b>\$</b>
			□ \$
			□ \$
Total Payments Listed (column total	als added)	🗵 \$1,04	14 <u>,141</u>
	D. FEDERAL SIGNATURE		
following signature constitutes an undertaki	e signed by the undersigned duly authorized persoring by the issuer to furnish to the U.S. Securities and by the issuer to any non-accredited investor pursu	d Exchange Commiss	ion, upon written
Issuer (Print or Type)		ate	
AGL Life Assurance Company Separate Account VL 43	Ja Fullo D	8/12/0	73
Name of Signer (Print or Type)	Title of Signer (Print or Type)		
Joseph A. Fillip, Jr.	Senior VP, AGL Life Assurance Company, on	hehalf of leguer	

# **ATTENTION**