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The reader should not assume that the information is accurate and complete.

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

Notice of Exempt Offering of Securities

OMB APPROVAL

OMB Number: 3235-0076

Estimated average burden

hours per response: 4.00

1. Issuer's Identity

CIK (Filer ID Number)	Previous Names	None	Entity Type
<a href="#">0000733076</a>	MetLife Insurance Co USA		<input checked="" type="checkbox"/> Corporation
<b>Name of Issuer</b>	MetLife Insurance CO of Connecticut		<input type="checkbox"/> Limited Partnership
BRIGHTHOUSE LIFE INSURANCE Co	TRAVELERS INSURANCE CO		<input type="checkbox"/> Limited Liability Company
<b>Jurisdiction of Incorporation/Organization</b>			<input type="checkbox"/> General Partnership
DELAWARE			<input type="checkbox"/> Business Trust
<b>Year of Incorporation/Organization</b>			<input type="checkbox"/> Other (Specify)
<input checked="" type="checkbox"/> Over Five Years Ago			
<input type="checkbox"/> Within Last Five Years (Specify Year)			
<input type="checkbox"/> Yet to Be Formed			

2. Principal Place of Business and Contact Information

Name of Issuer		Street Address 1		Street Address 2	Phone Number of Issuer
BRIGHTHOUSE LIFE INSURANCE Co		11225 NORTH COMMUNITY HOUSE ROAD			
City	State/Province/Country	ZIP/PostalCode	Phone Number of Issuer		
CHARLOTTE	NORTH CAROLINA	28277	980-365-7100		

3. Related Persons

Last Name	First Name	Middle Name
Steigerwalt	Eric	T.
Street Address 1	Street Address 2	ZIP/PostalCode
11225 North Community House Road		
City	State/Province/Country	ZIP/PostalCode
Charlotte	NORTH CAROLINA	28277
<b>Relationship:</b> <input checked="" type="checkbox"/> Executive Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Carlson	Peter	M.
Street Address 1	Street Address 2	ZIP/PostalCode
11225 North Community House Road		
City	State/Province/Country	ZIP/PostalCode
Charlotte	NORTH CAROLINA	28277
<b>Relationship:</b> <input checked="" type="checkbox"/> Executive Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Bhalla	Anant	
Street Address 1	Street Address 2	
11225 North Community House Road		
City	State/Province/Country	ZIP/PostalCode
Charlotte	NORTH CAROLINA	28277
<b>Relationship:</b> X Executive Officer X Director Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Lambert	Myles	J.
Street Address 1	Street Address 2	
11225 North Community House Road		
City	State/Province/Country	ZIP/PostalCode
Charlotte	NORTH CAROLINA	28277
<b>Relationship:</b> X Executive Officer X Director Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Rosenthal	John	L.
Street Address 1	Street Address 2	
334 Madison Avenue		
City	State/Province/Country	ZIP/PostalCode
Morristown	NEW JERSEY	07960
<b>Relationship:</b> X Executive Officer X Director Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Dumais	Lynn	A.
Street Address 1	Street Address 2	
11225 North Community House Road		
City	State/Province/Country	ZIP/PostalCode
Charlotte	NORTH CAROLINA	28277
<b>Relationship:</b> X Executive Officer Director Promoter		

Clarification of Response (if Necessary):

#### 4. Industry Group

Agriculture	Health Care	Retailing
Banking & Financial Services	Biotechnology	Restaurants
Commercial Banking	Health Insurance	Technology
X Insurance	Hospitals & Physicians	Computers
Investing	Pharmaceuticals	Telecommunications
Investment Banking	Other Health Care	Other Technology
Pooled Investment Fund	Manufacturing	Travel
Is the issuer registered as an investment company under the Investment Company Act of 1940?	Real Estate	Airlines & Airports
Yes	Commercial	Lodging & Conventions
No	Construction	Tourism & Travel Services
Other Banking & Financial Services	REITS & Finance	Other Travel

Business Services

Residential

Other

Energy

Other Real Estate

Coal Mining

Electric Utilities

Energy Conservation

Environmental Services

Oil & Gas

Other Energy

5. Issuer Size

**Revenue Range**

**OR**

**Aggregate Net Asset Value Range**

No Revenues

No Aggregate Net Asset Value

\$1 - \$1,000,000

\$1 - \$5,000,000

\$1,000,001 - \$5,000,000

\$5,000,001 - \$25,000,000

\$5,000,001 -

\$25,000,001 - \$50,000,000

\$25,000,000

\$25,000,001 -

\$50,000,001 - \$100,000,000

\$100,000,000

Over \$100,000,000

Over \$100,000,000

X Decline to Disclose

Decline to Disclose

Not Applicable

Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

X Investment Company Act Section 3(c)

Rule 504(b)(1) (not (i), (ii) or (iii))

Section 3(c)(1)

Section 3(c)(9)

Rule 504 (b)(1)(i)

Section 3(c)(2)

Section 3(c)(10)

Rule 504 (b)(1)(ii)

Section 3(c)(3)

Section 3(c)(11)

Rule 504 (b)(1)(iii)

Section 3(c)(4)

Section 3(c)(12)

X Rule 506(b)

Rule 506(c)

Section 3(c)(5)

Section 3(c)(13)

Securities Act Section 4(a)(5)

Section 3(c)(6)

Section 3(c)(14)

X Section 3(c)(7)

7. Type of Filing

X New Notice Date of First Sale 2005-07-01 First Sale Yet to Occur

Amendment

8. Duration of Offering

Does the Issuer intend this offering to last more than one year? X Yes No

9. Type(s) of Securities Offered (select all that apply)

Equity

Pooled Investment Fund Interests

Debt

Tenant-in-Common Securities

Option, Warrant or Other Right to Acquire Another Security

Mineral Property Securities

Security to be Acquired Upon Exercise of Option, Warrant or

Other Right to Acquire Security

X Other (describe)

COLI Group Variable Life Insurance Policies supported by  
Brighthouse Separate Account CPPVUL 1

10. Business Combination Transaction

Is this offering being made in connection with a business combination transaction, such as

Clarification of Response (if Necessary):

11. Minimum Investment

Minimum investment accepted from any outside investor \$30,000,000 USD

12. Sales Compensation

Recipient	Recipient CRD Number X None		
Various Agents	None		
(Associated) Broker or Dealer	None	(Associated) Broker or Dealer CRD Number	
M Holdings Securities, Inc.	43285	None	
<b>Street Address 1</b>	<b>Street Address 2</b>		
1125 N.W. Couch Street	Suite 900		
City	State/Province/Country	ZIP/Postal Code	
Portland	OREGON	97209	
State(s) of Solicitation (select all that apply) Check "All States" <input type="checkbox"/> or check individual States	All States	Foreign/non-US	
<table border="1"><tr><td>CALIFORNIA</td></tr></table>	CALIFORNIA		
CALIFORNIA			

13. Offering and Sales Amounts

Total Offering Amount USD or X Indefinite  
 Total Amount Sold \$271,202,985 USD  
 Total Remaining to be Sold USD or X Indefinite

Clarification of Response (if Necessary):

14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering. \_\_\_\_\_  
 Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering: 

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15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions \$3,859,867 USD Estimate  
 Finders' Fees \$0 USD Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

## Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.\*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Rule 504 or Rule 506 for one of the reasons stated in Rule 504(b)(3) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

<b>Issuer</b>	<b>Signature</b>	<b>Name of Signer</b>	<b>Title</b>	<b>Date</b>
BRIGHTHOUSE LIFE INSURANCE Co	/s/ Donald Leintz	Donald Leintz	Vice President	2017-09-21

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

\* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.