



SERFF Tracking Number: NYPX-125917117 State: Arkansas  
 Filing Company: New York Life Insurance and Annuity State Tracking Number: 40937  
 Corporation  
 Company Tracking Number: 8914-08  
 TOI: L06G Group Life - Variable Sub-TOI: L06G.002 Single Life - Flexible Premium  
 Product Name: Corp Exec PPVUL- Monthly Deduction Endorsement -  
 Project Name/Number: Corp Exec PPVUL- Monthly Deduction Endorsement - Group/8914-08

## Company and Contact

### Filing Contact Information

Sean Hebron, SENIOR CONTRACT ASSISTANT Sean\_Hebron@nyl.com  
 51 Madison Avenue (212) 576-4809 [Phone]  
 New York, NY 10010 (212) 447-4141[FAX]

### Filing Company Information

New York Life Insurance and Annuity Corporation CoCode: 91596 State of Domicile: Delaware  
 51 Madison Avenue Group Code: 826 Company Type: Life  
 Room 604  
 New York, NY 10010 Group Name: State ID Number:  
 (212) 576-4809 ext. [Phone] FEIN Number: 13-3044743  
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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? Yes  
 Fee Explanation:  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
New York Life Insurance and Annuity Corporation	\$50.00	11/24/2008	24112919

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Linda Bird	11/25/2008	11/25/2008

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## **Disposition**

Disposition Date: 11/25/2008

Implementation Date:

Status: Approved

Comment:

Rate data does NOT apply to filing.

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Certification/Notice		No
Supporting Document	Application		No
Supporting Document	Cover Letter		Yes
Form	Group Endorsement		Yes

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## Form Schedule

Lead Form Number: 8914-08

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	8914-08	Certificate	Group Endorsement Amendmen t, Insert Page, Endorseme nt or Rider	Initial		0	8914-08.PDF

# NEW YORK LIFE INSURANCE AND ANNUITY CORPORATION

## ENDORSEMENT

### MODIFICATION OF CERTIFICATE PROVISION

This endorsement is made a part of the Certificate. "Certificate" refers to the Certificate to which this endorsement is attached.

Section 7.7 of the Certificate is deleted and the following is substituted:

**7.7 What Monthly Deduction Charges Are Made Against The Cash Value?** On each Monthly Deduction Day, the following Monthly Deduction Charges are taken from the Cash Value, regardless of whether a premium is paid in that month:

- (a) A monthly Contract Charge not to exceed the amount shown on the Certificate Data Page 2.1;
- (b) The monthly Cost of Insurance for the Life Insurance Benefit in effect at that time,
- (c) The monthly cost for any riders attached to the Certificate and;
- (d) The monthly Mortality and Expense Charge not to exceed the amount shown on the Certificate Data Page 2.1.

The Monthly Deduction Charges also include any flat extras that may apply. The amount and duration of these flat extras, if any, are shown on Certificate Data Page 2.

The Certificate Date is the date We use to calculate premiums and charges for the Certificate. The Monthly Deduction Day for the Certificate will be the same calendar day each month, as determined by the Certificate Date. The Certificate Date is shown on Certificate Data Page 2 and the Monthly Deduction Date is shown on Certificate Data Page 2 (cont.).

The first Monthly Deduction Day will be the first occurrence of this calendar day that falls on or after the Issue Date of the certificate. However, if, on the Issue Date, we have not yet received the Initial Premium payment for the Certificate, the first Monthly Deduction Day will be the first occurrence of this calendar day that falls on or after the date we receive such payment. Deductions made on the first Monthly Deduction Day will include the monthly deductions specified in (a) through (d) above which would have been made on each Monthly Deduction Day for the period from the Certificate Date to the first Monthly Deduction Date as if the certificate had been issued on the Certificate Date. All Monthly Deduction Charges will be taken from the Cash Reserve Account. If the charges exceed the amount in the Cash Reserve Account, the balance will be deducted pro-rata from the Fixed Account and the other Registered Investment Divisions. If the charges exceed the amount in the Fixed Account and the Registered Investment Divisions, the difference will be deducted pro-rata from the Exempt Investment Divisions. On or after the Certificate Anniversary on which the Insured is 100, no further Monthly Cost of Insurance Charges will be taken.

**NEW YORK LIFE INSURANCE  
AND ANNUITY CORPORATION**

  
President

  
Secretary



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## **Rate Information**

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## Supporting Document Schedules

### Review Status:

**Satisfied -Name:** Cover Letter

11/24/2008

**Comments:**

**Attachment:**

Cover Letter.PDF

November 21, 2008

Hon. Julie Benafield Bowman  
Insurance Commissioner  
Arkansas Insurance Department  
Division of Compliance  
Life and Health  
1200 West Third Street  
Little Rock, AR 72201-1904

Re: New York Life Insurance and Annuity Corporation  
Group Life Insurance  
NAIC #: 82691596  
FEIN#: 13-3044743  
Endorsement Form 8914-08

Dear Commissioner:

We are attaching for your Department's approval a new endorsement form 8914-08, titled *Modification of Certificate Provision*. This endorsement is to be used with our previously approved Private Placement Variable Universal Life Certificate form 304-46C (approved by your Department on 11/12/2004) for use with the 2001 CSO Mortality Tables (approved on 11/1/2007). This form does not replace any form previously approved by your Department.

The endorsement modifies the language in Certificate provision Section 7.7, titled "*What Monthly Deduction Charges Are Made Against The Cash Value?*" The endorsement explains that on the first Monthly Deduction Day, deductions for monthly contract charges, cost of insurance charges, rider charges and mortality and expense charges will cover the period from the Certificate Date to the first Monthly Deduction Day.

This endorsement will be used with all newly issued policies once your Department approves the form.

This product is subject to federal jurisdiction and accordingly the Flesch requirements do not apply.

I hope that this information is satisfactory and that we can receive your Department's approval of this submission as soon as possible. Please contact Diana Moody at 1-888-695-4748 ext. 4064 or via email at [dmoody@nyl.com](mailto:dmoody@nyl.com) if you have any questions or comments in this regard.

Sincerely,



Linda E. LoPinto  
Corporate Vice President  
Individual Life Department

Attachments