

SERFF Tracking Number: TCRE-126150066 State: Arkansas  
Filing Company: TIAA-CREF Life Insurance Company State Tracking Number: 42528  
Company Tracking Number: TCL-NAIC VULREPLMT-END (2009)  
TOI: L06I Individual Life - Variable Sub-TOI: L06I.202 Joint (Last Survivor) - Flexible Premium  
Product Name: Policy Replacement Endorsement  
Project Name/Number: Policy Replacement Endorsement /TCL-NAIC VULREPLMT-END (2009)

## Filing at a Glance

Company: TIAA-CREF Life Insurance Company

Product Name: Policy Replacement Endorsement SERFF Tr Num: TCRE-126150066 State: Arkansas

TOI: L06I Individual Life - Variable SERFF Status: Closed-Approved- Closed State Tr Num: 42528

Sub-TOI: L06I.202 Joint (Last Survivor) - Flexible Premium Co Tr Num: TCL-NAIC VULREPLMT-END (2009) State Status: Approved-Closed

Filing Type: Form Reviewer(s): Linda Bird  
Author: Patrick McGroarty Disposition Date: 06/03/2009  
Date Submitted: 05/28/2009 Disposition Status: Approved-Closed

Implementation Date Requested: Implementation Date:  
State Filing Description:

## General Information

Project Name: Policy Replacement Endorsement  
Project Number: TCL-NAIC VULREPLMT-END (2009)  
Requested Filing Mode: Review & Approval  
Explanation for Combination/Other:  
Submission Type: New Submission  
Overall Rate Impact:  
Filing Status Changed: 06/03/2009

Deemer Date:  
Submitted By: Patrick McGroarty

Filing Description:

Status of Filing in Domicile: Pending  
Date Approved in Domicile:  
Domicile Status Comments:  
Market Type: Individual  
Group Market Size:  
Group Market Type:  
Explanation for Other Group Market Type:  
State Status Changed: 06/03/2009  
Created By: Patrick McGroarty  
Corresponding Filing Tracking Number: TCL-NAIC VULREPLMT-END (2009)

Re: TIAA-CREF Life Insurance Company ("TIAA-CREF Life")  
NAIC No.: 60142 NAIC Group No.: 1216 FEIN No.: 13-3917848  
Policy Replacement Endorsement

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Form number TCL-NAIC VULREPLMT-END (2009)

Dear Commissioner

We are enclosing for your approval, our Policy Replacement Endorsement, form number, TCL-NAIC VULREPLMT-END (2009) which we intend to use with the following recently approved Variable Universal Life Insurance Policies in the event that such policies are issued in replacement situations.

Form Description Form Number Approved State number

Last Survivor Flexible Premium Universal Life Policy AM-JVUL.3 AR (2008) 11/12/2008 40800  
Single Life Flexible Premium Universal Life Policy AM-SVUL.3 AR (2008) 07/25/2008 38716

Currently, under non replacement situations during the free look period we are required to return premiums paid. However, pursuant to Arkansas Regulatory Activity Rule and Regulation 97 - Section 6, in the case of a variable or market value adjustment policy or contract, we are required to return payment of the cash surrender value provided under the policy or contract plus the fees and other charges deducted from the gross premiums or considerations or imposed under the policy or contract.

Endorsement form number TCL-NAIC VULREPLMT-END (2009) will be used when the policy owner has replaced a previous life insurance product with one of the above Flexible Premium Variable Universal Life Insurance forms.

Since this form pertains only to Variable Life Insurance policy forms we are considering this form to be exempt from the readability requirements.

Please forward all correspondence to Patrick McGroarty at TIAA-CREF Life, located 730 Third Avenue, Area 3/32, New York, New York 10017-3206.

Sincerely,

Patrick McGroarty, AIRC, AAPA, AIAA, ACS  
Sr. Contract Forms Specialist  
E-Mail: pmcgroarty@tiaa-cref.org  
Phone: (800) 842-2733, Extension 3284

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## Company and Contact

### Filing Contact Information

Pat McGroarty, Senior Contract Forms Specialist  
 pmcgroarty@tiaa-cref.org  
 730 Third Avenue 212-913-3284 [Phone]  
 730/3/33 212-916-5903 [FAX]  
 New York, NY 10017

### Filing Company Information

TIAA-CREF Life Insurance Company CoCode: 60142 State of Domicile: New York  
 730 Third Avenue Group Code: 1216 Company Type: L&H  
 New York, NY 10017 Group Name: TIAA-CREF State ID Number:  
 (212) 490-9000 ext. [Phone] FEIN Number: 13-3917848  
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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$20.00  
 Retaliatory? No  
 Fee Explanation:  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
TIAA-CREF Life Insurance Company	\$20.00	05/28/2009	28142655

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	06/03/2009	06/03/2009



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<b>Schedule</b>	<b>Schedule Item</b>	<b>Schedule Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Flesch Certification		No
<b>Supporting Document</b>	Application		No
<b>Supporting Document</b>	Life & Annuity - Acturial Memo		No
<b>Form</b>	Policy Replacement Endorsement		Yes

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## Form Schedule

### Lead Form Number: TCL-NAIC VULREPLMT-END (2009)

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	TCL-NAIC VULREPLMT-END (2009)	Policy/Contract	Policy Replacement Endorsement	Initial		0.000	Replacement notice for filing (3).pdf
		Certificate: Amendment, Insert Page, Endorsement or Rider					



TIAA-CREF Life Insurance Company  
730 Third Avenue  
New York, NY 10017-3206  
212 490-9000 1-877-694-0305

## Policy Replacement Endorsement

Because your policy is the result of the replacement of coverage from a previous policy, the following contract changes are necessary to conform to state regulations:

**“Your right to cancel this policy”** provision will now read:

**During the right to cancel period, you have the right to cancel this policy and return it to us for a refund of your policy value as of the date you mailed or delivered your request to us, plus policy charges, if any, deducted from the premium you paid. The right to cancel period ends [30] days after you receive this policy. To cancel your policy, you must deliver or mail this policy to us, along with a cancellation notice in a form satisfactory to us. If you send it by mail, it must be postmarked before the end of the right to cancel period, properly addressed and postage prepaid.**

Secretary

President

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## Supporting Document Schedules

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Bypassed - Item:</b> Flesch Certification		
<b>Bypass Reason:</b> Not applicable		
<b>Comments:</b>		

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<b>Bypassed - Item:</b> Application		
<b>Bypass Reason:</b> Not applicable		
<b>Comments:</b>		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Bypassed - Item:</b> Life & Annuity - Acturial Memo		
<b>Bypass Reason:</b> Not applicable		
<b>Comments:</b>		