

SERFF Tracking Number: MASS-126216693 State: Arkansas
 Filing Company: Massachusetts Mutual Life Insurance Company State Tracking Number: 42881
 Company Tracking Number: BENEND10-2009
 TOI: L04I Individual Life - Term Sub-TOI: L04I.103 Renewable - Single Life - Fixed/Indeterminate Premium
 Product Name: BENEND10-2009
 Project Name/Number: BENEND10-2009/BENEND10-2009

Filing at a Glance

Company: Massachusetts Mutual Life Insurance Company

Product Name: BENEND10-2009

SERFF Tr Num: MASS-126216693 State: Arkansas

TOI: L04I Individual Life - Term

SERFF Status: Closed-Approved- Closed State Tr Num: 42881

Sub-TOI: L04I.103 Renewable - Single Life - Fixed/Indeterminate Premium

Co Tr Num: BENEND10-2009

State Status: Approved-Closed

Filing Type: Form

Reviewer(s): Linda Bird

Authors: Lynne Mahan, Robin Perez, Diana Violette, Jennifer Dube

Disposition Date: 07/21/2009

Date Submitted: 07/06/2009

Disposition Status: Approved-Closed

Implementation Date Requested:

Implementation Date:

State Filing Description:

General Information

Project Name: BENEND10-2009

Status of Filing in Domicile: Not Filed

Project Number: BENEND10-2009

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 07/21/2009

Explanation for Other Group Market Type:

State Status Changed: 07/21/2009

Deemer Date:

Created By: Jennifer Dube

Submitted By: Jennifer Dube

Corresponding Filing Tracking Number: BENEND10-2009

Filing Description:

Massachusetts Mutual Life Insurance Company

NAIC#: 435-65935

FEIN#: 04-1590850

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BENEND10-2009 Endorsement – Modification Of Policy

The above-captioned form is being submitted for your department’s review and approval. The form is described below. Final print copies of the form, along with any required certifications and filing fee, are also enclosed.

BENEND10-2009

This endorsement modifies the “Changing The Owner Or Beneficiary” and “Assigning This Policy” provisions. The endorsement has been created to comply with SEC Rule 12h-7, which requires companies to maintain the ability to refuse changes of ownership for variable life policies on a non-discriminatory basis.

When approved and implemented, the endorsement will be automatically attached to new issues of Flexible Premium Adjustable Variable Life Insurance, Policy form SL10-AR-9800 which was approved by the Department on November 16, 1998. This form is new and does not replace any form currently in use.

Company and Contact

Filing Contact Information

Jennifer Dube, Compliance Assistant JenDube@MassMutual.com
 1295 State Street 860-562-3685 [Phone] 23685 [Ext]
 MIP: M381 860-562-6109 [FAX]
 Springfield, MA 01111-0001

Filing Company Information

Massachusetts Mutual Life Insurance Company CoCode: 65935 State of Domicile: Massachusetts
 1295 State Street Group Code: 435 Company Type:
 MIP: M381 Group Name: State ID Number:
 Springfield, MA 01111 FEIN Number: 04-1590850
 (800) 767-1000 ext. [Phone]

Filing Fees

Fee Required? Yes
 Fee Amount: \$75.00
 Retaliatory? Yes

SERFF Tracking Number: MASS-126216693 State: Arkansas
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TOI: L041 Individual Life - Term Sub-TOI: L041.103 Renewable - Single Life -
Fixed/Indeterminate Premium
Product Name: BENEND10-2009
Project Name/Number: BENEND10-2009/BENEND10-2009
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Massachusetts Mutual Life Insurance Company	\$75.00	07/06/2009	28988889

SERFF Tracking Number: MASS-126216693 State: Arkansas
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Product Name: BENEND10-2009
Project Name/Number: BENEND10-2009/BENEND10-2009

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Linda Bird	07/21/2009	07/21/2009

SERFF Tracking Number: *MASS-126216693* *State:* *Arkansas*
Filing Company: *Massachusetts Mutual Life Insurance Company* *State Tracking Number:* *42881*
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Product Name: *BENEND10-2009*
Project Name/Number: *BENEND10-2009/BENEND10-2009*

Disposition

Disposition Date: 07/21/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: MASS-126216693 State: Arkansas
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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Letter		Yes
Form	Endorsement - Modification of Policy		Yes

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Form Schedule

Lead Form Number: BENEND10-2009

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	BENEND10-2009	Policy/Cont ract/Fratern al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Policy/Cont Endorsement - ract/Fratern Modification of Policy	Initial			SL10 12h-7 endorsement. 021809.pdf

**Endorsement
Modification Of Policy
Provisions**

The “**Changing The Owner Or Beneficiary**” provision in **Part 4.** of this policy is deleted in its entirety and restated to read as follows:

**Changing The
Owner Or
Beneficiary**

While the Insured is living, the Owner or any Beneficiary may be changed by Written Request. However, the Owner may not be changed without our approval. The consent of any Irrevocable Beneficiary is needed to change that Beneficiary designation. We do not limit the number of changes that may be made but we will refuse or accept any requested change of Owner on a non-discriminatory basis. Any change accepted by us will take effect as of the date the request is signed, even if the Insured’s death occurs before we receive it. Each change will be subject to any payment we made or action we took before receiving the Written Request.

The “**Assigning This Policy**” provision in **Part 4.** of this policy is deleted in its entirety and restated to read as follows:

**Assigning This
Policy**

This policy may not be assigned without our approval. We will refuse or accept any request to assign this policy on a non-discriminatory basis.

For any assignment we accept to be binding on us, we must receive the written request and a signed copy of the assignment at our Home Office or Administrative Office. We will not be responsible for the validity of any assignment. Unless otherwise specified by the Owner, any assignment accepted by us will take effect as of the date the notice of assignment is signed by the Owner, subject to any payments made or actions taken by us prior to receipt of this notice.

Once we receive and accept a signed copy of an assignment, the rights of the Owner and interest of any Beneficiary or any other person will be subject to the assignment. An assignment is subject to any policy debt. Policy debt is discussed in the **Right To Make Loans** provision in this Part.

MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY


SECRETARY

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Supporting Document Schedules

		Item Status:	Status Date:
Bypassed - Item:	Flesch Certification		
Bypass Reason:	not applicable		
Comments:			
		Item Status:	Status Date:
Bypassed - Item:	Application		
Bypass Reason:	not applicable		
Comments:			
		Item Status:	Status Date:
Satisfied - Item:	Letter		
Comments:			
Attachment:			
AR Cover letter.pdf			



July 6, 2009

Arkansas Department of Insurance
1200 W. Third Street
Little Rock, Arkansas 72201-1904

Re: Massachusetts Mutual Life Insurance Company
NAIC#: 435-65935
FEIN#: 04-1590850

BENEND10-2009 Endorsement – Modification Of Policy

Dear Commissioner:

The above-captioned form is being submitted for your department's review and approval. The form is described below. Final print copies of the form, along with any required certifications and filing fee, are also enclosed.

BENEND10-2009

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When approved and implemented, the endorsement will be automatically attached to new issues of Flexible Premium Adjustable Variable Life Insurance, Policy form SL10-AR-9800 which was approved by the Department on November 16, 1998. This form is new and does not replace any form currently in use.

Thank you for your assistance. Please contact me if you have any questions or comments.

Sincerely,

Jennifer Dube

Jennifer Dube
Compliance Assistant
(860) 562-3685 (telephone)
(860) 562-6109 (facsimile)
jenniferdube@massmutual.com