

SERFF Tracking Number: AMGN-126292215 State: Arkansas
Filing Company: American General Life and Accident Insurance Company State Tracking Number: 43430
Company Tracking Number: AGLA 09-9
TOI: L08 Life - Other Sub-TOI: L08.000 Life - Other
Product Name: Endorsement
Project Name/Number: Endorsement/AGLA 09-9

Filing at a Glance

Company: American General Life and Accident Insurance Company

Product Name: Endorsement

TOI: L08 Life - Other

Sub-TOI: L08.000 Life - Other

Filing Type: Form

SERFF Tr Num: AMGN-126292215 State: Arkansas

SERFF Status: Closed-Approved-
Closed State Tr Num: 43430

Co Tr Num: AGLA 09-9

Author: Hyacinth Prince

Date Submitted: 09/03/2009

State Status: Approved-Closed

Reviewer(s): Linda Bird

Disposition Date: 09/09/2009

Disposition Status: Approved-
Closed

Implementation Date:

Implementation Date Requested: On Approval

State Filing Description:

General Information

Project Name: Endorsement

Project Number: AGLA 09-9

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 09/09/2009

Deemer Date:

Submitted By: Hyacinth Prince

Filing Description:

AGLA 09-9 Endorsement

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments: Submitted to
Domicile state of Tennessee.

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 09/09/2009

Created By: Hyacinth Prince

Corresponding Filing Tracking Number:

The above form is being submitted for your consideration and approval. It is new and does not replace any form previously approved by your department. The referenced form has been submitted to our domicile state of Tennessee.

Endorsement AGLA 09-9 will be used with individual, nonparticipating universal life policies to change the Death Benefit

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Compliance Test to the Cash Value Accumulation Test. This endorsement effectively removes the Death Benefit factor provision from the policy, adds a Death Benefit Compliance Test provision, and revises the Death Benefit Option provision and the Maximum Net Amount At Risk provision.

If I may provide any additional information, please contact me as shown.

Company and Contact

Filing Contact Information

Kathryn Mitchell, Manager kathryn_mitchell@aigag.com
 American General Center 615-749-1139 [Phone]
 Mail Stop 456S 615-749-2521 [FAX]
 Nashville, TN 37250-0001

Filing Company Information

American General Life and Accident Insurance CoCode: 66672 State of Domicile: Tennessee
 Company
 American General Center Group Code: 12 Company Type:
 Nashville, TN 37250-0001 Group Name: AIG State ID Number:
 (615) 749-1139 ext. [Phone] FEIN Number: 62-0306330

Filing Fees

Fee Required? Yes
 Fee Amount: \$20.00
 Retaliatory? No
 Fee Explanation:
 1 form x 20.00 = \$20.00
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American General Life and Accident Insurance Company	\$20.00	09/03/2009	30330910

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Linda Bird	09/09/2009	09/09/2009

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Disposition

Disposition Date: 09/09/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document	Compliance Certification		Yes
Form	Endorsement		Yes

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Form Schedule

Lead Form Number:

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	AGLA 09-9	Certificate	Endorsement Amendmen t, Insert Page, Endorseme nt or Rider	Initial		50.800	AGLA 09-9.pdf

ENDORSEMENT

This Endorsement has been added to and made a part of the Policy to which it is attached.

The Death Benefit Factor provision of the Policy is hereby removed.

The following provision entitled "Death Benefit Compliance Test" is hereby added to the Policy following the Death Benefit Proceeds provision:

Death Benefit Compliance Test. Death Benefit Compliance tests are used to determine a Policy's qualification as life insurance under applicable tax laws. The Death Benefit Compliance Test for the Policy to which this Endorsement is attached is the Cash Value Accumulation Test (CVAT). The CVAT will continue to be the Death Benefit Compliance Test while the Policy to which this Endorsement is attached remains in force, and may not be changed at any time.

The Death Benefit Option provision of this Policy is hereby removed and the following provision added:

Death Benefit Option. The Death Benefit Option which You have chosen is shown in the Policy Data on Page 1 as either Option A or Option B.

Option A. If You have chosen Option A, the Death Benefit Amount will be the greater of:

- (a) the Specified Amount on the date of death; or
- (b) the greater of the Accumulation Value or the Cash Value on the date of death multiplied by the applicable CVAT Death Benefit Corridor Rate, as shown on the Policy Schedule.

Option B. If You have chosen Option B, the Death Benefit Amount will be the greater of:

- (a) the Specified Amount plus the Accumulation Value on the date of death; or
- (b) the greater of the Accumulation Value or the Cash Value on the date of death multiplied by the applicable CVAT Death Benefit Corridor Rate, as shown on the Policy Schedule.

The Maximum Net Amount At Risk provision is hereby removed from the Policy and the following provision added:

Maximum Net Amount At Risk. We reserve the right to refund any premium that would cause an immediate increase in the Net Amount at Risk. Any changes You request under the Policy that would result in an immediate increase in the Net Amount at Risk may require evidence of insurability. We may automatically process a partial surrender or reduce the Death Benefit Amount, both of which may have federal tax consequences for You, if the Net Amount at Risk exceeds Our limitations.

The Rights Reserved By Us provision is hereby removed from the Policy and the following provision added:

Rights Reserved By Us. We reserve the right to decline any change under the Policy that We determine would cause this contract to fail to be treated as life insurance under applicable tax law. This includes partial surrenders, changing the Specified Amount, and changing the Death Benefit Option.

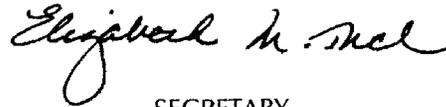
(Continued on Back)

Upon notice to You, this Policy may be modified by Us, but only if such modification is necessary to make any changes as required by the Internal Revenue Code or by any other applicable law, regulation, or interpretation in order to continue treatment of this Policy as life insurance.

When required by law, We will obtain Your approval of changes, and We will gain approval from any appropriate regulatory authority.

The Effective Date of this Endorsement is the Date of Issue of the Policy to which it is attached.

AMERICAN GENERAL LIFE AND ACCIDENT INSURANCE COMPANY

A handwritten signature in black ink, appearing to read "Elizabeth H. Mel". The signature is written in a cursive style with a large initial "E".

SECRETARY

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Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification Comments: Attachment: ARCERT1.pdf		

	Item Status:	Status Date:
Bypassed - Item: Application Bypass Reason: Not applicable to this filing. Comments:		

	Item Status:	Status Date:
Satisfied - Item: Compliance Certification Comments: Attachment: ARCERT5.pdf		

AMERICAN GENERAL LIFE AND ACCIDENT INSURANCE COMPANY

ARKANSAS CERTIFICATION

Subject: AGLA 09-9 Endorsement

This is to certify that, to the best of my knowledge and belief, the above form complies with the requirements of Ark. Stat. Ann. 66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Language Simplification Act; the Flesch score is as follows:

Form Number
AGLA 09-9

Flesch Score
50.8



Kerry Kixmiller FSA, MAAA
Vice President

DATE September 3, 2009

AMERICAN GENERAL LIFE AND ACCIDENT INSURANCE COMPANY

ARKANSAS CERTIFICATION

Subject: AGLA 09-9 Endorsement

This is to certify that the above form, to the best of my knowledge and belief, meets the provision of Arkansas Rule and Regulation 19 as well as all applicable requirements of the State of Arkansas Department of Insurance.

Kerry Kixmiller, FSA, MAAA
Vice President

DATE: September 3, 2009