

SERFF Tracking Number: AMGN-126746145 State: Arkansas  
Filing Company: The United States Life Insurance Company in the State Tracking Number: 46909  
City of New York  
Company Tracking Number: L8204-AIL  
TOI: L08 Life - Other Sub-TOI: L08.000 Life - Other  
Product Name: L8204-AIL - AI Life Merger Endorsement  
Project Name/Number: L8204-AIL - AI Life Merger Endorsement/

## Filing at a Glance

Company: The United States Life Insurance Company in the City of New York

Product Name: L8204-AIL - AI Life Merger SERFF Tr Num: AMGN-126746145 State: Arkansas

Endorsement

TOI: L08 Life - Other

SERFF Status: Closed-Approved- State Tr Num: 46909  
Closed

Sub-TOI: L08.000 Life - Other

Co Tr Num: L8204-AIL

State Status: Approved-Closed

Filing Type: Form

Reviewer(s): Linda Bird

Author: Karyn Enriquez

Disposition Date: 10/05/2010

Date Submitted: 09/27/2010

Disposition Status: Approved-  
Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

## General Information

Project Name: L8204-AIL - AI Life Merger Endorsement

Status of Filing in Domicile: Pending

Project Number:

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: 10/05/2010

Explanation for Other Group Market Type:

State Status Changed: 10/05/2010

Deemer Date:

Created By: Karyn Enriquez

Submitted By: Karyn Enriquez

Corresponding Filing Tracking Number: L8204-  
AIL

Filing Description:

Re: Form L8204-AIL – Merger Endorsement

Merger of: American International Life Assurance Company

Into: The United States Life Insurance Company in the City of New York

This form is being submitted for your consideration and approval. This form is new and does not replace any form

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previously submitted to or approved by the Department.

No part of this filing contains any unusual or possibly controversial items from normal company or industry standards.

American International Life Assurance Company of New York is being merged with and into The United States Life Insurance Company in the City of New York (US Life) effective December 31, 2010. US Life is assuming all policies, certificates and annuity contracts issued by American International Life Assurance Company of New York. US Life will be filing information with your department's company licensing area after the merger is approved by the companies' domiciliary state, New York.

The merger effective date will be December 31, 2010. Form L8204-AIL is a Merger Endorsement that will be mailed or delivered to all policy, contract or certificate holders of the company being assumed when the merger becomes effective.

The form was scored for readability and achieved a Flesch score of 50.96.

Unless otherwise informed, we reserve the right to alter the layout of the enclosed forms, including sequential ordering of the provisions, and type font, size and color.

If you have any questions or comments, please feel free to contact me.

## Company and Contact

### Filing Contact Information

Karyn Enriquez, karyn.enriquez@aglife.com  
2929 Allen Parkway 713-831-2219 [Phone]  
Mail Stop A38-40 713-342-7550 [FAX]  
Houston, TX 77019

### Filing Company Information

The United States Life Insurance Company in CoCode: 70106 State of Domicile: New York  
the City of New York  
830 Third Avenue Group Code: 12 Company Type:  
7th Floor Group Name: AIG State ID Number:  
New York, NY 10022 FEIN Number: 13-5459480  
(713) 831-3508 ext. [Phone]

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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 #
The United States Life Insurance Company in the City of New York	\$50.00	09/27/2010	39922649

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Linda Bird	10/05/2010	10/05/2010

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## Disposition

Disposition Date: 10/05/2010

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
Form	Merger Endorsement		Yes

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## Form Schedule

Lead Form Number: L8204-AIL

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	L8204-AIL	Policy/Cont Merger Endorsement Initial ract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider			50.960	L8204-AIL_AI_LIFE_USL_MERGE_R_ENDORSEMENT.pdf

**THE UNITED STATES LIFE INSURANCE COMPANY IN THE CITY OF NEW YORK**

John Doe  
1234 Main Street  
Anytown, California

Policy Number: 123456

Company: AMERICAN INTERNATIONAL LIFE ASSURANCE COMPANY OF NEW YORK

**MERGER ENDORSEMENT**

This endorsement has been issued as a result of a merger on **December 31, 2010** of:

**AMERICAN INTERNATIONAL LIFE ASSURANCE COMPANY OF NEW YORK**, a New York life insurance corporation;

with and into

**THE UNITED STATES LIFE INSURANCE COMPANY IN THE CITY OF NEW YORK**, a New York life insurance corporation.

This is to certify that The United States Life Insurance Company in the City of New York hereby assumes all risks, duties, and obligations as of the date of the merger for the insurance policy identified above issued by American International Life Assurance Company of New York, the same as if it had been issued originally by The United States Life Insurance Company in the City of New York. The risks, duties, and obligations as well as the terms and benefits under the policy identified above have not and will not change as a result of this merger.

This endorsement is effective **December 31, 2010**.

The Home Office of The United States Life Insurance Company in the City of New York is located at One World Financial Center, 200 Liberty Street, New York, New York 10281.

Signed at the Administrative Offices of The United States Life Insurance Company in the City of New York and American International Life Assurance Company of New York.

**The United States Life Insurance Company  
in the City of New York**



President



Secretary

**American International Life Assurance  
Company of New York**



President



Secretary

**IMPORTANT**

This endorsement becomes a part of your policy and should be attached to your policy. All inquiries should be directed to the Administrative Office of The United States Life Insurance Company in the City of New York **[2727-A Allen Parkway, Houston, Texas 77019.]**

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## Supporting Document Schedules

**Item Status:**

**Status**

**Date:**

**Satisfied - Item:** Flesch Certification

**Comments:**

**Attachments:**

AR Cert\_Comp.pdf

AR Flesch Certification USL.pdf

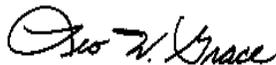
AR Cert\_Comp - Signed.pdf

**AMERICAN GENERAL LIFE INSURANCE COMPANY**

**ARKANSAS CERTIFICATION OF COMPLIANCE**

		Y/N	NA
Arkansas Code 23-79-138	Required Policy Information		X
Rule and Regulation 49	Life And Disability Insurance Guaranty Fund Notices		X
Rule and Regulation 19	Unfair Sex Discrimination in the Sale of Insurance		X
Rule and Regulation 33	<b>Variable Life Insurance</b>		X
	Licensing and approval to do business		X
	Qualification of Insurer to Issue Variable Life Insurance		X
	Article IV. Insurance Policy Requirements		X
	Article V. Reserve Liabilities for Variable Life Insurance		X
	Article VI. Separate Accounts		X
	Article VII. Information Furnished to Applicants		X
	Article VIII. Applications		X
	Article IX. Reports to Policyholders		X
	Article X. Foreign Companies		X
	Article XI. Qualifications of Agents for the Sale of Variable Life Insurance		X
	Article XII. Separability Article		X
	Article XIII. Supersession of Conflicting Regulations		X
Rule and Regulation 34	<b>Universal Life Insurance (Sections 1-12)</b>		X
	Valuation		X
	Nonforfeiture		X
	Mandatory Policy Provisions		X
	Disclosure Requirements		X
	Periodic Disclosure to Policyowner		X
	Interest Indexed Universal Life Policies		X
Severability		X	
Arkansas Bulletin 11-83	<b>Guidelines for non-guaranteed costs on participating and non-participating life insurance</b>		X
	<b>Current and Guaranteed Cost Of Insurance Rates</b>		X
	<b>Minimum/Maximum Interest Rate Range</b> Minimum Rate: Maximum Rate:		X

I hereby certify that form(s) L8204-AIL is in compliance with those relevant Arkansas laws and regulations sited above.

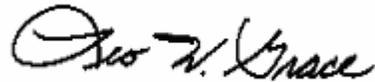


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Leo W. Grace  
Director, Product Development

THE UNITED STATES LIFE INSURANCE COMPANY IN THE CITY OF NEW YORK

CERTIFICATION

This is to certify that the attached Form Number L8204-AII achieved a Flesch Reading Score of 50.96 and complies with the requirements of Arkansas Stat. Ann. §66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Language Simplification Act.



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Leo W. Grace, FLMI  
Vice President

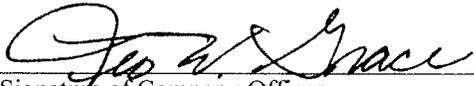
September 22, 2010  
Date

**Certificate of Compliance with  
Arkansas Rule and Regulation 19**

Insurer: United States Life Insurance Company in the City of New York

Form Number(s): L8204-AIL

I hereby certify that the filing above meets all applicable Arkansas requirements including the requirements of Rule and Regulation 19.



\_\_\_\_\_  
Signature of Company Officer

Leo W. Grace

\_\_\_\_\_  
Name

Vice President

\_\_\_\_\_  
Title

September 22, 2010

\_\_\_\_\_  
Date