

SERFF Tracking Number: NYLC-126872697 State: Arkansas
Filing Company: New York Life Insurance and Annuity Corporation State Tracking Number: 47115
Company Tracking Number: 1041C-2.2
TOI: L06G Group Life - Variable Sub-TOI: L06G.002 Single Life - Flexible Premium
Product Name: PPVUL Data Page - Group
Project Name/Number: PPVUL Data Page - Group/1041C-2

Filing at a Glance

Company: New York Life Insurance and Annuity Corporation

Product Name: PPVUL Data Page - Group

SERFF Tr Num: NYLC-126872697 State: Arkansas

TOI: L06G Group Life - Variable

SERFF Status: Closed-Approved-
Closed State Tr Num: 47115

Sub-TOI: L06G.002 Single Life - Flexible
Premium

Co Tr Num: 1041C-2.2

State Status: Approved-Closed

Filing Type: Form

Reviewer(s): Linda Bird

Authors: Team Leader, Robert
Williams III

Disposition Date: 10/27/2010

Date Submitted: 10/22/2010

Disposition Status: Approved-
Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: PPVUL Data Page - Group

Status of Filing in Domicile:

Project Number: 1041C-2

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Group

Submission Type: New Submission

Group Market Size: Small

Overall Rate Impact:

Group Market Type: Discretionary

Filing Status Changed: 10/27/2010

Explanation for Other Group Market Type:

State Status Changed: 10/27/2010

Deemer Date:

Created By: Robert Williams III

Submitted By: Robert Williams III

Corresponding Filing Tracking Number:

Filing Description:

RE: New York Life Insurance and Annuity Corporation

NAIC #: 82691596

Form: 1041C -2.2

FEIN #: 13-3044743

Dear Commissioner:

SERFF Tracking Number: NYLC-126872697 State: Arkansas
Filing Company: New York Life Insurance and Annuity Corporation State Tracking Number: 47115
Company Tracking Number: 1041C-2.2
TOI: L06G Group Life - Variable Sub-TOI: L06G.002 Single Life - Flexible Premium
Product Name: PPVUL Data Page - Group
Project Name/Number: PPVUL Data Page - Group/1041C-2

We are enclosing for your Department's approval revised data page 2.2 (1041C -2.2) to be used with policy 310-41C, approved on 8/13/2010. We previously did not bracket the "Smoker Distinct" language in the Mortality Table reference and would now like to do so. We revised the language on item #35 in the Memorandum of Variable Material to reflect this change.

In addition, we are sending you revised Actuarial Memoranda to clarify the applicable mortality table for juvenile and non-juvenile policies. The original AM stated that the mortality table was the Smoker and Nonsmoker versions of the 2001 CSO table. While this is true for policies issued to individuals 18 and older, the mortality table for policies issued to individuals 17 and younger is the Composite version.

The revised actuarial memorandums are also enclosed.

I hope that this information is satisfactory and that we can receive your Department's approval of this submission as soon as possible.

If you have any questions, please feel free to contact Robert Williams III at 1-888-695-4748 ext. 3449 or via email at rwilliamsiii@newyorklife.com.

Sincerely,

Linda E. LoPinto
Corporate Vice President
Individual Life Department
Encl.

Company and Contact

Filing Contact Information

Robert Williams III, Contract Associate III
51 Madison Avenue
Room 606
New York, NY 10010

Robert_Williams_III@nyl.com
212-576-3449 [Phone]
212-447-4141 [FAX]

Filing Company Information

New York Life Insurance and Annuity Corporation
51 Madison Ave

CoCode: 91596
Group Code: 826

State of Domicile: Delaware
Company Type: Life

SERFF Tracking Number: NYLC-126872697 State: Arkansas
 Filing Company: New York Life Insurance and Annuity Corporation State Tracking Number: 47115
 Company Tracking Number: 1041C-2.2
 TOI: L06G Group Life - Variable Sub-TOI: L06G.002 Single Life - Flexible Premium
 Product Name: PPVUL Data Page - Group
 Project Name/Number: PPVUL Data Page - Group/1041C-2
 New York, NY 10010 Group Name: NYLIC State ID Number:
 (212) 576-4809 ext. [Phone] FEIN Number: 13-3044743

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	10/22/2010	41066089

SERFF Tracking Number: NYLC-126872697

State: Arkansas

Filing Company: New York Life Insurance and Annuity Corporation

State Tracking Number: 47115

Company Tracking Number: 1041C-2.2

TOI: L06G Group Life - Variable

Sub-TOI: L06G.002 Single Life - Flexible Premium

Product Name: PPVUL Data Page - Group

Project Name/Number: PPVUL Data Page - Group/1041C-2

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	10/27/2010	10/27/2010

SERFF Tracking Number: NYLC-126872697

State: Arkansas

Filing Company: New York Life Insurance and Annuity Corporation

State Tracking Number: 47115

Company Tracking Number: 1041C-2.2

TOI: L06G Group Life - Variable

Sub-TOI: L06G.002 Single Life - Flexible Premium

Product Name: PPVUL Data Page - Group

Project Name/Number: PPVUL Data Page - Group/1041C-2

Disposition

Disposition Date: 10/27/2010

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: NYLC-126872697

State: Arkansas

Filing Company: New York Life Insurance and Annuity Corporation

State Tracking Number: 47115

Company Tracking Number: 1041C-2.2

TOI: L06G Group Life - Variable

Sub-TOI: L06G.002 Single Life - Flexible Premium

Product Name: PPVUL Data Page - Group

Project Name/Number: PPVUL Data Page - Group/1041C-2

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Life & Annuity - Actuarial Memo		No
Supporting Document	Redacted Actuarial Memorandum		No
Supporting Document	Statement of Variability		Yes
Supporting Document	Annotated Pages		Yes
Form	Certificate Data Page 2.2		Yes

SERFF Tracking Number: NYLC-126872697

State: Arkansas

Filing Company: New York Life Insurance and Annuity Corporation

State Tracking Number: 47115

Company Tracking Number: 1041C-2.2

TOI: L06G Group Life - Variable

Sub-TOI: L06G.002 Single Life - Flexible Premium

Product Name: PPVUL Data Page - Group

Project Name/Number: PPVUL Data Page - Group/1041C-2

Form Schedule

Lead Form Number: 1041C-2.2

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	1041C-2.2	Data/Declaration Pages2.2	Certificate Data Page Revised	Replaced Form #: Previous Filing #:	0.000	Group DP.pdf

Certificate Number – [66 000 000]

Insured – [John Doe]

ADDITIONAL BENEFITS	AMOUNT
[Initial Supplementary Term Insurance Benefit	[\$100,000]]
[Initial Target Face Amount	[\$2,175,000]]
[Initial Scheduled Supplementary Term Insurance Benefit	[\$50,000]]
[Schedule of Supplementary Term Insurance Benefit	See Page 2.5]]

The mortality table referred to in subsection 9.20 is the 2001 Commissioners' Standard Ordinary, ANB, [Sex Distinct, Smoker Distinct] Tables of Mortality.

SERFF Tracking Number: NYLC-126872697

State: Arkansas

Filing Company: New York Life Insurance and Annuity Corporation

State Tracking Number: 47115

Company Tracking Number: 1041C-2.2

TOI: L06G Group Life - Variable

Sub-TOI: L06G.002 Single Life - Flexible Premium

Product Name: PPVUL Data Page - Group

Project Name/Number: PPVUL Data Page - Group/1041C-2

Supporting Document Schedules

Item Status:

**Status
Date:**

Satisfied - Item: Statement of Variability

Comments:

Attachment:

MOV Group 310-41C.pdf

Item Status:

**Status
Date:**

Satisfied - Item: Annotated Pages

Comments:

Attachment:

Annotated Group 310-41C.pdf

New York Life Insurance and Annuity Corporation
Memorandum of Variable Material for Policy Form 310-41C
July 28, 2010

Variable material is bracketed and italicized on the Front and Back Cover and in the Data Pages of the Policy.

Officer signatures and titles may vary. In the event the title of an officer signing the policy form changes, any new title utilized will be the title of an officer of the company.

FORMS 310-41C

- | | |
|--|--|
| 1. Insured's Name: | Insured's name as it appears on application. |
| 2. Age: | 15-85 |
| 3. Sex: | Insured's sex as it appears on application. Field will only appear on sex-distinct policies. |
| 4. Class of Risk: | SELECT PREFERRED
PREFERRED
SELECT STANDARD
STANDARD
NON-SMOKER
NON-SMOKER CLASS 2-13
STANDARD CLASS 2-13 |
| 5. Owner: | Owner name(s) as they appear on application |
| 6. Policy Number: | As automated systems assign. |
| 7. Policy Date: | Will be the 15 th of the month based on when the policy date is selected by the policy owner. |
| 8. Issue Date: | Date in which Policy is issued. |
| 9. Eligible Investor Qualification: | 5 Variations including: 1. Accredited Investor, 2. Accredited Investor and Qualified Purchaser, 3. Accredited Investor and Qualified Eligible Person, 4. Accredited Investor and Qualified Client and 5. Accredited Investor and Qualified Eligible Person and Qualified Client. |
| 10. Life Insurance Benefit Option: | Options 1, 2, or 3. |
| 11. Life Insurance Qualification Test: | CVAT or Guideline Premium Test. |
| 12. Initial Face Amount: | The amount the Policyowner applies for and is approved for. |
| 13. Initial Premium: | Varies based on Insured's Policy face amount, age, underwriting class and sex- \$250,000 minimum. |
| 14. Target Premium: | Varies based on face amount. |
| 15. Planned Premiums payable at annual intervals: | Varies based on amount client elects to pay and selected intervals of premium payment, quarterly, semi-annually and annually. |
| 16. Minimum Redemption: | Varies based on Fund requirements as to redemption. |
| 17. Minimum Transfers: | Varies based on Fund requirements as to transfers. |
| 18. Minimum Balance: | Varies based on Fund requirements as to minimum balance. |
| 19. Policy Anniversary on which Insured Is age 120: | Date varies by Insured's date of birth. |
| 20. Additional Flat Extras per month: | Will appear if temporary flat extra is applicable. Varies based on Insured's age, underwriting class and sex. |
| 21. Period of Additional Flat Extras: | Will appear if temporary flat extra is applicable. Varies based on Insured's underwriting class. |
| 22. Cash Reserve Account: | The Cash Reserve Account can be referred to as "separate account" or "Mainstay VP". |
| 23. Separate Account: | The Separate Account can be one or more than one of the accounts listed below: |

- Private Placement Variable Universal Life Separate Account I
- Private Placement Variable Universal Life Separate Account II
- Private Placement Variable Universal Life Separate Account VI
- Private Placement Variable Universal Life Separate Account VII
- Private Placement Variable Universal Life Separate Account VIII
- Private Placement Variable Universal Life Separate Account X
- Private Placement Variable Universal Life Separate Account XVIII
- Private Placement Variable Universal Life Separate Account XXIX

- Private Placement Variable Universal Life Separate Account XXX
- Private Placement Variable Universal Life Separate Account XXXI

Any change to the subaccounts will be submitted for approval in a revised List of Funds.

- 24. Service Office:** Our Service Office is presently located in New York, NY. This address and telephone number could change if the Company decides to relocate its' service office.
- 25. Monthly Cost of any Term Riders footnote:** Will appear if any of the Term Riders is selected at application.
- 26. Maximum Charge:** Will vary year to year. Range: 0-3.25%.
- 27. State tax Charge:** Will vary year to year. Range: 0-2%.
- 28. Federal Tax Charge:** Will vary year to year. Range: 0-1.25%.
- 29. Monthly Mortality and Expense Charge:** Will vary year to year. Range: 0-0.75%.
- 30. Processing Charge:** Will vary year to year. Range: \$0-\$100.
- 31. Initial Supplementary Term Insurance Benefit:** Will appear if Scheduled Supplementary Term Rider is selected at application. Amount will vary based on amount applied for in the application.
- 32. Initial Target Face Amount:** Will appear if Scheduled Supplementary Term Rider or Supplementary Term Rider is selected at application. Amount will vary based on amount applied for in the application.
- 33. Initial Scheduled Supplementary Term Insurance Benefit:** Will appear if Scheduled Supplementary Term Rider is selected at application. Amount will vary based on amount applied for in the application.
- 34. Schedule of Supplementary Term Insurance Benefit:** Will appear if Scheduled Supplementary Term Rider is selected at application. Amount will vary based on amount applied for in the application.
- 35. Commissioners' 2001 Tables of Mortality:** Will vary based on Insured's underwriting class and sex. (Sex Distinct or Unisex (80% Male), Smoker Distinct or Composite)
- 36. Smoker Distinct Table** Will vary based on Insured's Underwriting (Smoker, Non-Smoker)
- 37. Table of Guaranteed Maximum Monthly Cost of Insurance Rates For Policy:** Will vary based on Insured's underwriting class and sex.
- 38. Table of Percentages For Life Insurance Benefit For Compliance with IRC Section 7702 CVAT:** Will vary based on Insured's underwriting class and sex.
- 39. Table of Guaranteed Maximum Monthly Term Rates For Rider:** Will vary based on Insured's underwriting class and sex.
- 40. Table of Scheduled Face Amount Changes For The Scheduled Supplementary Term Insurance Rider (SSTR):** Will appear if Scheduled Supplementary Term Rider is selected at application. Schedule will vary based on schedule selected in the application.

Any use of variability shall be administered in a uniform and non-discriminatory manner and shall not result in unfair discrimination.

Insured – #1[*John Doe*]

Insured's Age #3[and Sex] At Issue – #2[35] #3[*Male*]

Insured's Class of Risk – #4[*Non-Smoker*]

Owner – #5[*John Doe*]

Certificate Number – #6[66 000 000]

Certificate Date – #7[*SEPTEMBER 15,2010*]

Issue Date – #8[*SEPTEMBER 15, 2010*]

Beneficiary/Owner as designated in the application unless changed as provided in the Certificate.

Eligible Investor Qualification	#9 [<i>Accredited Investor</i>]
Life Insurance Benefit Option	#10 [1]
Life Insurance Qualification Test	#11 [<i>Guideline Premium Test</i>]
Certificate Load Option	Standard
Initial Face Amount	#12 [<i>\$2,075,000</i>]
Initial Premium	#13 [<i>\$250,000</i>]
Target Premium	#14 [<i>\$54,469</i>]
Planned Premiums payable* at [annual] intervals:	#15 [<i>\$155,000</i>]
Minimum Face Amount	<i>\$1,000,000</i>
Minimum Decrease	<i>\$10,000</i>
Minimum Increase	<i>\$100,000</i>
Minimum Premium Payment	<i>\$100,000</i>
Minimum Redemption	#16[<i>\$100,000</i>]
Minimum Transfer	#17[<i>\$100,000</i>]
Minimum Balance	#18 [<i>\$100,000</i>]

* Premiums may not be paid on or after the Certificate Anniversary on which the insured is age 120, which is #19 [*October 15, 2095*]. Coverage will expire when the Cash Surrender Value is insufficient to cover the monthly deduction charges. **Paying the Planned Premiums shown above does not guarantee that the Certificate will remain in effect.** The period for which the Certificate and coverage will continue in effect will depend upon: (1) the amount, timing, and frequency of premium payments; (2) changes in the Life Insurance Benefit Option or the Face Amount; (3) the investment performance of the Investment Divisions of the Separate Account; (4) changes in the Monthly Cost of Insurance deductions for the Certificate and in the Monthly Cost of Riders attached to the Certificate, and in any other fee deductions; and (5) loan and partial surrender activity.

#20[Additional Flat Extras per month: #20 [\$0.10]

#21 [Period of Additional Flat Extras: #21 [3 Years]

Monthly Deduction Day is the fifteenth day of each calendar month.

Certificate Months are measured from the Monthly Deduction Day.

Certificate Years and Certificate Anniversaries are measured from the Certificate Date.

#22[The Investment Division used for the Cash Reserve Account referred to in the Policy is [Mainstay VP Cash Management]]

The Separate Account referred to in the Certificate consists of:

*#23[Private Placement Variable Universal Life Separate Account I
Private Placement Variable Universal Life Separate Account II
Private Placement Variable Universal Life Separate Account VI
Private Placement Variable Universal Life Separate Account VII
Private Placement Variable Universal Life Separate Account VIII
Private Placement Variable Universal Life Separate Account X
Private Placement Variable Universal Life Separate Account XVIII
Private Placement Variable Universal Life Separate Account XXIX*

*Private Placement Variable Universal Life Separate Account XXX
Private Placement Variable Universal Life Separate Account XXXI]*

Valuation Interest Rate 4.00%

Service Office: [New York Life Insurance and Annuity Corporation
(A Delaware Corporation)
#24 [Advance Markets Services
P.O. Box 922
New York, N. Y. 10159-0922
Telephone: (866) 695-3289]

Neither the Certificate nor the Separate Account has been registered with the Securities and Exchange Commission under the Securities Act of 1933, as amended (“1933 Act”), or the Investment Company Act of 1940, as amended (“1940 Act”). The Certificate is being sold in reliance on an exemption under the 1933 Act for sales of securities in private placements to Accredited Investors as defined under Regulation D. The Certificate may not be sold or otherwise transferred except as permitted under the 1933 Act pursuant to registration or an exemption. All transfers are subject to Our prior consent. You must be an Accredited Investor under the 1933 Act [and, if applicable, a Qualified Purchaser under the 1940 Act and, if applicable, a Qualified Eligible Person as defined in Rule 4.7 under the Commodity Exchange Act, as amended, and, if applicable, a Qualified Client within the meaning of Rule 205-3 of the Investment Advisers Act of 1940] to make payments into the Certificate or to make transfers among the Investment Divisions. However, You may exchange the Certificate for a registered Certificate or surrender the Certificate and receive the Cash Surrender Value.

TABLE OF MAXIMUM CHARGES

The following charges are not prorated for any portion of the Certificate Month.

MONTHLY DEDUCTION CHARGES CONSIST OF:

- A Monthly Contract Charge not to exceed \$15.00 per month in all Certificate Years.
- A Monthly Underwriting and Issue Charge for first 10 Certificate Years not to exceed amount on page 2.2A.
- Monthly Cost of Insurance not to exceed amount on page 2.2B.
- Monthly Additional Flat Extras in the amount on page 2.
- #25[Monthly cost of any term riders not to exceed amount on page 2.4.]

OTHER CHARGES AGAINST THE CERTIFICATE:

- Each premium is subject to a Sales Expense Charge as follows: (1) During the first 10 Certificate Years, a maximum #26[3.25%] charge will apply to all premiums paid up to the Target Premium. Once the Target Premium for the year has been reached, no charge will apply to any additional premiums paid during those years. (2) After the first 10 Certificate Years, no charge will apply to any premiums.

The Target Premium, as shown on page 2, is determined from the Initial Face Amount of the Certificate and the Insured's Age, Sex, and Class of Risk at issue. Any change to the Certificate which results in a change to the Face Amount will change the Target Premium.

- State Tax Charge of #27[2.0%] of each premium. This amount is subtracted from each premium. We reserve the right to change this percentage to conform to changes in the law.
- Federal Tax Charge of #28[1.25%] of each premium. This amount is subtracted from each premium. We reserve the right to change this percentage to conform to changes in the law.
- Monthly Mortality and Expense Charges against the Separate Account not to exceed an annualized rate of #29[0.75%] of the net asset value.
- A Processing Charge of #30[\$100] applied to any transfer after the first twelve in a Certificate Year.

We reserve the right to make a charge for separate account federal income tax liabilities if the law should change to require taxation of separate accounts.

Certificate Number – #6[66 000 000]

Insured – #1 [John Doe]

ADDITIONAL BENEFITS

AMOUNT

#31[Initial Supplementary Term Insurance Benefit	[\$100,000]]
#32 [Initial Target Face Amount	[\$2,175,000]]
#33 [Initial Scheduled Supplementary Term Insurance Benefit	[\$50,000]]
#34[Schedule of Supplementary Term Insurance Benefit	See Page 2.5]]

The mortality table referred to in subsection 9.20 is the 2001 Commissioners' Standard Ordinary, ANB, #35[Sex Distinct, Smoker Distinct] Tables of Mortality.

**TABLE OF GUARANTEED MONTHLY UNDERWRITING AND ISSUE RATES
FOR CERTIFICATE
(PER \$1,000)**

ISSUE AGE		ISSUE AGE	
15	.025	51	.050
16	.025	52	.050
17	.025	53	.050
18	.025	54	.050
19	.025	55	.050
20	.025	56	.050
21	.025	57	.050
22	.025	58	.050
23	.025	59	.050
24	.025	60	.050
25	.025	61	.050
26	.030	62	.050
27	.035	63	.050
28	.040	64	.050
29	.045	65	.050
30	.050	66	.050
31	.050	67	.050
32	.050	68	.050
33	.050	69	.050
34	.050	70	.050
35	.050	71	.050
36	.050	72	.050
37	.050	73	.050
38	.050	74	.050
39	.050	75	.050
40	.050	76	.050
41	.050	77	.050
42	.050	78	.050
43	.050	79	.050
44	.050	80	.050
45	.050	81	.050
46	.050	82	.050
47	.050	83	.050
48	.050	84	.050
49	.050	85	.050
50	.050		

**TABLE OF GUARANTEED MAXIMUM MONTHLY COST OF INSURANCE RATES
FOR CERTIFICATE
(PER \$1,000)**

#3[MALE]

The rates shown below are based on the 2001 CSO #36[Nonsmoker] Table of Mortality

ATTAINED AGE		ATTAINED AGE		ATTAINED AGE	
#37[15	0.05	55	0.46	95	26.24
16	0.06	56	0.51	96	28.21
17	0.07	57	0.57	97	30.35
18	0.08	58	0.62	98	32.71
19	0.08	59	0.68	99	35.30
20	0.08	60	0.75	100	38.18
21	0.08	61	0.83	101	40.53
22	0.08	62	0.93	102	43.12
23	0.08	63	1.05	103	45.97
24	0.08	64	1.17	104	49.11
25	0.08	65	1.30	105	52.55
26	0.09	66	1.43	106	56.37
27	0.09	67	1.56	107	60.64
28	0.09	68	1.71	108	65.44
29	0.09	69	1.85	109	70.86
30	0.09	70	2.03	110	77.04
31	0.08	71	2.24	111	83.33
32	0.08	72	2.50	112	83.33
33	0.09	73	2.79	113	83.33
34	0.09	74	3.08	114	83.33
35	0.09	75	3.41	115	83.33
36	0.10	76	3.77	116	83.33
37	0.10	77	4.19	117	83.33
38	0.11	78	4.68	118	83.33
39	0.11	79	5.25	119	83.33]
40	0.12	80	5.87		
41	0.13	81	6.59		
42	0.14	82	7.35		
43	0.16	83	8.18		
44	0.18	84	9.10		
45	0.19	85	10.14		
46	0.21	86	11.32		
47	0.23	87	12.62		
48	0.24	88	14.04		
49	0.26	89	15.57		
50	0.28	90	17.20		
51	0.30	91	18.76		
52	0.33	92	20.42		
53	0.36	93	22.22		
54	0.41	94	24.16		

**TABLE OF PERCENTAGES FOR LIFE INSURANCE BENEFIT
FOR COMPLIANCE WITH IRC SECTION 7702
GUIDELINE PREMIUM TEST**

ATTAINED AGE	PERCENT OF CASH VALUE	ATTAINED AGE	PERCENT OF CASH VALUE
15	250	56	146
16	250	57	142
17	250	58	138
18	250	59	134
19	250	60	130
20	250	61	128
21	250	62	126
22	250	63	124
23	250	64	122
24	250	65	120
25	250	66	119
26	250	67	118
27	250	68	117
28	250	69	116
29	250	70	115
30	250	71	113
31	250	72	111
32	250	73	109
33	250	74	107
34	250	75	105
35	250	76	105
36	250	77	105
37	250	78	105
38	250	79	105
39	250	80	105
40	250	81	105
41	243	82	105
42	236	83	105
43	229	84	105
44	222	85	105
45	215	86	105
46	209	87	105
47	203	88	105
48	197	89	105
49	191	90	105
50	185	91	104
51	178	92	103
52	171	93	102
53	164	94	101
54	157	95 & Over	100
55	150		

**TABLE OF PERCENTAGES FOR LIFE INSURANCE BENEFIT
FOR COMPLIANCE WITH IRC SECTION 7702
CASH VALUE ACCUMULATION TEST**

The rates shown below are based on the 2001 CSO #36[Nonsmoker] Table of Mortality

#3[Male]

ATTAINED AGE	PERCENT OF CASH VALUE	ATTAINED AGE	PERCENT OF CASH VALUE	ATTAINED AGE	PERCENT OF CASH VALUE
#38[15	927	55	249	95	112
16	895	56	242	96	111
17	866	57	234	97	110
18	867	58	228	98	110
19	840	59	221	99	109
20	813	60	214	100	109
21	787	61	208	101	108
22	762	62	202	102	108
23	737	63	197	103	107
24	713	64	191	104	107
25	689	65	186	105	107
26	667	66	182	106	106
27	645	67	177	107	106
28	623	68	173	108	106
29	603	69	168	109	105
30	582	70	164	110	105
31	563	71	160	111	105
32	544	72	157	112	104
33	525	73	153	113	104
34	507	74	150	114	104
35	490	75	146	115	104
36	473	76	143	116	103
37	457	77	141	117	103
38	441	78	138	118	103
39	426	79	135	119	103]
40	411	80	133		
41	397	81	130		
42	384	82	128		
43	371	83	126		
44	358	84	124		
45	346	85	123		
46	335	86	121		
47	324	87	120		
48	313	88	118		
49	303	89	117		
50	293	90	116		
51	284	91	115		
52	275	92	114		
53	266	93	113		
54	257	94	112		

**TABLE OF GUARANTEED MAXIMUM MONTHLY TERM RATES
FOR RIDER
(PER \$1,000)**

#3[MALE] #4[NONSMOKER]

ATTAINED AGE		ATTAINED AGE	
#39[15	0.07	55	0.60
16	0.08	56	0.67
17	0.09	57	0.74
18	0.10	58	0.81
19	0.10	59	0.88
20	0.10	60	0.97
21	0.10	61	1.08
22	0.10	62	1.21
23	0.10	63	1.36
24	0.11	64	1.52
25	0.11	65	1.69
26	0.11	66	1.86
27	0.12	67	2.03
28	0.11	68	2.22
29	0.11	69	2.41
30	0.11	70	2.65
31	0.11	71	2.91
32	0.11	72	3.25
33	0.11	73	3.62
34	0.11	74	4.01
35	0.12	75	4.43
36	0.12	76	4.90
37	0.13	77	5.44
38	0.14	78	6.08
39	0.15	79	6.82
40	0.16	80	7.64
41	0.17	81	8.57
42	0.19	82	9.56
43	0.21	83	10.63
44	0.23	84	11.83
45	0.25	85	13.19
46	0.28	86	14.71
47	0.30	87	16.41
48	0.32	88	18.26
49	0.34	89	20.24
50	0.36	90	22.36
51	0.39	91	24.39
52	0.43	92	26.55
53	0.47	93	28.88
54	0.53	94	31.40]

**TABLE OF SCHEDULED FACE AMOUNT CHANGES FOR
THE SCHEDULED SUPPLEMENTARY TERM INSURANCE RIDER (SSTR)**

	CERTIFICATE	FACE AMOUNT	TOTAL SSTR	CERTIFICATE	FACE AMOUNT
	ANNIVERSARY	CHANGE	TOTAL SSTR FACE AMOUNT FACE AMOUNT	ANNIVERSARY	CHANGE
#40 [10/01/09		\$50,000	\$50,000		\$
10/01/10		\$50,000	\$100,000		\$
10/01/11		\$50,000	\$150,000		\$
10/01/12		\$50,000	\$200,000		\$
10/01/13		\$50,000	\$250,000		\$]