

SERFF Tracking Number: SMNY-126587530 State: Arkansas
Filing Company: Security Mutual Life Insurance Company of New State Tracking Number: 45454
York
Company Tracking Number: 2104 SOV
TOI: L07I Individual Life - Whole Sub-TOI: L07I.101 Fixed/Indeterminate Premium - Single
Life
Product Name: Whole Life Insurance
Project Name/Number: /

Filing at a Glance

Company: Security Mutual Life Insurance Company of New York

Product Name: Whole Life Insurance

SERFF Tr Num: SMNY-126587530 State: Arkansas

TOI: L07I Individual Life - Whole

SERFF Status: Closed-Approved-
Closed State Tr Num: 45454

Sub-TOI: L07I.101 Fixed/Indeterminate
Premium - Single Life

Co Tr Num: 2104 SOV

State Status: Approved-Closed

Filing Type: Form

Reviewer(s): Linda Bird

Authors: Alana Mautone,
Jacqueline Ayres, Aimee Sharland,
Lynn Smith, Janet Esposito, Derick
Deisinger

Disposition Date: 04/20/2010

Date Submitted: 04/16/2010

Disposition Status: Approved-
Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile:

Project Number:

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: Resubmission

Previous Filing Number: 45281

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 04/20/2010

Explanation for Other Group Market Type:

State Status Changed: 04/20/2010

Deemer Date:

Created By: Aimee Sharland

Submitted By: Aimee Sharland

Corresponding Filing Tracking Number:

Filing Description:

Enclosed for review and approval is a revised Statement of Variability for Forms 2104, 2105, IO-9311, IO-9274, IO-9318. This will replace the previously approved Statement of Variability approved 4/6/10, file number 45281.

SERFF Tracking Number: SMNY-126587530 State: Arkansas
 Filing Company: Security Mutual Life Insurance Company of New State Tracking Number: 45454
 York
 Company Tracking Number: 2104 SOV
 TOI: L07I Individual Life - Whole Sub-TOI: L07I.101 Fixed/Indeterminate Premium - Single
 Life
 Product Name: Whole Life Insurance
 Project Name/Number: /

The description for PREMIUM CLASS on page 2 and 6 was changed to correct the ages for the Composite premium class. It now reads:

"Premium Classes are: Preferred Plus Non-Smoker, Preferred Non-Smoker, Standard Non-Smoker, Preferred Smoker, Standard Smoker, and Composite. The Composite Premium Class will be used for Insureds aged 0-17, and for Insureds aged 80-90. In the event the policy is issued with a Table Rating or a Flat Extra Premium, the word RATED will appear before the Premium Class."

The date on the SOV has been also been changed. No other changes have been made to the SOV.

Company and Contact

Filing Contact Information

Alana Mautone, Manager-Product Compliance amautone@smlny.com
 100 Court St. 607-723-3551 [Phone] 7297 [Ext]
 P. O. Box 1625 607-338-7562 [FAX]
 Binghamton, NY 13902

Filing Company Information

Security Mutual Life Insurance Company of CoCode: 68772 State of Domicile: New York
 New York
 100 Court Street Group Code: Company Type: Life Insurance
 P. O. Box 1625 Group Name: State ID Number:
 Binghamton, NY 13902-1625 FEIN Number: 15-0442730
 (607) 723-3551 ext. 7297[Phone]

Filing Fees

Fee Required? No
 Retaliatory? No
 Fee Explanation:
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Security Mutual Life Insurance Company of	\$0.00	04/16/2010	

SERFF Tracking Number: SMNY-126587530 *State:* Arkansas
Filing Company: Security Mutual Life Insurance Company of New State *Tracking Number:* 45454
York
Company Tracking Number: 2104 SOV
TOI: L07I Individual Life - Whole *Sub-TOI:* L07I.101 Fixed/Indeterminate Premium - Single
Life
Product Name: Whole Life Insurance
Project Name/Number: /
New York

SERFF Tracking Number: SMNY-126587530 State: Arkansas
Filing Company: Security Mutual Life Insurance Company of New York Tracking Number: 45454
Company Tracking Number: 2104 SOV
TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single Life
Product Name: Whole Life Insurance
Project Name/Number: /

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	04/20/2010	04/20/2010

SERFF Tracking Number: SMNY-126587530 *State:* Arkansas
Filing Company: Security Mutual Life Insurance Company of New York *Tracking Number:* 45454
Company Tracking Number: 2104 SOV
TOI: L07I Individual Life - Whole *Sub-TOI:* L07I.101 Fixed/Indeterminate Premium - Single Life
Product Name: Whole Life Insurance
Project Name/Number: /

Disposition

Disposition Date: 04/20/2010

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: SMNY-126587530 State: Arkansas
 Filing Company: Security Mutual Life Insurance Company of New York Tracking Number: 45454
 Company Tracking Number: 2104 SOV
 TOI: L07I Individual Life - Whole Sub-TOI: L07I.101 Fixed/Indeterminate Premium - Single Life
 Product Name: Whole Life Insurance
 Project Name/Number: /

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	Statement of Variability		Yes

SERFF Tracking Number: SMNY-126587530 State: Arkansas
 Filing Company: Security Mutual Life Insurance Company of New York Tracking Number: 45454
 Company Tracking Number: 2104 SOV
 TOI: L07I Individual Life - Whole Sub-TOI: L07I.101 Fixed/Indeterminate Premium - Single Life
 Product Name: Whole Life Insurance
 Project Name/Number: /

Supporting Document Schedules

	Item Status:	Status Date:
Bypassed - Item: Flesch Certification		
Bypass Reason: not needed for this filing		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: Application		
Bypass Reason: not needed for this filing		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: Life & Annuity - Actuarial Memo		
Bypass Reason: not needed for this filing		
Comments:		

	Item Status:	Status Date:
Satisfied - Item: Statement of Variability		
Comments:		
Attachment: 2104-2105 SOV 4-16-10.pdf		

SECURITY MUTUAL LIFE INSURANCE COMPANY OF NEW YORK
STATEMENT OF VARIABILITY
Form 2105, 2104, IO-9311, IO-9274, IO-9318

April 16, 2010

VARIABLE MATERIAL IN THE POLICY WILL BE DENOTED WITH BRACKETS

POLICY PAGE	ITEM	DESCRIPTION
Policy Jacket Front and Back	Home Office Address and Telephone Number	This is bracketed as variable information, so that we can change this information without filing, if these items change in the future.
Policy Jacket Front	Officer Signatures and Titles	This is bracketed as variable information, so that we can change this information without filing, if these items change in the future.
Policy Jacket Front	INSURED	For the purpose of this filing, the Insured's name is bracketed as hypothetical information.
Policy Jacket Front	FACE AMOUNT	The FACE AMOUNT is bracketed only as hypothetical illustrative information for the purpose of this filing. The FACE AMOUNT may range from \$1,000 to \$100,000,000.
Policy Jacket Front	INITIAL RIDER AMOUNT (2104 only)	In the event PAID-UP AND ONE YEAR TERM ADDITIONS is selected by the Owner, "†INITIAL RIDER AMOUNT:" will appear below FACE AMOUNT, followed by the face amount of the rider. The INITIAL RIDER AMOUNT may range from \$25,000 to \$100,000,000.
Policy Jacket Front	TOTAL FACE AMOUNT (2104 only)	In the event PAID-UP AND ONE YEAR TERM ADDITIONS is selected by the Owner, "TOTAL FACE AMOUNT:" will appear below INITIAL RIDER AMOUNT, followed by the total of the FACE AMOUNT and INITIAL RIDER AMOUNT.
Policy Jacket Front	PREMIUM	The PREMIUM is bracketed as hypothetical illustrative information. The Premium Mode may be ANNUALLY, SEMI-ANNUALLY, QUARTERLY, or SPECIAL MONTHLY. The Premium Mode is selected by the Owner.
Policy Jacket Front	OWNER	The OWNER is bracketed only as hypothetical information for the purpose of this filing.
Policy Jacket Front	POLICY NUMBER	The POLICY NUMBER is bracketed only as hypothetical information for the purpose of this filing. The Policy Number is a number specifically assigned to the Policy at the time of issue.
Policy Jacket Front	AGE and SEX	For the purpose of this filing, the AGE and SEX are bracketed as hypothetical information. The AGE is the Insurance Age (age nearest birthday) of the Insured at time

		of issue. The issue age may range from 0-90 for form 2104 and 0-75 for form 2105.
Policy Jacket Front	POLICY DATE	For the purpose of this filing, the POLICY DATE is bracketed as hypothetical information.
Policy Jacket Front	ISSUE DATE	For the purpose of this filing, the ISSUE DATE is bracketed as hypothetical information as the actual date the Policy is produced.
Policy Jacket Front	MATURITY DATE	For the purpose of this filing, the MATURITY DATE is bracketed as hypothetical information. The MATURITY DATE will be the policy anniversary that the Insured attains Insurance Age 121.
Policy Jacket Front	PREMIUM CLASS	Premium Classes are: Preferred Plus Non-Smoker, Preferred Non-Smoker, Standard Non-Smoker, Preferred Smoker, Standard Smoker, and Composite. The Composite Premium Class will be used for Insureds aged 0-17, and for Insureds aged 80-90. In the event the policy is issued with a Table Rating or a Flat Extra Premium, the word RATED will appear before the Premium Class.
Policy Jacket Front	STATE INSURANCE DEPARTMENT TELEPHONE NUMBER	The telephone number will be the number for the State Insurance Department.
Page 3(A)	FACE AMOUNT	The FACE AMOUNT is bracketed only as hypothetical illustrative information for the purpose of this filing. The FACE AMOUNT may range from \$1,000 to \$100,000,000.
Page 3(A)	PREMIUM	For the purpose of this filing, the PREMIUM is bracketed as hypothetical information.
Page 3(A)	YEARS PAYABLE	For the purpose of this filing, the YEARS PAYABLE is bracketed as hypothetical information. For form 2105, YEARS PAYABLE will be until the number of years between the Insured's issue age and Insurance Age 85. For form 2104, YEARS PAYABLE will be the number of years between the Insured's issue age and Insurance Age 121.
Page 3(A)	POLICY FEE	The current policy fee is \$75.00 for all policies. The fee may range from \$0-\$200.
Page 3(A)	ADDITIONAL PREMIUM	In the event the policy is issued with a Table Rating, the following will appear under FACE AMOUNT: ADDITIONAL PREMIUM [\$AMOUNT] [NUMBER OF YEARS PAYABLE].
Page 3(A)	FLAT EXTRA PREMIUM	In the event the policy is rated, the following will appear under FACE AMOUNT: FLAT EXTRA PREMIUM [\$AMOUNT] [NUMBER OF YEARS PAYABLE].
Page 3(A)	ACCIDENTAL DEATH BENEFIT	In the event the Accidental Death Benefit rider is selected by the Owner, the following language will appear: ACCIDENTAL DEATH: [\$AMOUNT]

		[PREMIUM][YEARS PAYABLE]. The AMOUNT may range from \$10,000 - \$250,000. YEARS PAYABLE will be the number of years between the Insured's issue age and Insurance Age 70.
Page 3(A)	ADDITIONAL INSURANCE RIDER	In the event Additional Insurance Rider is selected by the Owner, the following language will appear: ADDITIONAL INSURANCE RIDER: [\$AMOUNT] [PREMIUM][YEARS PAYABLE] EXPIRY DATE: [DATE]. The AMOUNT may range from \$10,000 - \$450,000. YEARS PAYABLE will be the number of years between the Insured's issue age and Insurance Age 49.
Page 3(A)	DISABILITY WAIVER	In the event the Disability Waiver is selected by the Owner, the following language will appear: DISABILITY WAIVER [PREMIUM] [YEARS PAYABLE]. YEARS PAYABLE will be the number of years between the Insured's issue age and Insurance Age 66.
Page 3(A)	PAID-UP AND ONE YEAR TERM ADDITIONS (Available with 2104 only)	In the event the PURCHASE OF ADDITIONAL PAID-UP WHOLE LIFE INSURANCE AND ONE YEAR TERM ADDITIONS RIDER is selected by the Owner, the following language will appear: PAID-UP AND ONE YEAR TERM ADDITIONS RIDER †INITIAL RIDER AMOUNT: [\$AMOUNT] PLANNED RIDER PREMIUM: [\$PREMIUM] [YEARS PAYABLE] SERVICE FEE YEAR 1: [30.00%] SERVICE FEE YEARS 2-10: [5.00%] CONVERSION PERIOD FOR TERM ADDITIONS IS TO AGE 65 YEARS PAYABLE will be the number of years between the Insured's issue age and Insurance Age 121. Service Fees may range from 0% to 50% in all years.
Page 3(A)	DISABILITY WAIVER	In the event both the Disability Waiver and Purchase of Additional Paid-Up Whole Life Insurance and One Year Term Additions riders are selected by the Owner, the following language will appear under the Paid-Up and One Year Term Additions language: DISABILITY WAIVER [\$PREMIUM] [YEARS PAYABLE]. YEARS PAYABLE will be the number of years between the Insured's issue age and Insurance Age 66.
Page 3(A)	ADDITIONAL PREMIUM - PAID-UP AND ONE YEAR TERM ADDITIONS (2104 only)	In the event the policy is issued with PAID-UP AND ONE YEAR TERM ADDITIONS and the rider has a Table Rating, the following language will appear on Page 3(A) after the CONVERSION PERIOD FOR TERM ADDITIONS IS TO AGE 65:

		ADDITIONAL PREMIUM [\$PREMIUM] [YEARS PAYABLE].
Page 3(A)	FLAT EXTRA PREMIUM - PAID-UP AND ONE YEAR TERM ADDITIONS (2104 only)	In the event the policy is issued with PAID-UP AND ONE YEAR TERM ADDITIONS and has a Flat Extra Premium, the following language will appear on Page 3(A) after the CONVERSION PERIOD FOR TERM ADDITIONS IS TO AGE 65: FLAT EXTRA PREMIUM [\$PREMIUM] [YEARS PAYABLE].
Page 3(A)	TOTAL ANNUAL PREMIUM	For the purpose of this filing, the TOTAL ANNUAL PREMIUM is bracketed as hypothetical information.
Page 3(A)	*ADDITIONAL PROVISION*	In the event the preliminary term coverage is provided due to a group term conversion, the following language will appear below the TOTAL ANNUAL PREMIUM: *ADDITIONAL PROVISION* [12] MONTHS PRELIMINARY TERM INSURANCE [\$PREMIUM] . The number of months may range from 1-12.
Page 3(A)	PAID-UP ADDITIONS RIDER	In the event Paid-Up Additions Rider is selected by the Owner, the following language will appear: PAID-UP ADDITIONS RIDER - INITIAL PAYMENT [\$AMOUNT] (SEE DETAILS ON PAGE 3(FPUA)).
Page 3(A)	DISABILITY WAIVER	In the event both Disability Waiver and Paid-Up Additions riders are selected by the Owner, the following language will appear after PAID-UP ADDITIONS RIDER - INITIAL PAYMENT: DISABILITY WAIVER [\$PREMIUM] [YEARS PAYABLE].
Page 3(A)	SCHEDULE OF PREMIUMS	In the event Paid-Up Additions Rider is selected by the Owner, †† will appear before SCHEDULE OF PREMIUMS and the following footnote will appear below the schedule: ††THIS SCHEDULE DOES NOT SHOW PREMIUMS FOR PAID-UP ADDITIONS RIDER (SEE PAGE 3(FPUA)).
Page 3(A)	FREQUENCY OF PREMIUM PAYMENTS	For the purpose of this filing, the PREMIUMS DUE BEGINNING ON date and the premiums listed under FREQUENCY OF PREMIUM PAYMENT are bracketed as hypothetical information. The PREMIUMS DUE BEGINNING ON date will be the Policy Date.
Page 3(A)	SPECIAL MONTHLY EFT	In the event the SPECIAL MONTHLY payment mode and Electronic Funds Transfer is selected by the Owner, the following additional language will appear after the QUARTERLY heading and \$ amount: SPECIAL MONTHLY** [\$AMOUNT] and the following footnote will appear under the * footnote:

		**SPECIAL MONTHLY PREMIUM WHILE BILLED UNDER ELECTRONIC FUNDS TRANSFER, OTHERWISE SEMI-ANNUALLY.
Page 3(A)	SPECIAL MONTHLY LIST BILLED	In the event the SPECIAL MONTHLY payment mode is selected by the Owner and the policy is list billed, the following additional language will appear after the QUARTERLY heading and \$ amount: SPECIAL MONTHLY** [\$AMOUNT] and the following footnote will appear under the * footnote: **SPECIAL MONTHLY PREMIUM WHILE LIST BILLED, OTHERWISE SEMI-ANNUALLY.
Page 3(A)	INSURED	For the purpose of this filing, the Insured's name is bracketed as hypothetical information.
Page 3(A)	FACE AMOUNT	The FACE AMOUNT is bracketed only as hypothetical illustrative information for the purpose of this filing. The FACE AMOUNT may range from \$1,000-\$100,000,000.
Page 3(A)	INITIAL RIDER AMOUNT (2104 only)	In the event PAID-UP AND ONE YEAR TERM ADDITIONS is selected by the Owner, "†INITIAL RIDER AMOUNT:" will appear below FACE AMOUNT, followed by the face amount of the rider. The INITIAL RIDER AMOUNT may range from \$25,000-\$100,000,000.
Page 3(A)	TOTAL FACE AMOUNT (2104 only)	In the event PAID-UP AND ONE YEAR TERM ADDITIONS is selected by the Owner, "TOTAL FACE AMOUNT:" will appear below †INITIAL RIDER AMOUNT, followed by the total of the FACE AMOUNT and INITIAL RIDER AMOUNT.
Page 3(A)	PREMIUM	The PREMIUM is bracketed as hypothetical illustrative information. The Premium Mode may be ANNUALLY, SEMI-ANNUALLY, QUARTERLY, or SPECIAL MONTHLY. The Premium Mode is selected by the Owner.
Page 3(A)	OWNER	The OWNER is bracketed only as hypothetical information for the purpose of this filing.
Page 3(A)	POLICY NUMBER	The POLICY NUMBER is bracketed only as hypothetical information for the purpose of this filing. The Policy Number is a number specifically assigned to the Policy at the time of issue.
Page 3(A)	AGE and SEX	For the purpose of this filing, the AGE and SEX are bracketed as hypothetical information. The AGE is the Insurance Age (age nearest birthday) of the Insured at time of issue. The issue age may range from 0-90 for form 2104 and 0-75 for form 2105.
Page 3(A)	POLICY DATE	For the purpose of this filing, the POLICY DATE is bracketed as hypothetical information.

Page 3(A)	ISSUE DATE	For the purpose of this filing, the ISSUE DATE is bracketed as hypothetical information as the actual date the Policy is produced.
Page 3(A)	MATURITY DATE	For the purpose of this filing, the MATURITY DATE is bracketed as hypothetical information. The MATURITY DATE will be the policy anniversary that the Insured attains Insurance Age 121.
Page 3(A)	PREMIUM CLASS	Premium Classes are: Preferred Plus Non-Smoker, Preferred Non-Smoker, Standard Non-Smoker, Preferred Smoker, Standard Smoker, and Composite. The Composite Premium Class will be used for Insureds aged 0-17, and for Insureds aged 80-90. In the event the policy is issued with a Table Rating or a Flat Extra Premium, the word RATED will appear before the Premium Class.
Page 3(A)	SCHEDULE OF BENEFITS (CONTINUED)	Depending on the number of riders issued and space considerations, an additional Page 3(A) may be issued. The page title will be "SCHEDULE OF BENEFITS (CONTINUED)". The information on this page will be the same as defined previously.
Page 3(1)	INSURED	For the purpose of this filing, the Insured's name is bracketed as hypothetical information.
Page 3(1)	POLICY NUMBER	The POLICY NUMBER is bracketed only as hypothetical information for the purpose of this filing. The Policy Number is a number specifically assigned to the Policy at the time of issue.
Page 3(B)	TABLE OF GUARANTEED VALUES	The sex and smoker class allowed are as follows: MALE or FEMALE NON-SMOKER, SMOKER, or COMPOSITE
Page 3(B)	AGE	For the purpose of this filing, AGE is bracketed as hypothetical information.
Page 3(B)	INSURED	For the purpose of this filing, the Insured's name is bracketed as hypothetical information.
Page 3(B)	POLICY NUMBER	The POLICY NUMBER is bracketed only as hypothetical information for the purpose of this filing. The Policy Number is a number specifically assigned to the Policy at the time of issue.
Page 3(CTR C)	TABLE OF CURRENT ONE YEAR TERM ADDITION PURCHASE RATES PER DOLLAR OF INSURANCE (2104 only)	In the event the PAID-UP AND ONE YEAR TERM ADDITIONS rider is selected by the Owner, Page 3(CTR C) will be issued. The page will show a table of the AGE and CHARGES for the rider for all applicable ages.
Page 3(CTR C)	INSURED	For the purpose of this filing, the Insured's name is bracketed as hypothetical information.
Page 3(CTR C)	POLICY NUMBER	The POLICY NUMBER is bracketed only as hypothetical information for the purpose of this filing. The Policy Number is a number specifically assigned to the Policy at

		the time of issue.
Page 3(CTR G)	TABLE OF GUARANTEED ONE YEAR TERM ADDITION PURCHASE RATES PER DOLLAR OF INSURANCE (2104 only)	In the event the PAID-UP AND ONE YEAR TERM ADDITIONS rider is selected by the Owner, Page 3(CTR G) will be issued. The page will show a table of the AGE and CHARGES for the rider for all applicable ages.
Page 3(CTR G)	INSURED	For the purpose of this filing, the Insured's name is bracketed as hypothetical information.
Page 3(CTR G)	POLICY NUMBER	The POLICY NUMBER is bracketed only as hypothetical information for the purpose of this filing. The Policy Number is a number specifically assigned to the Policy at the time of issue.
Page 3(FPUA)	PAID-UP ADDITIONS RIDER	In the event PAID-UP ADDITIONS RIDER is selected by the Owner, Page 3(FPUA) will be issued.
Page 3(FPUA)	PREMIUM SERVICE FEES	The PREMIUM SERVICE FEES may range from 0% to 10%.
Page 3(FPUA)	SCHEDULED PREMIUM PAYMENT	The premium payment can be ANNUAL, SEMI-ANNUAL, QUARTERLY, or SPECIAL MONTHLY.
Page 3(FPUA)	DISABILITY WAIVER	If Disability Waiver is selected by the owner, the following line will appear: DISABILITY WAIVER OF PREMIUM PAYMENT [ANNUAL][\$AMOUNT][NUMBER OF PAYMENTS] The premium payment can be ANNUAL, SEMI-ANNUAL, QUARTERLY, or SPECIAL MONTHLY.
Page 3(FPUA)	INSURED	For the purpose of this filing, the Insured's name is bracketed as hypothetical information.
Page 3(FPUA)	POLICY NUMBER	The POLICY NUMBER is bracketed only as hypothetical information for the purpose of this filing. The Policy Number is a number specifically assigned to the Policy at the time of issue.