

SERFF Tracking Number: MUTM-126771364 State: Arkansas  
Filing Company: United of Omaha Life Insurance Company State Tracking Number: 46516  
Company Tracking Number: PHILIP BOLL  
TOI: L09I Individual Life - Flexible Premium Sub-TOI: L09I.001 Single Life  
Adjustable Life  
Product Name: 2010 AccumUL Plus Specified Amount Endorsement- D158LNA10E  
Project Name/Number: 2010 AccumUL Plus Specified Amount Endorsement/D158LNA10E

## Filing at a Glance

Company: United of Omaha Life Insurance Company

Product Name: 2010 AccumUL Plus Specified Amount Endorsement- D158LNA10E  
SERFF Tr Num: MUTM-126771364 State: Arkansas

TOI: L09I Individual Life - Flexible Premium SERFF Status: Closed-Approved- State Tr Num: 46516  
Adjustable Life Closed

Sub-TOI: L09I.001 Single Life Co Tr Num: PHILIP BOLL State Status: Approved-Closed  
Filing Type: Form Reviewer(s): Linda Bird

Authors: Shelly Kaipust, Kim Disposition Date: 08/19/2010

Meyerring, Ellen Cochrane, Kristin

Miller, Philip Boll

Date Submitted: 08/17/2010 Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

## General Information

Project Name: 2010 AccumUL Plus Specified Amount Endorsement

Project Number: D158LNA10E

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 08/19/2010

Deemer Date:

Submitted By: Ellen Cochrane

Filing Description:

RE: United of Omaha Life Insurance Company

NAIC #: 261-69868 FEIN: 47-0322111

Individual Flexible Premium Adjustable Life Insurance

Form Numbers:

D158LNA10E Endorsement to policies C624LAR08P and C625LAR08P

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 08/19/2010

Created By: Ellen Cochrane

Corresponding Filing Tracking Number:

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D159LNA10E Endorsement to rider C564LNA08R

On behalf of United of Omaha Life Insurance Company, I am submitting the above-captioned forms for review and approval. The above-captioned forms are new and will not replace any previously approved forms. They contain no unusual or controversial items according to normal company and industry standards.

Endorsement D158LNA10E will be used with policies C624LAR08P and C625LAR08P, which your department approved on August 19, 2008. Endorsement D159LNA10E will be used with rider C564LNA08R, which your department approved on August 19, 2008. Endorsement D158LNA10E will attach to and be made a part of all new policy issues. Endorsement D159LNA10E will attach to and be made a part of all new rider issues.

Endorsements D158LNA10E and D159LNA10E introduce a limitation on the reduction of the Specified Amount and Rider Benefit during the first three Policy Years. We believe endorsements D158LNA10E and D159LNA10E will prevent potential abuse of the no-lapse guarantee associated with a dramatic decrease of the Specified Amount and Rider Benefit.

Endorsements D158LNA10E and D159LNA10E have achieved a minimum Flesch Score of 40 when scored with the base policies.

The required filing materials are enclosed. Thank you for your consideration of this submission. Please feel free to contact me if you have any questions or concerns.

Sincerely,

Philip Boll  
Product and Advertising Compliance Analyst  
Regulatory Affairs  
Phone: 402-351-2449  
Fax: 402-351-5298  
E-mail: Philip.Boll@mutualofomaha.com

## Company and Contact

### Filing Contact Information

Philip Boll, Product & Advertising Compliance Analyst philip.boll@mutualofomaha.com  
Mutual of Omaha 402-351-2449 [Phone]

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Mutual of Omaha Plaza 402-351-5298 [FAX]  
 Omaha, NE 68175

**Filing Company Information**

United of Omaha Life Insurance Company CoCode: 69868 State of Domicile: Nebraska  
 Mutual of Omaha Plaza Group Code: 261 Company Type: Life Insurance  
 Omaha, NE 68175 Group Name: State ID Number:  
 (402) 351-6420 ext. [Phone] FEIN Number: 47-0322111

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**Filing Fees**

Fee Required? Yes  
 Fee Amount: \$100.00  
 Retaliatory? No  
 Fee Explanation:  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
United of Omaha Life Insurance Company	\$100.00	08/17/2010	38817526

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	08/19/2010	08/19/2010

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## Disposition

Disposition Date: 08/19/2010

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
Supporting Document	Health - Actuarial Justification		No
Supporting Document	Outline of Coverage		No
Form	Endorsement to policies C624LAR08P and C625LAR08P		Yes
Form	Endorsement to rider C564LNA08R		Yes

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## Form Schedule

Lead Form Number: D158LNA10E

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	D158LNA10E	Policy/Cont Endorsement to ract/Fratern policies al C624LAR08P and Certificate: C625LAR08P Amendmen t, Insert Page, Endorseme nt or Rider	Initial			Endorsement - D158LNA10E .pdf
	D159LNA10E	Policy/Cont Endorsement to rider ract/Fratern C564LNA08R al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial			Endorsement - D159LNA10E .pdf

# UNITED OF OMAHA LIFE INSURANCE COMPANY

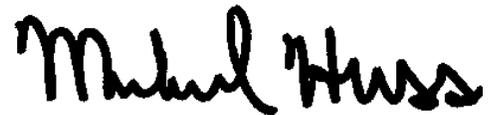
## ENDORSEMENT TO THE POLICY

*This endorsement is made part of the policy to which it is attached. It is effective as of the Issue Date of the policy.*

The **Change in Specified Amount** provision of the policy is hereby amended as follows:

During the first three Policy Years, the Specified Amount may not be decreased to be less than 50% of the Initial Specified Amount shown on the Data Pages.

**United of Omaha Life Insurance Company**

A handwritten signature in black ink that reads "Michael Huss". The signature is written in a cursive style with a large initial "M".

**Corporate Secretary**

**UNITED OF OMAHA LIFE INSURANCE COMPANY**

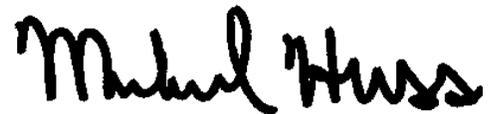
**ENDORSEMENT TO THE TERM LIFE INSURANCE RIDER  
ON ADDITIONAL INSURED (Other than Insured)**

*This endorsement is made part of the rider to which it is attached. It is effective as of the Issue Date of the policy.*

The **DECREASE IN RIDER BENEFIT AMOUNT** section of the rider is hereby amended as follows:

During the first three Policy Years, the Rider Benefit may not be decreased to be less than 50% of the Rider Benefit shown in the RIDER DATA section of the Data Pages.

**United of Omaha Life Insurance Company**

A handwritten signature in black ink that reads "Michael Huss". The signature is written in a cursive, slightly slanted style.

**Corporate Secretary**

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## Supporting Document Schedules

**Item Status:**

**Status**

**Date:**

**Satisfied - Item:** Flesch Certification

**Comments:**

**Attachment:**

AR Read Cert.pdf

**CERTIFICATION**

This is to certify that the attached form(s) has/have achieved the following Flesch Reading Ease Score(s) and complies/comply with the requirements of Ark. Stat. §§66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Language Simplification Act.

<u>Form</u>	<u>Description</u>	<u>Score</u>
D158LNA10E	Policy Endorsement	*40
D159LNA10E	Rider Endorsement	*40

\*When scored with  
the base policy.

United of Omaha Life Insurance Company

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Date: August 17, 2010



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Daniel J. Kennelly  
Vice President & Chief Compliance Officer