

SERFF Tracking Number: CEUL-128113100 State: Arkansas
 Filing Company: Central United Life Insurance Company State Tracking Number:
 Company Tracking Number: CUL-CLBR2
 TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single Life
 Product Name: CLBR2
 Project Name/Number: /

Filing at a Glance

Company: Central United Life Insurance Company

Product Name: CLBR2

TOI: L071 Individual Life - Whole

Sub-TOI: L071.101 Fixed/Indeterminate
 Premium - Single Life

Filing Type: Form

SERFF Tr Num: CEUL-128113100 State: Arkansas

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

Co Tr Num: CUL-CLBR2

State Status: Approved-Closed

Author: Brandon Bond

Date Submitted: 02/23/2012

Reviewer(s): Linda Bird

Disposition Date: 02/28/2012

Disposition Status: Approved-
 Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name:

Project Number:

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Individual Market Type:

Filing Status Changed: 02/28/2012

State Status Changed: 02/28/2012

Created By: Brandon Bond

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Brandon Bond

Filing Description:

Dear Sir/Madam:

The following forms are being submitted for your review and approval. These forms are new and are intended to replace form CUL-IWL-LBR. The previous forms were approved on 10/26/ and can be tracked by the SERFF tracking number : CEUL-1234656789. If the form CUL-IWL-LBR has been issued in the state, we will provide this corrected version to any existing policy holders.

CLBR2 Accelerated Death Benefit Rider

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CLBR2 DISC Disclosure Notice

The statement in CUL-IWL-LBR under Part C, "EFFECT ON THE POLICY OF PAYMENT OF THE ACCELERATED BENEFIT UNDER THIS RIDER" reads, "These benefits will be reduced by up to 50 percent upon payment of the Accelerated Benefit." The replacing form, CLBR2, will replace that statement with , "The Death Benefit, Non-Forfeiture Values (including Cash-Value), and Loans will be reduced by fifty percent if an Accelerated Benefit is paid."

Under CONTRACT PROVISIONS in form CUL-IWL-LBR, the statement "This benefit does not change the loan or nonforfeiture value of the Policy" will be removed. The statement is being removed because the benefit will in fact affect the loan and nonforfeiture values as described above.

The accompanying disclosure notice CLBR2 DISC, (formerly CUL-IWL-LBR) has been revised by changing "up to 50%" to "equal to 50%."

No other changes were made to these forms.

If you have any questions regarding these forms or need additional information in order to complete your review, please contact me.

Thank you for your review,

Brandon

Company and Contact

Filing Contact Information

Brandon Bond, Compliance Analyst
10700 Northwest Freeway
Houston, TX 77092

bbond@manhattanlife.com
713-529-0045 [Phone] 5107 [Ext]
713-821-6551 [FAX]

Filing Company Information

Central United Life Insurance Company
Wortham Tower
2727 Allen Parkway
Suite 500
Houston, TX 77019-2100
(713) 529-0045 ext. [Phone]

CoCode: 61883 State of Domicile: Arkansas
Group Code: 117 Company Type:
Group Name: State ID Number:
FEIN Number: 42-0884060

SERFF Tracking Number: CEUL-128113100 State: Arkansas
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Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation: 1 form x \$50.00
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Central United Life Insurance Company	\$50.00	02/23/2012	56588925

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	02/28/2012	02/28/2012

SERFF Tracking Number: CEUL-128113100 *State:* Arkansas
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Disposition

Disposition Date: 02/28/2012

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

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 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	Disclosure Notice		No
Supporting Document	Redlines		No
Form	Accelerated Death Benefit Rider		No

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Form Schedule

Lead Form Number:

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	CLBR2	Policy/Cont Accelerated Death ract/Fratern Benefit Rider al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		68.100	CULIWLLBRr evisedtoCLB R2.pdf

CENTRAL UNITED LIFE INSURANCE COMPANY

A Stock Company

Administrative Office: 10700 Northwest Freeway

Houston, Texas 77092

Customer Service: 800-669-9030

ACCELERATED DEATH BENEFIT RIDER

When we use the term “We” or “Us” or “Our,” we mean Central United Life Insurance Company. When we use the term “You” or “Your,” we mean the Owner. When we use the term “Insured,” we mean the Insured named on the Policy Specifications page of the Policy. The Owner may or may not be the Insured. **Benefits paid under this rider may be taxable. If so, You or Your Beneficiary may incur a tax obligation. As with all tax matters, a personal tax advisor should be consulted to assess the effect of this benefit.**

I. BENEFIT

We will pay You the accelerated benefit equal to 50 percent of the death benefit as of the last policy anniversary if the Insured becomes terminally ill while the Policy and this Rider are in effect. The Accelerated Benefit is payable only once. Any benefit paid under this Rider will reduce the amount payable on death, surrender or maturity under the terms of the Policy to which this Rider is attached.

A. ACCELERATED BENEFIT

The Accelerated Benefit is administered as follows:

1. We will pay You an amount equal to 50 percent of the death benefit as of the last policy anniversary date. The Accelerated Benefit will be paid in one sum or any other manner approved by Us.
2. We will charge a one-time administration fee of \$300 which will be deducted from this benefit payment.
3. The Accelerated Benefit is only payable once and this Rider will terminate upon payment of the Accelerated Benefit.
4. Payment of premium for the Policy and all other Riders must continue after termination of this Rider.

B. REQUIREMENTS FOR ACCELERATION

The payment of the Accelerated Benefit is subject to the following conditions:

1. We must be furnished satisfactory proof by a licensed physician that the insured's life expectancy is 12 months or less from the date acceleration is requested by You. This proof will include the certification of a licensed physician who is not You or the insured or a member of Your or the insured's immediate family. “Physician” means a licensed doctor of medicine or osteopathy and any licensed health care practitioner that state law requires be recognized as a physician.
2. We reserve the right to obtain a second medical opinion at Our expense.
3. The Policy must be in force other than under extended term or reduced paid up options.
4. The Policy must not be assigned, except to Us as security for a loan.
5. The payment of the Accelerated Benefit must be approved by any irrevocable beneficiary.
6. This Rider provides for the accelerated payment of the death benefit of an Insured's life insurance policy. This is not meant to cause You or an Insured to involuntarily access proceeds ultimately payable to the beneficiary. Therefore, You are not eligible for this benefit under the following circumstances:
 - a. If You are required by law to use this benefit to meet the claims of creditors, whether in bankruptcy or otherwise; or
 - b. If You are required by a government agency to use this benefit in order to apply for, obtain, or otherwise keep a government benefit or entitlement.

C. EFFECT ON THE POLICY OF PAYMENT OF THE ACCELERATED BENEFIT UNDER THIS RIDER

The Accelerated Benefit paid under the terms of this Rider is an advance of the policy's death proceeds, maturity proceeds or surrender proceeds. The Death Benefit, Nonforfeiture Values (including Cash Value), and Loans will be reduced by fifty percent if an Accelerated Benefit is paid.

II. EXCEPTIONS

Benefits are not provided for the following:

1. Intentionally self-inflicted injuries or attempt at suicide. This provision does not apply if the Insured is a citizen of Missouri unless we can show that the Insured intended suicide when Application for this Rider was made.
2. Chronic alcoholism or addiction to any drug or narcotic (including an overdose) unless administered on the advice of a physician and taken according to the physician's instructions.
3. Injury or sickness caused by war or any act of war.

III. CLAIMS

CLAIM FORMS

When a notice of a claim is received, We will send You forms for filing proof of loss. If these forms are not given to You within 15 days of the date We receive notice of a claim, the proof of loss requirement can be met by You giving Us a written statement of the nature and extent of the loss within the time stated In the Proof of Loss provision.

PROOF OF LOSS

Written proof must be given to Us within 90 days after the claim forms are given to You. If it was not reasonably possible to give such proof within 90 days, the claim will not be reduced or denied for this reason If the proof is filed as soon as possible. In any event, the proof required must be given no later than one year from the time specified unless You were legally incapacitated.

TIME OF PAYMENT OF CLAIMS

The Accelerated Benefit payable under this Rider will be paid as soon as We receive proper written proof of loss.

PAYMENT OF CLAIMS

All benefits under this Rider will be paid to You. Any benefits unpaid under this Rider and the Policy at the Insured's death will be paid to the beneficiary. Any payment made in good faith will fully discharge Us to the extent of the payment.

IV. TERMINATION

This Rider will terminate on the earliest of the following:

1. If the premium for this Rider or for the Policy to which it is attached is not paid before the end of the grace period stated in the Policy.
2. The date the insured dies.
3. The date the Policy matures.
4. The date the Accelerated Death Benefit is paid.

This Rider can be cancelled at any time by the Owner, by writing to Us at Our Administrative Office.

V. EFFECTIVE DATE

The issue date of this Rider is the Policy Date shown on the Policy Specifications page.

VI. GENERAL PROVISIONS

CONTRACT PROVISIONS

The settlement options of the Policy are not applicable to any amount payable under this Rider.

CONFORMITY WITH STATE STATUTES

On the date of issue of the Rider, If any provisions of this Rider are in conflict with the laws of the state in which You reside on that date, then those provisions are amended to conform to the minimum requirements of such laws.

INTERPRETATION

This Rider is a part of the Policy to which it is attached. Unless stated otherwise, all provisions of the Policy also apply to this Rider. If there is a conflict between the terms of the Policy and the terms of this Rider, the Rider controls.

Central United Life Insurance Company has signed this Rider on the Date of Issue.



Mary Lou Rainey
Secretary



Dan George
President

SERFF Tracking Number: CEUL-128113100 State: Arkansas
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Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification		
Comments:		
Attachment: Cert Flesch score CLBR2-AR.pdf		

	Item Status:	Status Date:
Satisfied - Item: Application		
Comments: The application being used with this rider was approved on 11/02/2011 and the form number is CUL-IWL-APP-2011-1.		

	Item Status:	Status Date:
Bypassed - Item: Life & Annuity - Acturial Memo		
Bypass Reason: No change in benefits were made.		
Comments:		

	Item Status:	Status Date:
Satisfied - Item: Disclosure Notice		
Comments:		
Attachment: CLBR2 DISC.pdf		

	Item Status:	Status Date:
Satisfied - Item: Redlines		
Comments:		

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Life

Product Name: CLBR2
Project Name/Number: /

Attachments:

redlinegen-CLBR2.pdf
redlinegendisc.pdf

CENTRAL UNITED LIFE

CERTIFICATION

I, Mary Lou Rainey, Secretary for Central United Life Insurance Company, hereby certify that the following form(s) has the following readability score as calculated by the Flesch Reading Ease Test set forth by your state, and meets the minimum reading ease requirements set forth by the state of Arkansas.

FORM

Readability Score

CLBR2

68.1

DATE: 02/23/12

Mary Lou Rainey

Mary Lou Rainey, Secretary

Central United Life Insurance Company
10700 Northwest Freeway
Houston, Texas 77092



DISCLOSURE NOTICE
Accelerated Death Benefit Rider

BENEFIT

We will pay You the accelerated benefit equal to 50% of the death benefit as of the last policy anniversary if the Insured becomes terminally ill while the Policy and this Rider are in effect. Terminally ill means an Insured's life expectancy, as determined by a physician, is 12 months or less from the date acceleration is requested.

CONSEQUENCES OF RECEIVING ACCELERATED DEATH BENEFIT

Benefits paid under this rider may be taxable and You or Your Beneficiary may incur a tax obligation. Benefits paid may also be subject to creditors or affect eligibility for public assistance programs such as medical assistance (Medicaid), Aid to Families with Dependent Children (AFDC), supplementary Social Security income (SSI) and drug assistance programs. As with all tax matters, a personal tax advisor should be consulted to assess the effect of this benefit.

EFFECT OF AN ACCELERATED BENEFIT

The Accelerated Benefit paid under the terms of the Rider is an advance of the policy's death proceeds, maturity proceeds or surrender proceeds. These benefits will be reduced by 50% upon payment of the Accelerated Benefit. When you elect to receive payment of an accelerated benefit under this Rider, it will be treated as a lien against the Policy to which the Rider is attached. Premiums, without reduction, will still be payable on the Policy, including any premiums for riders.

Any irrevocable beneficiaries or assignees must send us written consent to the accelerated benefit payment. The written consent must be in a form satisfactory to us.

ADMINISTRATIVE FEE

We will charge an administrative fee of \$300 (5% of the accelerated benefit, up to \$250 in Alabama) which will be deducted from the accelerated benefit payment.

I acknowledge that I have received and read the disclosure notice which was furnished to me prior to signing the application for insurance.

Signature of Proposed Insured/Owner

Date

Agent

Date

CENTRAL UNITED LIFE INSURANCE COMPANY

A Stock Company

Administrative Office: 10700 Northwest Freeway
Houston, Texas 77092
Customer Service: 800-669-9030

ACCELERATED DEATH BENEFIT RIDER

When we use the term "We" or "Us" or "Our," we mean Central United Life Insurance Company. When we use the term "You" or "Your," we mean the Owner. When we use the term "Insured," we mean the Insured named on the Policy Specifications page of the Policy. The Owner may or may not be the Insured. **Benefits paid under this rider may be taxable. If so, You or Your Beneficiary may incur a tax obligation. As with all tax matters, a personal tax advisor should be consulted to assess the effect of this benefit.**

I. BENEFIT

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3. The Accelerated Benefit is only payable once and this Rider will terminate upon payment of the Accelerated Benefit.
4. Payment of premium for the Policy and all other Riders must continue after termination of this Rider.

B. REQUIREMENTS FOR ACCELERATION

The payment of the Accelerated Benefit is subject to the following conditions:

1. ~~We must be furnished satisfactory proof by a licensed physician that the insured's life expectancy is 12 months or less from the date acceleration is requested by You. This proof will include the certification of a licensed physician who is not You or the insured or a member of Your or the insured's immediate family. "Physician" means a licensed doctor of medicine or osteopathy and any licensed health care practitioner that state law requires be recognized as a physician.~~ Deleted: ¶
2. We reserve the right to obtain a second medical opinion at Our expense.
3. The Policy must be in force other than under extended term or reduced paid up options.
4. The Policy must not be assigned, except to Us as security for a loan.
5. The payment of the Accelerated Benefit must be approved by any irrevocable beneficiary.
6. This Rider provides for the accelerated payment of the death benefit of an Insured's life insurance policy. This is not meant to cause You or an Insured to involuntarily access proceeds ultimately payable to the beneficiary. Therefore, You are not eligible for this benefit under the following circumstances:
 - a. If You are required by law to use this benefit to meet the claims of creditors, whether in bankruptcy or otherwise; or
 - b. If You are required by a government agency to use this benefit in order to apply for, obtain, or otherwise keep a government benefit or entitlement.

C. EFFECT ON THE POLICY OF PAYMENT OF THE ACCELERATED BENEFIT UNDER THIS RIDER

The Accelerated Benefit paid under the terms of this Rider is an advance of the policy's death proceeds, maturity proceeds or surrender proceeds. ~~The Death Benefit, Nonforfeiture Values (including Cash Value), and Loans will be reduced by fifty percent if an Accelerated Benefit is paid.~~ Deleted: These benefits
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Deleted: upon payment of the

II. EXCEPTIONS

Benefits are not provided for the following:

1. ~~Intentionally self-inflicted injuries or attempt at suicide. This provision does not apply if the Insured is a citizen of Missouri unless we can show that the Insured intended suicide when Application for this Rider was made.~~ Deleted: CUL-IWL-LBR

2. Chronic alcoholism or addiction to any drug or narcotic (including an overdose) unless administered on the advice of a physician and taken according to the physician's instructions.
3. Injury or sickness caused by war or any act of war.

III. CLAIMS

CLAIM FORMS

When a notice of a claim is received, We will send You forms for filing proof of loss. If these forms are not given to You within 15 days of the date We receive notice of a claim, the proof of loss requirement can be met by You giving Us a written statement of the nature and extent of the loss within the time stated In the Proof of Loss provision.

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2. The date the insured dies.
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4. The date the Accelerated Death Benefit is paid.

This Rider can be cancelled at any time by the Owner, by writing to Us at Our Administrative Office.

V. EFFECTIVE DATE

The issue date of this Rider is the Policy Date shown on the Policy Specifications page.

VI. GENERAL PROVISIONS

CONTRACT PROVISIONS

The settlement options of the Policy are not applicable to any amount payable under this Rider.

Deleted: This benefit does not change the loan or nonforfeiture value of the Policy.

CONFORMITY WITH STATE STATUTES

On the date of issue of the Rider, If any provisions of this Rider are in conflict with the laws of the state in which You reside on that date, then those provisions are amended to conform to the minimum requirements of such laws.

INTERPRETATION

This Rider is a part of the Policy to which it is attached. Unless stated otherwise, all provisions of the Policy also apply to this Rider. If there is a conflict between the terms of the Policy and the terms of this Rider, the Rider controls.

Central United Life Insurance Company has signed this Rider on the Date of Issue.

Mary Lou Rainey
Secretary

Dan George
President

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CLBR2

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Central United Life Insurance Company

Administrative Office: [10700 Northwest Freeway, Houston, TX 77092]

Customer Service: [1-888-669-9030]

**DISCLOSURE NOTICE
Accelerated Death Benefit Rider**

BENEFIT

We will pay You the accelerated benefit equal to 50% of the death benefit as of the last policy anniversary if the Insured becomes terminally ill while the Policy and this Rider are in effect. Terminally ill means an Insured's life expectancy, as determined by a physician, is 12 months or less from the date acceleration is requested.

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CONSEQUENCES OF RECEIVING ACCELERATED DEATH BENEFIT

Benefits paid under this rider may be taxable and You or Your Beneficiary may incur a tax obligation. Benefits paid may also be subject to creditors or affect eligibility for public assistance programs such as medical assistance (Medicaid), Aid to Families with Dependent Children (AFDC), supplementary Social Security income (SSI) and drug assistance programs. As with all tax matters, a personal tax advisor should be consulted to assess the effect of this benefit.

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EFFECT OF AN ACCELERATED BENEFIT

The Accelerated Benefit paid under the terms of the Rider is an advance of the policy's death proceeds, maturity proceeds or surrender proceeds. These benefits will be reduced by 50% upon payment of the Accelerated Benefit. When you elect to receive payment of an accelerated benefit under this Rider, it will be treated as a lien against the Policy to which the Rider is attached. Premiums, without reduction, will still be payable on the Policy, including any premiums for riders.

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Any irrevocable beneficiaries or assignees must send us written consent to the accelerated benefit payment. The written consent must be in a form satisfactory to us.

ADMINISTRATIVE FEE

We will charge an administrative fee of \$300 (5% of the accelerated benefit, up to \$250 in Alabama) which will be deducted from the accelerated benefit payment.

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I acknowledge that I have received and read the disclosure notice which was furnished to me prior to signing the application for insurance.

Signature of Proposed Insured/Owner

Date

Agent

Date