



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Alaska

Secretary

President

G-29555-1/CERT

GMR

ALASKA REGULATIONS

The following applies to Alaska residents:

1. For the purpose of submitting claim forms to the claimant within 10 days after the notice of claim is received, the Claim Forms paragraph under the Claims provision on the General Provisions page(s) of the Policy and the Important Notice page(s) of the Certificate is replaced by the following:

Claim Forms The ASSOCIATION or New York Life will send the claimant claim forms within 10 days after notice of claim is received. If the ASSOCIATION or New York Life does not send the forms within 10 days, the claimant can send written proof of claim. The claim form or proof must show the date, cause and extent of the loss.

2. For the purpose of adding conversion rights to the list of what is included in the Certificate, the Insured Member's Individual Certificate provision on the General Provision page(s) of the Policy is replaced by the following:

Insured Member's Individual Certificate New York Life will issue to the Policyholder an individual certificate to be given to each INSURED MEMBER. Such certificate will state: (a) the insurance to which the INSURED MEMBER is entitled; (b) the essential features of the insurance; (c) to whom benefits are payable; and (d) conversion rights, if any. Any conflict between the terms of the individual certificate and the Policy will be decided in favor of the Policy.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Arkansas

Secretary

President

G-29555-1/CERT

GMR

ARKANSAS REGULATIONS

The following applies to Arkansas residents:

The following notice is attached to the Face Page of the Policy and Certificate:

FOR INFORMATION OR TO MAKE A COMPLAINT, CALL 1-800- 826-1126

If you need information about your insurance or should any dispute arise about your premium or about a claim that you have filed, call New York Life at the number listed above or contact the Arkansas Insurance Department, 1200 West Third Street, Little Rock, AR, 72201, (501) 371-2640 or toll-free at 1-800-282-9134



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

California

Secretary

President

G-29555-1/CERT

GMR

CALIFORNIA REGULATIONS

The following applies to California residents:

For the purpose of providing coverage for dependent children from birth, item 2. of the ELIGIBLE DEPENDENT definition on the Definitions page(s) is revised as follows:

2. natural child, stepchild, foster child or adopted child, who is:
 - a. less than age 26; and
 - b. not an INSURED MEMBER.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Connecticut

Secretary

President

G-29555-1/CERT

GMR

CONNECTICUT REGULATIONS

The following applies to Connecticut residents:

1. The following Notices are added to the Face Page of the Policy and Certificate:

**RECEIPT OF THE ACCELERATED DEATH BENEFIT MAY BE TAXABLE.
THE INSURED SHOULD SEEK ASSISTANCE FROM A PERSONAL TAX ADVISOR.
DEATH BENEFIT WILL BE REDUCED IF AN ACCELERATED DEATH BENEFIT IS PAID.**

**This policy is not a long-term care policy as defined in sections 38a-501 and 38a-528 of the
Connecticut General Statutes.**

2. For the purpose of modifying the Crime/Illegal Occupation/Illegal Activity exclusion to apply only to illegal occupations or activities of a felonious nature, the Crime/Illegal Occupation/Illegal Activity exclusion on the AD&D Insurance page(s) is revised as follows:

Crime/Illegal Occupation/Illegal Activity – A loss that: (a) occurs during; (b) is due to; or (c) is related to; the INSURED MEMBER'S incarceration or participation in an illegal occupation or activity of a felonious nature.

3. For the purpose of revising the Drugs exclusion to only exclude legal intoxication and to define legal intoxication, the Drugs exclusion on the AD&D Insurance page(s) is revised as follows:

Intoxication – A loss that: (a) occurs during; (b) is due to; or (c) is related to; the INSURED MEMBER'S legal intoxication. ("Intoxication" means a state of drunkenness or inebriation caused by the use of alcohol or some similar condition caused by the use of drugs).



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Florida

Secretary

President

G-29555-1/CERT

GMR

FLORIDA REGULATIONS

The following applies to Florida residents:

1. Complaint Notice - A COVERED PERSON may call the following toll-free number if he or she has any questions or complaints concerning the Policy:

1-800- 826-1126

2. The following notice is added to the face page of the Certificate:

**THE BENEFITS OF THE POLICY PROVIDING YOUR COVERAGE ARE GOVERNED
PRIMARILY BY THE LAWS OF A STATE OTHER THAN FLORIDA.**

3. The No Interim Liability section on the face page of the Policy and the Certificate is deleted.

4. For the purpose of expediting the payment of claims:

- (a) first paragraph of the What Benefit Is Payable section of the AD&D Insurance page(s) is replaced with the following:

What Benefit Is Payable The benefit payable for a Covered Loss is the applicable percentage of the Principal Sum in force for the INSURED MEMBER on the date of the Covered Loss, as stated in the Table Of Benefits on the Schedule page(s). The benefit is payable as soon as New York Life receives satisfactory proof of loss. The benefit will be paid in a lump sum. New York Life will pay interest on the Death Benefit from the date of the INSURED MEMBER'S death until the date of payment. Interest will be paid at the greater of the annual interest rate declared by New York Life for policy proceeds left with New York Life under Option 1 (Proceeds at Interest) or the minimum required by state law.

- (b) Claims Payment paragraph of the Claims section of the General Provisions page(s) of the Policy and the Important Notice page(s) of the Certificate is replaced with the following:

Claims Payment The benefit is payable as soon as New York Life receives satisfactory proof of the covered loss.

5. For the purpose of changing the duration of time allowed to bring legal action, the Legal Action paragraph of the General Provisions page(s) of the Policy and the Important Notice page(s) of the Certificate is replaced with the following:

Legal Action The claimant cannot start any legal action after the expiration of the applicable statute of limitations from the time a claim form or proof of loss is due.

6. For the purpose of deleting the requirement that a COVERED PERSON be continuously insured under the Policy for five years for certain conversion rights and to clarify the amount of insurance such COVERED PERSON can convert, the When A Conversion Right Is Available and What Amount Can Be Converted sections on the Conversion Rights page is replaced by the following:

When A Conversion Right Is Available A conversion right is available to each COVERED PERSON for whom insurance ends, if insurance ends for any reason other than: (a) nonpayment of the CONTRIBUTION; (b) the amount of insurance reduces to zero or less as a result of payment of an Accelerated Death Benefit; or (c) the COVERED PERSON requests to end such insurance.

What Amount Can Be Converted The COVERED PERSON can convert all or any part of the insurance that ends.

7. For the purpose of allowing termination by the Policyholder at anytime without advance notice, the Termination By The Policyholder section of the General Provisions page(s) of the Policy and the Important Notice page(s) of the Certificate is replaced with the following:

Termination By The Policyholder - The Policyholder may terminate the Policy by giving written notice to New York Life.



New York Life Insurance Company

– A Mutual Company Founded in 1845 –

51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER

to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Idaho

Secretary

President

G-29555-1/CERT

GMR

IDAHO REGULATIONS

The following applies to Idaho residents:

The following Complaint Notice is added to the Policy and Certificate:

Questions regarding your policy or coverage should be directed to:

Idaho Department of Insurance
Consumer Affairs
700 W. State Street, 3rd Floor
P.O. Box 83720
Boise, ID 83720-0043

Toll free: 1-800-721-3272 or 208-334-4250

www.DOI.Idaho.gov



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Illinois

Secretary

President

G-29555-1/CERT

GMR

ILLINOIS REGULATIONS

The following applies to Illinois residents:

1. The following Notices are added to the Face Page of the Policy and Certificate:

**RECEIPT OF THE ACCELERATED DEATH BENEFIT MAY BE TAXABLE.
THE INSURED SHOULD SEEK ASSISTANCE FROM A PERSONAL TAX ADVISOR.
DEATH BENEFIT WILL BE REDUCED IF AN ACCELERATED DEATH BENEFIT IS PAID.**

2. For the purpose of revising the life expectancy for a Terminal Illness, the Accelerated Death Benefit provision on the Life and Dependent Life Insurance pages(s) is replaced by the following:

Accelerated Death Benefit The Accelerated Death Benefit is available to a COVERED PERSON who has a Terminal Illness ("Terminal Illness" is a medical condition where the patient has a life expectancy of 24 months or less).

3. The following complaint notice is added to the face page of the Certificate:

Complaint Notice

If you have a complaint concerning your group insurance plan, you may write to New York Life or to the Illinois Department of Insurance. In this regard, Section 50 Ill. Adm. Code 931.10 et al. of the Illinois Administrative Code requires notification of the following addresses:

The Office of Corporate Responsibility
New York Life Insurance Company
51 Madison Avenue
New York, NY 10010

Illinois Department of Insurance
Consumer Division
320 West Washington Street
Springfield, IL 62767-0001

Illinois Department of Insurance
Consumer Division
100 W. Randolph Street, Suite 9-301
Chicago, IL 60601-3251

Correspondence about your plan should include the Plan Number or Policy Number and the name of the employer or Policyholder to whom the plan has been issued.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Indiana

Secretary

President

G-29555-1/CERT

GMR

INDIANA REGULATIONS

The following applies to Indiana residents:

The following complaint notice is added to the Face Page of the Certificate:

Complaint Notice

Questions regarding your policy or coverage should be directed to:

The Office of Corporate Responsibility
New York Life Insurance Company
51 Madison Avenue
New York, NY 10010

If you: (a) need the assistance of the governmental agency that regulates insurance; or (b) have a complaint you have been unable to resolve with your insurer, you may contact the Department of Insurance by mail, telephone or e-mail:

State of Indiana Department of Insurance
Consumer Services Division
311 West Washington Street, Suite 300
Indianapolis, Indiana 46204-2787

Consumer Hotline: (800) 622-4461, in the Indianapolis area: (317) 232-2395

Complaints can be filed electronically at www.in.gov/idoi



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Kentucky

Secretary

President

G-29555-1/CERT

GMR

KENTUCKY REGULATIONS

The following applies to Kentucky residents:

1. The following notice is added to the Face Page of the Certificate:

READ YOUR CERTIFICATE CAREFULLY

2. The following notice is added to the Face Page of the Policy and Certificate:

**RECEIPT OF THE ACCELERATED DEATH BENEFIT MAY BE TAXABLE.
THE INSURED MAY WANT TO SEEK ASSISTANCE FROM A PERSONAL TAX ADVISOR.**



New York Life Insurance Company

– A Mutual Company Founded in 1845 –

51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER

to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Louisiana

Secretary

President

G-29555-1/CERT

GMR

LOUISIANA REGULATIONS

The following applies to Louisiana residents:

1. The following notice is added to the Face Page of the Policy and Certificate:

**RECEIPT OF THE ACCELERATED DEATH BENEFIT MAY BE TAXABLE.
THE INSURED MAY WANT TO SEEK ASSISTANCE FROM A PERSONAL TAX ADVISOR.**

2. For the purpose of deleting all references to “drugs” and for renaming the exclusion, the Drugs Exclusion on the AD&D Insurance page(s) will now be referred to as Intoxicants/Narcotics as follows:

Intoxicants/Narcotics – A loss that: (a) occurs during; (b) is due to; or (c) is related to; the INSURED MEMBER’S: (a) use of intoxicants, narcotics, barbiturates or hallucinogenic agents, unless such use is as prescribed by a doctor or accidentally administered; (b) illegal use of intoxicants, narcotics, barbiturates or hallucinogenic agents; or (c) legal intoxication.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Maryland

Secretary

President

G-29555-1/CERT

GMR

MARYLAND REGULATIONS

The following applies to Maryland residents:

The following is added to the Face Page of the Certificate:

**THE GROUP INSURANCE POLICY PROVIDING COVERAGE UNDER THIS
CERTIFICATE WAS ISSUED IN A JURISDICTION OTHER THAN MARYLAND AND
MAY NOT PROVIDE ALL OF THE BENEFITS REQUIRED IN MARYLAND LAW.**



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Massachusetts

Secretary

President

G-29555-1/CERT

GMR

MASSACHUSETTS REGULATIONS

The following applies to Massachusetts residents:

The Accelerated Death Benefit is not available to a resident of Massachusetts. To accomplish this change, the Accelerated Death Benefit provision and all references to the Accelerated Death Benefit are deleted.



New York Life Insurance Company

– A Mutual Company Founded in 1845 –

51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER

to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Michigan

Secretary

President

MICHIGAN REGULATIONS

The following applies to Maryland residents:

1. The following Notices are added to the Face Page of the Policy and Certificate:

**RECEIPT OF THE ACCELERATED DEATH BENEFIT MAY BE TAXABLE.
THE INSURED SHOULD SEEK ASSISTANCE FROM A PERSONAL TAX ADVISOR.**

2. For the purpose of adding a statement that any accidental death benefit will not be affected by payment of the Accelerated Death Benefit, the Accelerated Death Benefit provision in the What Benefit Is Payable section on the Life and Dependent Life Insurance page(s) is replaced with the following:

Accelerated Death Benefit The Accelerated Death Benefit payable is 75% of the amount of insurance in force on the COVERED PERSON'S life on the date New York Life approves the request for the Accelerated Death Benefit, but not more than \$250,000, except that: If a reduction of insurance due to age is scheduled within one year of the date New York Life approves such request, the benefit payable will be the anticipated age reduced amount of insurance. The benefit will be paid in a lump sum. The benefit is payable once while the COVERED PERSON is insured under the Policy, whether insurance is continuous or interrupted. Any accidental death benefit will not be affected by payment of the Accelerated Death Benefit.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Minnesota

Secretary

President

G-29555-1/CERT

GMR

MINNESOTA REGULATIONS

The following applies to Minnesota residents:

1. The following notices are added to the Face Page of the Policy and Certificate:

**This policy is a legal contract between the Policyholder and
New York Life. READ YOUR POLICY CAREFULLY.**

**RECEIPT OF THE ACCELERATED DEATH BENEFIT MAY BE TAXABLE.
THE INSURED MAY WANT TO SEEK ASSISTANCE FROM A PERSONAL TAX ADVISOR.**

2. For the purpose of requiring a signed acknowledgment of concurrence for payout from the assignee or irrevocable beneficiary, the Accelerated Death Benefit provision in the For The Benefit To Be Paid section on the Life and Dependent Life Insurance pages(s) is replaced by the following:

Accelerated Death Benefit For the Accelerated Death Benefit to be paid: (1) the Policyholder must receive a completed, written request for the benefit on a form satisfactory to New York Life; and (2) New York Life must receive satisfactory medical proof, in writing, that the COVERED PERSON has a Terminal Illness; and (3) a signed acknowledgement of concurrence for the benefit from the assignee or irrevocable beneficiary.

3. For the purpose of adding alternative payment methods a beneficiary may elect, the Payment In Installments section is added to the Life and Dependent Life Insurance page(s):

Payment In Installments The INSURED MEMBER can elect to have all or any part of the Death Benefit or Accelerated Death Benefit paid in installments. He or she can later revoke or change such election. After the INSURED MEMBER'S death, his or her beneficiary can elect to have all or any part of the Death Benefit, to which he or she is entitled, paid in installments, if: (a) the INSURED MEMBER did not elect payment in installments; (b) the beneficiary is an adult natural person; and (c) no payment has been made. The beneficiary can later revoke or change his or her election. The beneficiary may elect alternative payment methods including but not limited to: a life income option; an income option for fixed amounts or fixed time periods; or the selection of an interest-bearing account with New York Life and the right to select another option at a later date. The amount and terms of the installments will be in accordance with New York Life's standard practices at the time of such election or change.

4. For the purpose of clarifying the exclusion, the Air Travel item on the Exclusions section of the AD&D Insurance page(s) is replaced by the following:

Air Travel - A loss that occurs during or is a direct result of the INSURED MEMBER'S travel in, travel on, fall from or descent from any aircraft while such aircraft is in flight. The exclusion does not apply to: (a) an INSURED MEMBER traveling solely as a passenger; and (b) a loss that occurs after five years from the INSURANCE DATE, except that it will apply to INSURED MEMBERS who have received aeronautic or aviation training or whose occupation entails duty aboard aircraft in flight, regardless of the time insured under the Policy.

5. For the purpose of removing the terms "Illegal Activity" and "terrorist activity" and replacing the term "Crime" with the term "Felony", the Crime/Illegal Occupation/Illegal Activity Exclusion of the AD&D Insurance page(s) is revised as follows:

Felony/Illegal Occupation – A loss that: (a) occurs during; (b) is due to; or (c) is related to; the INSURED MEMBER'S active participation in or incarceration resulting from any of the following in a role other than as a victim: (a) the commission of a felony; (b) an illegal occupation; (c) an insurrection; or (d) a riot.

6. The Drugs Exclusion on the AD&D Insurance page(s) is replaced by the following:

Drugs – A loss that: (a) occurs during; (b) is due to; or (c) is related to; the INSURED MEMBER'S: (a) use of any narcotic, unless such use is as prescribed by a doctor or accidentally administered; (b) illegal use of drugs, intoxicants, narcotics, barbiturates or hallucinogenic agents; or (c) operating a motor vehicle under the influence of alcohol, as evidenced by a blood alcohol level in excess of the state legal intoxication limit.

MINNESOTA REGULATIONS

7. For the purpose of stating that a conversion right is always available and to clarify the amount of insurance such COVERED PERSON can convert, the When A Conversion Right Is Available and What Amount Can Be Converted sections on the Conversion Rights page are replaced by the following:

When A Conversion Right Is Available A conversion right is available to each COVERED PERSON for whom insurance ends.

What Amount Can Be Converted The COVERED PERSON can convert all or any part of the insurance that ends.

8. For the purpose of extending the time period during which a claimant can start any legal action, the Legal Action section of the General Provisions page(s) of the Policy and Important Notice page(s) of the Certificate is replaced with the following:

Legal Action The claimant cannot start any legal action: (a) within 60 days after a claim form or proof of loss is sent; or (b) more than five years after a claim form or proof of loss is due.

9. The following Notice of Cancellation is added to the General Provisions page(s) of the Policy and the Important Notice page(s) of the Certificate:

Notice of Cancellation New York Life will notify each INSURED MEMBER by mail of the cancellation of the Policy at least 30 days before the effective cancellation date. Notice provided to the INSURED MEMBER at the address provided to New York Life within the last 12 months will be deemed notice. Such notification is not required if the Policy is replaced or if New York Life has reasonable evidence to indicate it will be replaced by a substantially similar policy, plan or contract. In the event 30 days notice is not provided, coverage under the Policy will continue for each INSURED MEMBER who has not been notified of the termination of the Policy until the earlier of: (a) 30 days after the date such notice is provided; or (b) 120 days after the effective cancellation date.

10. For the purpose of adding grandchild to the definition of ELIGIBLE DEPENDENT, Item 2. in the Class 1 section of the ELIGIBLE DEPENDENT definition on the Definitions page(s) is revised, as follows:

2. natural child, grandchild, stepchild, foster child or adopted child, who is:
- at least 14 days old;
 - less than age 26; and
 - not an INSURED MEMBER.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Mississippi

Secretary

President

G-29555-1/CERT

GMR

MISSISSIPPI REGULATIONS

The following applies to Mississippi residents:

1. The following Notice is added to the Face Page of the Policy and Certificate:

**RECEIPT OF THE ACCELERATED DEATH BENEFIT MAY BE TAXABLE.
THE INSURED SHOULD SEEK ASSISTANCE FROM A PERSONAL TAX ADVISOR.
DEATH BENEFIT WILL BE REDUCED IF AN ACCELERATED DEATH BENEFIT IS PAID.**

2. For the purpose of providing the INSURED MEMBER with notification of the effect the payment of the Accelerated Death Benefit will have on the Death Benefit, the face amount, and the future contributions, the Accelerated Death Benefit item of the For the Benefit To Be Paid section of the Life and Dependent Life Insurance page(s) is replaced by the following:

Accelerated Death Benefit For the Accelerated Death Benefit to be paid: (1) the Policyholder must receive a completed, written request for the benefit on a form satisfactory to New York Life; and (2) New York Life must receive satisfactory medical proof, in writing, that the COVERED PERSON has a Terminal Illness.

Each time the benefit is paid, New York Life will send to the INSURED MEMBER a statement which will specify the effect the payment of the Accelerated Death Benefit will have on the Death Benefit, the face amount and future contributions.

3. For the purpose of ensuring that the benefit is payable within 30 days of receipt of satisfactory proof, the Claims Payment item in the Claims section on the General Provisions page(s) of the Policy and the Important Notice page(s) of the Certificate is revised as follows:

Claims Payment The benefit is payable within 30 days after receipt of satisfactory proof of the covered loss. If the claim is not denied for valid and proper reasons within 35 days after receipt, New York Life will pay interest on accrued benefits at the rate of one and one-half percent (1 ½%) per month accruing from the day after payment was due on the amount of benefits that remain unpaid until the claim is finally adjudicated. In the event New York Life fails to pay benefits when due, the INSURED MEMBER entitled to such benefits may bring action to recover such benefits, any interest which may accrue as provided by this provision, and any other damages as may be allowable by law.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Missouri

Secretary

President

G-29555-1/CERT

GMR

MISSOURI REGULATIONS

The following applies to Missouri residents:

For the purpose of limiting the time a COVERED PERSON'S death can be excluded, the Suicide exclusion in the Death Benefit section of the Life and Dependent Life Insurance page(s) is replaced with the following:

Suicide - A COVERED PERSON'S death is excluded if it: (a) is due to or related to and/or occurs during suicide, an attempt at suicide or intentionally injuring himself or herself; and (b) occurs within 12 months from an INSURANCE DATE; whether such COVERED PERSON is sane or insane. The only amount payable is a return of the applicable CONTRIBUTIONS.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Montana

Secretary

President

G-29555-1/CERT

GMR

MONTANA REGULATIONS

The following applies to Montana residents:

1. For the purpose of adding language regarding a settlement, the What Benefit Is Payable provision on the AD&D Insurance page(s) is revised as follows:

What Benefit Is Payable The benefit payable for a Covered Loss is the applicable percentage of the Principal Sum in force for the INSURED MEMBER on the date of the Covered Loss, as stated in the Table Of Benefits on the Schedule page(s). The benefit is payable within 30 days after receipt of satisfactory proof. If settlement is made after the first 30 days after the receipt of satisfactory proof of death, the settlement shall include interest from the 30th day until settlement. Interest shall be paid at the discount rate on a 90-day commercial paper in effect at the Ninth District Federal Reserve Bank at the time of proof of death. The benefit will be paid in a lump sum.

2. For the purpose of ensuring that the Payment of Claims is made within 30 days of receipt of satisfactory proof, the Claims Payment paragraph under the Claims section on the General Provisions page(s) of the Policy and the Important Notice page(s) of the Certificate is revised as follows:

Claims Payment The benefit is payable within 30 days after receipt of satisfactory proof of the covered loss. If settlement is made after the first 30 days after receipt of satisfactory proof of death, the settlement shall include interest from the 30th day until settlement. Interest shall be paid at the discount rate on a 90-day commercial paper in effect at the Ninth District Federal Reserve Bank at the time of proof of loss.

3. For the purpose of changing the requirement that a COVERED PERSON be continuously insured under the Policy for five years for certain conversion rights, the When A Conversion Right Is Available section on the Conversion Rights page(s) is replaced by the following:

When A Conversion Right Is Available A conversion right is available to each COVERED PERSON for whom insurance ends, if insurance ends for any reason other than: (a) nonpayment of the CONTRIBUTION; (b) the amount of insurance reduces to zero or less as a result of payment of an Accelerated Death Benefit; or (c) the COVERED PERSON requests to end such insurance. However, if insurance ends because the Policy terminates or changes for the group of insureds to which the COVERED PERSON belongs, a conversion right is only available if the COVERED PERSON has been continuously insured under the Policy for at least three years.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

New Hampshire

Secretary

President

G-29555-1/CERT

GMR

NEW HAMPSHIRE REGULATIONS

The following applies to New Hampshire residents:

For the purpose of deleting the 60 day period following the Conversion Period for notice of conversion right, the Notice Of Conversion Right section on the Conversion Rights page(s) is replaced by the following:

Notice Of Conversion Right If a COVERED PERSON has not been given notice of his or her conversion right before the 15th day of the Conversion Period, he or she will have an additional period within which he or she can exercise a conversion right. The additional period will: (a) not extend insurance beyond the end of the 31 day Conversion Period; and (b) end on the 15th day after such COVERED PERSON is given such notice. Written notice presented to the COVERED PERSON or mailed to his or her last known address by New York Life or the Policyholder will be deemed notice.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

North Carolina

Secretary

President

G-29555-1/CERT

GMR

NORTH CAROLINA REGULATIONS

The following applies to North Carolina residents:

1. North Carolina Law includes certain requirements concerning an insurance fiduciary's failure to pay group insurance premiums. An insurance fiduciary is defined as "any person, employer, principal, agent, trustee, or third party administrator, who is responsible for the payment of group health or group life insurance premiums."

IMPORTANT NOTICE TO INSURANCE FIDUCIARIES

"UNDER NORTH CAROLINA GENERAL STATUTE SECTION 58-50-40, NO PERSON, EMPLOYER, PRINCIPAL, AGENT, TRUSTEE, OR THIRD PARTY ADMINISTRATOR, WHO IS RESPONSIBLE FOR THE PAYMENT OF GROUP HEALTH OR LIFE INSURANCE OR HEALTH CARE PLAN PREMIUMS, SHALL: (1) CAUSE THE CANCELLATION OR NONRENEWAL OF GROUP HEALTH OR LIFE INSURANCE, HOSPITAL, MEDICAL, OR DENTAL SERVICE PLAN, MULTIPLE EMPLOYER WELFARE ARRANGEMENT, OR HEALTH CARE PLAN COVERAGES AND THE CONSEQUENTIAL LOSS OF THE COVERAGES OF THE PERSON INSURED, BY WILLFULLY FAILING TO PAY SUCH PREMIUMS IN ACCORDANCE WITH THE TERMS OF THE INSURANCE OR PLAN CONTRACT, AND (2) WILLFULLY FAIL TO DELIVER, AT LEAST 45 DAYS PRIOR TO THE TERMINATION OF SUCH COVERAGES, TO ALL PERSONS COVERED BY THE GROUP POLICY A WRITTEN NOTICE OF THE PERSON'S INTENTION TO STOP PAYMENT OF PREMIUMS. THIS WRITTEN NOTICE MUST ALSO CONTAIN A NOTICE TO ALL PERSONS COVERED BY THE GROUP POLICY OF THEIR RIGHTS TO HEALTH INSURANCE CONVERSION POLICIES UNDER ARTICLE 53 OF GENERAL STATUTES CHAPTER 58 AND THEIR RIGHTS UNDER THE FEDERAL CONSOLIDATED OMNIBUS BUDGET RECONCILIATION ACT (COBRA). VIOLATION OF THIS LAW IS A FELONY. ANY PERSON VIOLATING THIS LAW IS ALSO SUBJECT TO A COURT ORDER REQUIRING THE PERSON TO COMPENSATE PERSONS INSURED FOR EXPENSES OR LOSSES INCURRED AS A RESULT OF THE TERMINATION OF THE INSURANCE."

2. The following notices are added to the Face Page of the Certificate:

READ YOUR CERTIFICATE CAREFULLY

This Certificate of Insurance provides all of the benefits mandated by the North Carolina Insurance Code, but it is issued under a group master policy located in another state and may be governed by that state's law.

IMPORTANT CANCELLATION INFORMATION PLEASE READ THE "WHEN INSURANCE ENDS" PAGE

This Policy is a legal contract between the Policyholder and New York Life.

THIS CERTIFICATE IS NOT A MEDICARE SUPPLEMENT CERTIFICATE. If you are eligible for Medicare, review the Guide to Health Insurance for People with Medicare, which is available from the company.

3. For the purpose of including certificates as contracts of insurance, the Certificate paragraph on the Important Notice page of the Certificate is revised as follows:

Certificate The Certificate is a summary of the provisions of the Policy. It should be kept in a safe place. Any conflict between the terms of the Certificate and the Policy will be decided in favor of the Policy. A copy of the Policy is available at the Policyholder's office for inspection at any time during business hours. The INSURED MEMBER should contact New York Life with questions regarding insurance.

NORTH CAROLINA REGULATIONS

4. For the purpose of changing the Accelerated Death Benefit description on the Face Page of the Policy and Certificate, the Accelerated Death Benefit section is replaced by the following:

Accelerated Death Benefit To qualify for the benefit the COVERED PERSON must be diagnosed as being terminally ill with a life expectancy of 12 months or less. The Death Benefit will be reduced if the Accelerated Death Benefit is paid. CONTRIBUTIONS will remain unchanged. New York Life will send the INSURED MEMBER a statement which will specify the effect the payment of the Accelerated Death Benefit will have on the Death Benefit and CONTRIBUTIONS. **Receipt of the Accelerated Death Benefit may be taxable. The INSURED MEMBER should seek assistance from his or her personal tax advisor.**

5. For the purpose of adding “authorized agent”, the Notice of Claim item on the General Provisions page(s) of the Policy and Important Notice page(s) of the Certificate is replaced by the following:

Notice Of Claim The claimant must notify the ASSOCIATION, New York Life or its authorized agent about a claim within 30 days after the occurrence of any loss covered by the Policy. Failure to give notice within such time shall not invalidate nor reduce any claim if it can be shown not to have been reasonably possible to give such notice and that notice was given as soon as was reasonably possible.

6. For the purpose of deleting reference to “terrorism”, the Crime/Illegal Occupation/Illegal Activity Exclusion on the AD&D page(s) is revised as follows:

Crime/Illegal Occupation/Illegal Activity – A loss that: (a) occurs during; (b) is due to; or (c) is related to; the INSURED MEMBER’S active participation in or incarceration resulting from any of the following in a role other than as a victim: (a) the commission of a felony; (b) an illegal occupation or activity; (c) an insurrection; or (d) a riot.

7. For the purpose of adding references to involuntary exposure to contaminated material and accidental ptomaine poisoning, the Disease/Infirmary Exclusion on the AD&D page(s) is revised as follows:

Disease/Infirmary - A loss that is due to or related to: (a) disease or bodily infirmity of mind or body; (b) medical or surgical treatment of such disease or bodily infirmity; or (c) bacterial infections, except infections which occur as the result of an: (1) accidental cut or wound; or (2) accidental ingestion of, or involuntary exposure to, contaminated material; or (3) accidental ptomaine poisoning.

8. For the purpose of extending the time period for proof of loss to 180 days:

- (a) the For The Benefit To Be Paid section on the AD&D Insurance page(s) is revised as follows:

For The Benefit To Be Paid For a Covered Loss to be paid: (a) New York Life must receive satisfactory proof of the INSURED MEMBER’S loss within 180 days after such loss. If it is not possible to give proof within such 180 day period, it must be given as soon as reasonably possible; and (b) it must be determined that the loss is a Covered Loss.

- (b) The Proof of Loss item in the Claims section on the General Provisions page(s) of the Policy and the Important Notice page(s) of the Certificate is replaced by the following

Proof Of Loss The ASSOCIATION or New York Life must receive satisfactory proof of the loss within 180 days after the date of such loss. Failure to furnish such proof within such time shall not invalidate nor reduce any claim if it was not reasonably possible to furnish such proof within such time, provided such proof is furnished as soon as reasonably possible.

NORTH CAROLINA REGULATIONS

9. For the purpose of changing the time frame for payment of claims, the What Benefit Is Payable section on the AD&D Insurance page(s) and the Claims Payment item on the General Provisions page(s) of the Policy and Important Notice page(s) of the Certificate are replaced by the following:
- (a) **What Benefit Is Payable** The benefit payable for a Covered Loss is the applicable percentage of the Principal Sum in force for the INSURED MEMBER on the date of the Covered Loss, as stated in the Table Of Benefits on the Schedule page(s). The benefit is payable immediately after receipt of satisfactory proof. The benefit will be paid in a lump sum. New York Life will pay interest on the Death Benefit from the date of the INSURED MEMBER'S death until the date of payment. Interest will be paid at the greater of the annual interest rate declared by New York Life for policy proceeds left with New York Life under Option 1 (Proceeds at Interest) or the minimum required by state law.
 - (b) **Claims Payment** The benefit is payable immediately after receipt of satisfactory proof of the covered loss.
10. For the purpose of providing coverage for a child from birth Item 2. of the ELIGIBLE DEPENDENT definition on the Definitions page(s) is revised, as follows:
- 2. natural child, stepchild, foster child or adopted child, who is:
 - a. less than age 26; and
 - b. not an INSURED MEMBER.
11. For the purpose of providing coverage for an adopted, eligible child based on a court or administrative order from the moment the child is placed with the adopting parents, the following paragraph is added to the ELIGIBLE DEPENDENT definition on the Definitions page(s), as follows:

Reference to an ELIGIBLE CHILD also includes a child who is in the custody of the APPLICANT pursuant to a court or administrative order.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

North Dakota

Secretary

President

G-29555-1/CERT

GMR

NORTH DAKOTA REGULATIONS

The following applies to North Dakota residents:

1. For the purpose of reducing the suicide exclusion to within 12 months from an INSURANCE DATE, the Suicide exclusion in the What Benefit Is Payable section of the Life and Dependent Life Insurance page(s) is replaced by the following:

Suicide - A COVERED PERSON'S death is excluded if it: (a) is due to or related to and/or occurs during suicide, an attempt at suicide or intentionally injuring himself or herself; and (b) occurs within 12 months from an INSURANCE DATE; whether such COVERED PERSON is sane or insane. The only amount payable is a return of the applicable CONTRIBUTIONS.

2. For the purpose of extending the time period during which a claimant can start any legal action, the Legal Action section of the General Provisions page(s) of the Policy and Important Notice page(s) of the Certificate is replaced with the following:

Legal Action The claimant cannot start any legal action: (a) within 60 days after a claim form or proof of loss is sent; or (b) more than five years after a claim form or proof of loss is due.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Oklahoma

Secretary

President

OKLAHOMA REGULATIONS

The following applies to Oklahoma residents:

1. The following Fraud Warning is added to the Face Page of the Certificate:

WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

2. For the purpose of deleting all references to “drugs” and renaming the Drug Exclusion, the Drugs Exclusion on the AD&D Insurance page(s) will now be referred to as Narcotics as follows:

Narcotics – A loss that: (a) occurs during; (b) is due to; or (c) is related to; the INSURED MEMBER being under the influence of any narcotic unless administered on the advice of a doctor.

3. For the purpose of deleting reference to armed conflict, the War Conditions exclusion in the Exclusions section of the AD&D Insurance page(s) is replaced by the following:

War Conditions - A loss that: (a) occurs during; (b) is due to; or (c) is related to; the INSURED MEMBER'S engagement in any of the following in a role other than as a victim: (a) in war, (b) an act of war, declared or undeclared, while serving in the military or any auxiliary unit attached to the military or working in an area of war whether voluntary or as required by an employer.

4. For the purpose of extending the limiting age for a child and for providing coverage for ELIGIBLE CHILD(REN) from birth:

(a) Item 2. of the ELIGIBLE DEPENDENT definition on the Definitions page is revised, as follows:

2. natural child, stepchild, foster child or adopted child, who is:
 - a. less than age 26 or older if attending an educational institution; and
 - b. not an INSURED MEMBER.

(b) The TERMINATION AGE DATE definition on the Definitions page(s) is revised, as follows:

TERMINATION AGE DATE means the date insurance for a COVERED PERSON ends due to his or her attainment of the stated AGE, as follows:

1. the last day of the INSURANCE PERIOD during which the INSURED MEMBER reaches AGE 80;
2. the last day of the INSURANCE PERIOD during which the INSURED SPOUSE reaches AGE 80; or
3. the last day of the INSURANCE PERIOD during which the INSURED CHILD reaches AGE 26, or if AGE 26 or older, the age when the child is no longer attending an educational institution.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Pennsylvania

Secretary

President

G-29555-1/CERT

GMR

PENNSYLVANIA REGULATIONS

The following applies to Pennsylvania residents:

The following is added to the face page of the Policy and Certificate:

**“RECEIPT OF THE ACCELERATED DEATH BENEFIT MAY BE BE TAXABLE. THE INSURED
MAY WANT TO SEEK ASSISTANCE FROM A PERSONAL TAX ADVISOR.”**



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

South Carolina

Secretary

President

G-29555-1/CERT

GMR

SOUTH CAROLINA REGULATIONS

The following applies to South Carolina residents:

For the purpose of extending the time period during which a claimant can start any legal action, the Legal Action section of the Claims provision on the General Provisions page(s) of the Policy and Important Notice page(s) of the Certificate is replaced by the following:

Legal Action The claimant cannot start any legal action: (a) within 60 days after a claim form or proof of loss is sent; or (b) more than six years after a claim form or proof of loss is due.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

South Dakota

Secretary

President

G-29555-1/CERT

GMR

SOUTH DAKOTA REGULATIONS

The following applies to South Dakota residents:

1. For the purpose of only excluding a loss occurring during the commission of a felony, the Crime/Illegal Occupation/Illegal Activity exclusion on the AD&D Insurance page(s) is revised as follows:

Crime/Illegal Occupation/Illegal Activity – A loss that occurs during the INSURED MEMBER'S commission of a felony.

2. The Drug Exclusion on the AD&D Insurance page(s) is deleted in its entirety.

3. For the purpose of only excluding while sane, the Self-Inflicted Injury/Suicide exclusion on the AD&D Insurance page(s) is revised as follows:

Self-Inflicted Injury/Suicide - A loss that: (a) is due to or is related to: (1) suicide; (2) an attempt at suicide; or (3) an intentional self-inflicted injury; (b) occurs during an attempt at suicide; or (c) occurs while intentionally injuring oneself; while the INSURED MEMBER is sane.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Texas

Secretary

President

G-29555-1/CERT

GMR

TEXAS REGULATIONS

The following applies to Texas residents:

1. The following notice is added above the first provisions on the Face Page of the Policy:

NOTICE

THE INSURANCE ON A COVERED PERSON IS SUBJECT TO NONRENEWAL UPON THE COVERED PERSON ATTAINING A CERTAIN AGE

DISCLOSURE

THE ACCELERATION-OF-LIFE-INSURANCE BENEFITS OFFERED UNDER THE POLICY MAY OR MAY NOT QUALIFY FOR FAVORABLE TAX TREATMENT UNDER THE INTERNAL REVENUE CODE OF 1986. WHETHER SUCH BENEFITS QUALIFY DEPENDS ON FACTORS SUCH AS YOUR LIFE EXPECTANCY AT THE TIME BENEFITS ARE ACCELERATED OR WHETHER YOU USE THE BENEFITS TO PAY FOR NECESSARY LONG - TERM CARE EXPENSES, SUCH AS NURSING HOME CARE. IF THE ACCELERATION - OF - LIFE INSURANCE BENEFITS QUALIFY FOR FAVORABLE TAX TREATMENT, THE BENEFITS WILL BE EXCLUDABLE FROM YOUR INCOME AND NOT SUBJECT TO FEDERAL TAXATION. TAX LAWS RELATING TO ACCELERATION - OF - LIFE INSURANCE BENEFITS ARE COMPLEX. YOU ARE ADVISED TO CONSULT WITH A QUALIFIED TAX ADVISOR ABOUT CIRCUMSTANCES UNDER WHICH YOU COULD RECEIVE ACCELERATION - OF - LIFE INSURANCE BENEFITS EXCLUDABLE FROM INCOME UNDER FEDERAL LAW.

DISCLOSURE

RECEIPT OF ACCELERATION-OF-LIFE-INSURANCE BENEFITS MAY AFFECT YOUR, YOUR SPOUSE OR YOUR FAMILY'S 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. YOU ARE ADVISED TO CONSULT WITH A QUALIFIED TAX ADVISOR AND WITH SOCIAL SERVICE AGENCIES CONCERNING HOW RECEIPT OF SUCH A PAYMENT WILL AFFECT YOUR, YOUR SPOUSE AND YOUR FAMILY'S ELIGIBILITY FOR PUBLIC ASSISTANCE.

2. For the purpose of expanding the definition of Terminal Illness, the Accelerated Death Benefit section on the Life and Dependent Life Insurance page(s) is revised as follows:

Accelerated Death Benefit The Accelerated Death Benefit is available to a COVERED PERSON who has a Terminal Illness. ("Terminal Illness" is an illness or physical condition, including a physical injury, that can be reasonably expected to result in death in two years or less.)

3. For the purpose of adding language stating that New York Life's physician has the final ruling, the Accelerated Death Benefit item in the For The Benefit To Be Paid section on the Life and Dependent Life Insurance page(s) is revised as follows:

Accelerated Death Benefit For the Accelerated Death Benefit to be paid: (1) the Policyholder must receive a completed, written request for the benefit on a form satisfactory to New York Life; and (2) New York Life must receive satisfactory medical proof, in writing, that the COVERED PERSON has a Terminal Illness. New York Life may, at its own expense, request an additional examination. Based upon the results of the additional examination(s) and in conjunction with the medical proof provided by the COVERED PERSON, New York Life will determine whether or not the COVERED PERSON has a Terminal Illness. If there is a conflict in opinion between a COVERED PERSON'S doctor or physician and New York Life's doctor or physician to substantiate any claim under the Policy, New York Life will investigate the issue so that it can be resolved as fairly as possible and make a determination.

TEXAS REGULATIONS

4. For the purpose of clarification, the Death Benefit subsection in the What Benefit is Payable section on the Life and Dependent Life Insurance page(s) is revised as follows:

Death Benefit Except as stated below, the Death Benefit payable is the amount of insurance in force for the COVERED PERSON on the date of his or her death, less the amount paid on his or her behalf under the Accelerated Death Benefit. The benefit will be paid in a lump sum. New York Life will pay interest on the Death Benefit from the date of the COVERED PERSON'S death until the date of payment. Interest will be paid at the greater of the annual interest rate declared by New York Life for policy proceeds left with New York Life under Option 1 (Proceeds at Interest) or the minimum required by state law. New York Life will refund any CONTRIBUTION paid beyond the date of the COVERED PERSON'S death. New York Life's general practice is to pay the Death Benefit immediately upon receipt of satisfactory proof of the COVERED PERSON'S death, but in no event will the Death Benefit be paid later than two months after the date New York Life receives such satisfactory proof and of the right of the claimant to the Death Benefit.

5. For the purpose of removing the phrase "or descent from," the Air Travel exclusion in the Exclusions section of the AD&D Insurance pages is revised as follows:

Air Travel - A loss that occurs during or is a direct result of the INSURED MEMBER'S travel in, travel on, fall from any aircraft while such aircraft is in flight, unless the INSURED MEMBER is traveling solely as a passenger.

6. For the purpose of extending the time frame for submitting proof of loss:

- (a) The For the Benefit To Be Paid section of the AD&D Insurance page(s) is replaced by the following:

For The Benefit To Be Paid For a Covered Loss to be paid: (a) New York Life must receive satisfactory proof of the INSURED MEMBER'S loss within 91 days after such loss. If it is not possible to give proof within such 91 day period, it must be given as soon as reasonably possible; and (b) it must be determined that the loss is a Covered Loss.

- (b) The Proof Of Loss item in the Claims section on the General Provisions page(s) of the Policy and the Important Notice page(s) of the Certificate is replaced by the following:

Proof Of Loss The ASSOCIATION or New York Life must receive satisfactory proof of the loss within 91 days after the date of such loss. Failure to furnish such proof within such time shall not invalidate nor reduce any claim if it was not reasonably possible to furnish such proof within such time, provided such proof is furnished as soon as reasonably possible.

7. The Repatriation Benefit is deleted in its entirety.

8. For the purpose of limiting the number of times New York Life may require proof that a child remains handicapped, the Handicapped Child Benefit on the Continuance page(s) is replaced by the following:

Handicapped Child Benefit Insurance in force will continue for an INSURED CHILD who has: (a) reached the TERMINATION AGE DATE; and (b) a Handicap ("Handicap" means a physical or mental disability which: (1) renders the INSURED CHILD incapable of self-sustaining employment; and (2) requires dependency on the INSURED MEMBER or other care provider(s) for support or, in the event of the INSURED MEMBER'S death, on the family or other care provider(s) for support); if:

1. New York Life receives satisfactory proof of such Handicap within 31 days after the date such child's insurance would otherwise have ended due to reaching the TERMINATION AGE DATE; and
2. the CONTRIBUTION is paid.

The benefit will end on the earliest of the following:

1. the last day of the INSURANCE PERIOD during which such child is no longer so Handicapped;
2. the date New York Life does not receive the required proof that such child remains Handicapped as required by New York Life but no more frequently than annually after the second anniversary of the date the child attains limiting age; or
3. the date insurance would otherwise end as stated on the When Insurance Ends page(s).

TEXAS REGULATIONS

9. For the purpose of clarifying New York Life's responsibilities in the payment of claims, the following items are added to the Claims section on the General Provisions page(s) of the Policy and the Important Notice page(s) of the Certificate:

Acknowledgement Within 15 days of receipt of satisfactory proof of loss New York Life will: 1) acknowledge receipt of the claim; 2) commence any investigation of the claim; and 3) request from the claimant all items, statements, and forms that New York Life reasonably believes, at that time, will be required from the claimant.

Acceptance or Rejection Within 15 days of receipt of all items, statements, and forms required by New York Life needed to secure final proof of loss, New York Life shall notify the claimant in writing of the acceptance or rejection of the claim. If New York Life rejects the claim, the claimant will be notified of the reasons for rejection. If New York Life is unable to accept or reject the claim, the claimant will be notified of the reasons New York Life needs additional time to accept or reject a claim. Not later than 45 days after New York Life notifies the claimant that they are unable to accept or reject the claim, New York Life will either accept or reject the claim.

10. For the purpose of: (a) limiting the number of times New York Life may examine a person for whom claim is made; and (b) defining the person capable of the examination, the Examination section on the General Provisions page(s) of Policy and the Important Notice page(s) of the Certificate is revised as follows:

Examination New York Life, at its own expense, has the right and opportunity to:

1. have a person, for whom claim is made, examined: (a) physically; (b) psychologically; and/or (c) psychiatrically; to determine the existence and/or cause of any loss, other than loss of life. This right can be used as often as it is reasonably required while a claim is pending, but not more than once in a three-month period; and/or
2. in the event of loss of life: (a) reasonably request an autopsy where it is not forbidden by law or religious belief; and/or (b) examine the medical records of the deceased; to determine the cause of the loss.

For purposes of this provision, New York Life will consider any person who is a licensed medical practitioner whose services are required to be covered by law and who renders such services within the scope of his or her license to be acceptable as a doctor or physician capable of such examination. If there is a conflict in opinion between a COVERED PERSON'S doctor or physician and New York Life's doctor or physician to substantiate any claim under the Policy, the New York Life Claims Department will investigate the issue so that it can be resolved as fairly as possible.

11. For the purpose of adding the words "in the absence of fraud", the Insurance on Covered Persons item of the General Provisions page(s) of the Policy and the Incontestability item on the Important Notice page(s) of the Certificate is replaced by the following:

Incontestability Except for nonpayment of CONTRIBUTIONS, New York Life cannot contest the validity of any initial or restored insurance on a COVERED PERSON after it has been in force for two years prior to the contest under the Policy during such COVERED PERSON'S lifetime. To contest, New York Life will only rely upon: (a) written statements signed by the INSURED MEMBER and/or his or her INSURED DEPENDENT in applying for such insurance: (1) under the Policy; and/or (2) under another policy, if such statements are used to allow insurance to take effect under or be transferred to the Policy; and/or (b) the provisions on the When Insurance Takes Effect page(s). A copy of all statements must be furnished to such person or to his or her beneficiary. Such statements, in the absence of fraud, are representations, not warranties. The time insured under a policy being surrendered and replaced will also be used to determine if the two year contestable period has elapsed.

TEXAS REGULATIONS

12. For the purpose of providing a reasonable death benefit in the event of a misstatement, item 3. is added to the Misstatements provision on the Important Notice page(s) of the Certificate and the General Provisions page(s) of the Policy:

Misstatements Subject to the Errors and Incontestability sections, if relevant statements of age were not accurate for any person, a fair adjustment of remittances and/or insurance will be made as follows:

1. if the age has been overstated: (a) the amount of remittance will be adjusted to reflect the difference between the remittance applicable at the correct age and the incorrect remittance previously paid; and (b) the Policyholder will refund the amount of any corresponding adjustment, except that: If insurance has been erroneously reduced because such person was thought to have reached a higher age bracket, as stated on the Schedule page(s), the amount of insurance and remittance will be adjusted based on such person's correct age; or
 2. if the age has been understated: (a) the amount of insurance will be adjusted downward for any INSURANCE PERIOD, in proportion to the ratio of the charges previously paid for such INSURANCE PERIOD to the prescribed charges at the correct age for such INSURANCE PERIOD; and (b) there will be no adjustment to any remittance previously paid, except that: If insurance was not reduced because such person was thought to have been in a lower age bracket, as stated on the Schedule page(s), the amount of insurance and remittance will be adjusted based on such person's correct age.
 3. Regardless of any maximum eligibility age, a reasonable death benefit in excess of the CONTRIBUTION made by the COVERED PERSON shall be offered.
13. For the purpose of insuring an ELIGIBLE CHILD from birth and adding a grandchild and adopted grandchild to the ELIGIBLE DEPENDENT definition, Item 2. of the ELIGIBLE DEPENDENT definition on the Definitions page(s) is revised as follows:
2. natural child, stepchild, foster child, adopted child, grandchild or adopted grandchild, who is:
 - a. less than age 26; and
 - b. not an INSURED MEMBER.

14. For the purpose of providing coverage for a natural or adopted child who is physically or mentally disabled and under the parents' supervision, Item 3. is added to the definition of ELIGIBLE DEPENDENT on the Definitions page(s) as follows:

3. a natural child or adopted child who is physically or mentally disabled and under the APPLICANT'S supervision.

15. For the purpose of adding the words "subject to the Policyholder Grace Period as stated on the General Provisions page(s)", the definition of PREMIUM DATE on the Definitions page(s) of the Policy is revised as follows:

PREMIUM DATE means the following dates on or before which the Policyholder must pay the PREMIUM to New York Life, for:

1. the first PREMIUM, the Effective Date; and
2. each later PREMIUM until termination of insurance under the Policy, each CONTRIBUTION DATE.

If the PREMIUM is not received by New York Life on or before the PREMIUM DATE, the Policy will be in default, subject to the Policyholder Grace Period as stated on the General Provisions page(s) of the Policy, unless New York Life has notified the Policyholder in writing before the PREMIUM DATE that it is waiving this provision for all or any part of the PREMIUM due on a PREMIUM DATE.

16. The last paragraph of the New York Life's Rights paragraph on the Premium page(s) of the Policy is deleted.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Vermont

Secretary

President

G-29555-1/CERT

GMR

VERMONT REGULATIONS

The following applies to Vermont residents:

1. The following is added to the Face Page of the Certificate:

READ YOUR CERTIFICATE CAREFULLY

Coverage is provided under a group master policy issued in another state.

In the event that a conflict exists between the master policy and certificate, the provisions of the certificate and Vermont law will control.

2. For the purpose of revising the interest payable, the Death Benefit section of the What Benefit is Payable section on the Life and Dependent Life page(s) is revised as follows:

Death Benefit Except as stated below, the Death Benefit payable is the amount of insurance in force for the COVERED PERSON on the date of his or her death, less the amount paid on his or her behalf under the Accelerated Death Benefit. The benefit will be paid in a lump sum. New York Life will pay interest on the Death Benefit from the date of the COVERED PERSON'S death until the date of payment. Interest will be at the greater of the annual interest rate declared by New York Life for policy proceeds left with New York Life under Option 1 (Proceeds at Interest) or six percent. Any CONTRIBUTION paid beyond the date of the COVERED PERSON'S death will be refunded.

3. For the purpose of revising the definition of Covered Loss to delete references to "independent of all other causes," Item 1. of Covered Loss section on the AD&D Insurance page(s) is replaced by the following:

Covered Loss A Covered Loss is a loss that:

1. except as stated in the Exposure and Disappearance liberalizations, an INSURED MEMBER suffers, but only if such loss results from an accidental injury and such: (a) loss occurs within 365 days of such injury; (b) injury occurs while he or she is insured under the Policy; and (c) injury is the direct result of the accident. Termination of the Policy or of an INSURED MEMBER'S insurance will not prejudice the payment of benefits for a Covered Loss which resulted from an accidental injury that occurred before the date of such termination.
4. For the purpose of deleting references to "incarceration," "illegal activity" and "terrorist activity" and to replace the term "Crime" with "Felony", the Crime/Illegal Occupation/Illegal Activity Exclusion on the AD&D Insurance page is revised as follows:

Felony/Illegal Occupation – A loss that: (a) occurs during; (b) is due to; or (c) is related to; the INSURED MEMBER'S active participation in any of the following in a role other than as a victim: (a) the commission of a felony; (b) an illegal occupation; (c) an insurrection; or (d) a riot.

5. For the purpose of revising the Disease/Infirmity exclusion to include references to accidental ptomaine poisoning, the Disease/Infirmity exclusion in the Exclusions section of the AD&D Insurance page(s) is replaced by the following:

Disease/Infirmity - A loss that is due to or related to: (a) disease or bodily infirmity of mind or body; (b) medical or surgical treatment of such disease or bodily infirmity; or (c) bacterial infections, except infections which occur as the result of an: (1) accidental cut or wound; or (2) accidental ingestion of contaminated material or accidental ptomaine poisoning.

6. For the purpose of only excluding losses that occur during; are due to; or are related to alcoholism and drug addiction, the Drugs exclusion is revised and the title Drugs is now shown as Substance Abuse:

Substance Abuse – A loss that: (a) occurs during; (b) is due to; or (c) is related to; the INSURED MEMBER'S; alcoholism or drug addiction.

VERMONT REGULATIONS

7. The Treatment exclusion of the Exclusions section on the AD&D Insurance page(s) is deleted.
8. For the purpose of revising the War Conditions exclusion to delete reference to an armed conflict which involves the armed forces of one or more countries, and to include the words whether declared or undeclared, the War Conditions exclusion in the Exclusions section of the AD&D Insurance page(s) is replaced by the following:

War Conditions – A loss that: (a) occurs during; (b) is due to; or (c) is related to; the INSURED MEMBER’S engagement in any of the following in a role other than as a victim: (a) in war, or (b) an act of war, whether declared or undeclared.
9. For the purpose of deleting the time frame to receive satisfactory proof of a Covered Loss:
 - (a) the For The Benefit To Be Paid provision on the AD&D Insurance page is replaced by the following:

For The Benefit To Be Paid For a Covered Loss to be paid: (a) New York Life must receive satisfactory proof of the INSURED MEMBER’S loss as soon as reasonably possible; and (b) it must be determined that the loss is a Covered Loss.
 - (b) the Proof of Loss provision on the General Provisions page(s) of the Policy and Important Notice page(s) of the Certificate is replaced by the following:

Proof Of Loss The ASSOCIATION or New York Life must receive satisfactory proof of the loss as soon as reasonably possible.
10. For the purpose of paying claims immediately upon receipt of satisfactory proof and stating the interest payable as six percent:
 - (a) The What Benefit Is Payable section of the AD&D Insurance page(s) is replaced by the following:

What Benefit Is Payable The benefit payable for a Covered Loss is the applicable percentage of the Principal Sum in force for the INSURED MEMBER on the date of the Covered Loss, as stated in the Table Of Benefits on the Schedule page(s). The benefit is payable immediately after receipt of satisfactory proof. The benefit will be paid in a lump sum. New York Life will pay interest on the Death Benefit from the date of the INSURED MEMBER’S death until the date of payment. Interest will be paid at the greater of the annual interest rate declared by New York Life for policy proceeds left with New York Life under Option 1 (Proceeds at Interest) or six percent.
 - (b) The Claims Payment item in the Claims section of the General Provisions page(s) of the Policy and Important Notice page(s) of the Certificate is replaced by the following:

Claims Payment The benefit is payable immediately after receipt of satisfactory proof of the covered loss.
11. For the purpose of providing a reasonable benefit in the event of a misstatement, the Misstatement provision on the Important Notice page(s) of the Certificate and the General Provisions page(s) of the Policy is replaced with the following:

Misstatements Subject to the Errors and Incontestability sections, if relevant statements of age or facts were not accurate for any person, all amounts payable under the policy shall be such as the premiums paid would have purchased at the correct age.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Washington

Secretary

President

G-29555-1/CERT

GMR

WASHINGTON REGULATIONS

The following applies to Washington residents:

1. For the purposes of clarification, the Accelerated Death Benefit section on the Face Page of the Policy and Certificate is replaced by the following:

Accelerated Death Benefit The Death Benefit will be reduced if the Accelerated Death Benefit is paid. CONTRIBUTIONS will remain unchanged. New York Life will send the INSURED MEMBER a statement which will specify the effect the payment of the Accelerated Death Benefit will have on the Death Benefit and CONTRIBUTIONS. **RECEIPT OF THE ACCELERATED DEATH BENEFIT MAY BE TAXABLE. THE INSURED MEMBER SHOULD SEEK ASSISTANCE FROM THEIR PERSONAL TAX ADVISOR. THIS ACCELERATED DEATH BENEFIT DOES NOT AND IS NOT INTENDED TO QUALIFY AS LONG-TERM CARE INSURANCE UNDER WASHINGTON STATE LAW. WASHINGTON STATE LAW PROHIBITS THIS ACCELERATED LIFE BENEFIT FROM BEING MARKETED OR SOLD AS LONG TERM CARE.** If the INSURED MEMBER receives payment of accelerated benefits from a life insurance policy, the INSURED MEMBER may lose his/her right to receive certain public funds, such as Medicare, Medicaid, Social Security, Supplemental Security, Supplemental Security Income (SSI), and possibly others. Also, receiving accelerated benefits from a life insurance policy may have tax consequences. New York Life cannot give the INSURED MEMBER advice about this. The INSURED MEMBER may wish to obtain advice from a tax professional or an attorney before deciding to receive accelerated benefits from a life insurance policy. There is no administrative charge made in connection with the payment of the Accelerated Death Benefit.

2. For the purpose of revising the definition of Terminal Illness, the Accelerated Death Benefit section of the Life and Dependent Life Insurance page(s) is replaced by the following:

Accelerated Death Benefit The Accelerated Death Benefit is available to a COVERED PERSON who has a Terminal Illness ("Terminal Illness" is a medical condition which a physician has certified is reasonably expected to result in a life expectancy of 24 months or less after the date of certification).

3. For the purpose of adding provision for a third party mediation concerning the Terminal Illness diagnosis, the Accelerated Death Benefit provision of the For The Benefit To Be Paid section of the Life and Dependent Life Insurance page(s) is replaced by the following:

Accelerated Death Benefit For the Accelerated Death Benefit to be paid: (1) the Policyholder must receive a completed, written request for the benefit on a form satisfactory to New York Life; and (2) New York Life must receive satisfactory medical proof, in writing, that the COVERED PERSON has a Terminal Illness. If New York Life's appointed health care provider disagrees with the COVERED PERSON'S physician that a Terminal Illness exists, the COVERED PERSON has the right to mediation or binding arbitration conducted by a disinterested third party who has no ongoing relationship with either party. The arbitration shall be conducted in accordance with statutory arbitration procedures. As part of the final decision, the arbitrator or mediator shall award the costs of arbitration to one party or the other or may divide the costs equally or otherwise.

4. For the purpose of including a statement that any Accidental Death Benefit will not be affected by the Acceleration of Benefits, the What Benefit is Payable section on the Life and Dependent Life Insurance page(s) is revised:

Accelerated Death Benefit The Accelerated Death Benefit payable is 75% of the amount of insurance in force on the COVERED PERSON'S life on the date New York Life approves the request for the Accelerated Death Benefit, but not more than \$250,000, except that: If a reduction of insurance due to age is scheduled within one year of the date New York Life approves such request, the benefit payable will be the anticipated age reduced amount of insurance. The benefit will be paid in a lump sum. The benefit is payable once while the COVERED PERSON is insured under the Policy, whether insurance is continuous or interrupted. Any accidental death benefit, if applicable, will not be affected by the payment of the Accelerated Death Benefit.

WASHINGTON REGULATIONS

5. For the purpose of modifying the Facility Of Payment provision to reflect payment of burial expenses up to \$1,000, the Facility Of Payment provision on the Life and Dependent Life Insurance page(s) is revised, as follows:

Facility Of Payment - New York Life has the right to pay up to \$1,000 of the benefit to anyone who has incurred expenses for the COVERED PERSON'S fatal illness or burial ("payee").

6. For the purpose of clarification, the Errors paragraph on the General Provisions page(s) of the Policy and the Important Notice page(s) of the Certificate is replaced by the following:

Errors Subject to the Incontestability section, errors, or delays in keeping records, will: (a) not revoke insurance otherwise in force; (b) not continue insurance which otherwise would have ended; and (c) upon discovery, require fair adjustment of remittances and/or insurance to correct the error.

7. For the purpose of resolving any conflict between the Policy and the Certificate in favor of the certificate:

- (a) the third paragraph on the Face Page of the Policy and Certificate is revised, as follows:

Insurance is subject to: (a) any exclusions and limitations of the Policy and all other terms and conditions of the Policy and Certificate; and (b) New York Life's underwriting requirements.

- (b) the Insured Member's Individual Certificate section on the General Provisions page(s) of the Policy and the Certificate item on the Important Notice page(s) of the Certificate are revised, as follows:

Certificate The Certificate is a summary of the provisions of the Policy. It should be kept in a safe place. It is not a contract of insurance. Any conflict between the terms of the Certificate and the Policy will be decided in favor of the Certificate. A copy of the Policy is available at the Policyholder's office for inspection at any time during business hours. The INSURED MEMBER should contact New York Life with questions regarding insurance.

Insured Member's Individual Certificate New York Life will issue to the Policyholder an individual certificate to be given to each INSURED MEMBER. Such certificate will state: (a) the insurance to which the INSURED MEMBER is entitled; (b) the essential features of the insurance; and (c) to whom benefits are payable. Any conflict between the terms of the individual certificate and the Policy will be decided in favor of the Certificate.

8. For the purpose of not subjecting this provision to the Errors and Incontestability sections, the Misstatements paragraph on the General Provisions page(s) of the Policy and the Important Notice page(s) of the Certificate is revised as follows:

Misstatements If relevant statements of age were not accurate for any person, a fair adjustment of remittances and/or insurance will be made as follows:

1. if the age has been overstated: (a) the amount of remittance will be adjusted to reflect the difference between the remittance applicable at the correct age and the incorrect remittance previously paid; and (b) the Policyholder will refund the amount of any corresponding adjustment, except that: If insurance has been erroneously reduced because such person was thought to have reached a higher age bracket, as stated on the Schedule page(s), the amount of insurance and remittance will be adjusted based on such person's correct age; or
2. if the age has been understated: (a) the amount of insurance will be adjusted downward for any INSURANCE PERIOD, in proportion to the ratio of the charges previously paid for such INSURANCE PERIOD to the prescribed charges at the correct age for such INSURANCE PERIOD; and (b) there will be no adjustment to any remittance previously paid, except that: If insurance was not reduced because such person was thought to have been in a lower age bracket, as stated on the Schedule page(s), the amount of insurance and remittance will be adjusted based on such person's correct age.

9. The last paragraph of the New York Life's Rights paragraph on the Premium page(s) of the Policy is deleted.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

West Virginia

Secretary

President

G-29555-1/CERT

GMR

WEST VIRGINIA REGULATIONS

The following applies to West Virginia residents:

1. For the purpose of deleting the words “cut or wound” and replacing it with “accidental injury”, the Disease/Infirmity item of the Exclusion section on the AD&D page(s) is replaced by the following:

Disease/Infirmity - A loss that is due to or related to: (a) disease or bodily infirmity of mind or body; (b) medical or surgical treatment of such disease or bodily infirmity; or (c) bacterial infections, except infections which occur as the result of an: (a) accidental injury; or (2) accidental ingestion of contaminated material.

2. For the purpose of reducing the period of time a COVERED PERSON must be insured before he or she is entitled to a conversion upon termination or amendment to the Policy from five years to three years, the When A Conversion Right Is Available section of the Conversion Rights page is replaced by the following:

When A Conversion Right Is Available A conversion right is available to each COVERED PERSON for whom insurance ends or reduces, if insurance ends or reduces for any reason except: (a) nonpayment of the CONTRIBUTION; (b) the amount of insurance reduces to zero or less as a result of payment of an Accelerated Death Benefit; or (c) the COVERED PERSON requests to end such insurance. However, if insurance ends because the Policy terminates or changes for the group of insureds to which the COVERED PERSON belongs, a conversion right is only available if the COVERED PERSON has been continuously insured under the Policy for at least three years and the Policy has been in force for five years.

3. For the purpose of not allowing the suicide and/or contestable period to start over on a converted policy, the Individual Policy provision on the Conversion Rights page is replaced by the following:

Individual Policy The individual policy requirements are as follows: (a) a completed, written application for the individual policy must be given to New York Life, within the Conversion Period, on a form satisfactory to New York Life; (b) the first premium for the individual policy must be paid within the Conversion Period; (c) the premium for the individual policy will be based upon the applicant's class of risk and age; (d) the individual policy will be on one of the forms currently offered by New York Life, except term insurance, and will be issued without disability or other supplementary benefits; and (e) the individual policy will take effect on the day after the Conversion Period Benefit ends. The individual policy may provide less coverage at a higher premium than that provided for under the group Policy. Credit will be given for any time covered under the group policy for any applicable suicide and/or contestable periods.



New York Life Insurance Company
– A Mutual Company Founded in 1845 –
51 Madison Avenue, New York, NY 10010

GROUP INSURANCE CERTIFICATE RIDER
to be attached to and made a part of the Certificate

POLICYHOLDER	GOVERNMENT EMPLOYEES' BENEFIT ASSOCIATION, INCORPORATED
POLICY NUMBER	G-29555-1 (the "Policy")
CONTRACT STATE	DISTRICT OF COLUMBIA

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2017 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based on the applicable residence of the INSURED MEMBER, the attached State Regulations page(s) is added to the Certificate and replaces the State Regulations page(s), if any, previously issued to the INSURED MEMBER.

Wisconsin

Secretary

President

G-29555-1/CERT

GMR

WISCONSIN REGULATIONS

The following applies to Wisconsin residents:

KEEP THIS NOTICE WITH YOUR INSURANCE PAPERS

PROBLEMS WITH YOUR INSURANCE? If you are having problems with your insurance company or agent, do not hesitate to contact the insurance company or agent to resolve your problem.

**The Office of Corporate Responsibility
New York Life Insurance Company
51 Madison Avenue
New York, New York 10010
Telephone Number: (800) 792-9686**

You can also contact the OFFICE OF THE COMMISSIONER OF INSURANCE, a state agency that enforces Wisconsin's insurance laws and file a complaint. You can contact the OFFICE OF THE COMMISSIONER OF INSURANCE at the following:

**Office of the Commissioner of Insurance
Complaints Department
P.O. Box 7873
Madison, WI 53707-7873
Telephone Numbers: (800) 236-8517 or (608) 266-0103**