GROUP INSURANCE CERTIFICATE RIDER

to be attached to and made a part of the Certificate

POLICYHOLDER: TRUSTEES OF THE AMERICAN VETERINARY MEDICAL ASSOCIATION GROUP HEALTH AND LIFE INSURANCE TRUST

POLICY NUMBER: G-14885-0 (the "Policy")

CONTRACT STATE: ILLINOIS

NEW YORK LIFE agrees that the Certificate is changed, as of the later of January 1, 2004 or the INSURED MEMBER'S INSURANCE DATE, as follows:

Based upon 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
INDIANA REGULATIONS

The following applies to Indiana residents:

1. **Complaint Notice**

   If you have a complaint concerning your group insurance plan, you may write to New York Life or to the Indiana Department Of Insurance. In this regard, Senate Enrolled Act 211 (P.L. 149-1990) of the Indiana Insurance Code requires notification of the following addresses and telephone number:

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

   Public Information / Market Conduct
   Indiana Department of Insurance
   311 West Washington Street, Suite 300
   Indianapolis, Indiana 46204-2787

   Consumer Hotline: 1-800-622-4461
   In Indianapolis Area: 1-317-232-2395

   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.

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

   **THIS POLICY CONTAINS AN ACCELERATED DEATH BENEFIT PROVISION**

3. For the purpose of permitting a personal representative of a COVERED PERSON to be furnished with a copy of statements used in applying for insurance, the Insurance On Covered Persons section of the General Provisions page(s) of the Policy and the Incontestability section of the Important Notice page(s) of the Certificate is replaced as follows:

   **Incontestability** Except for provisions which relate to eligibility for insurance and 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 from the ISSUE DATE 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 are representations, not warranties. A copy of all statements may also be furnished to a personal representative.