GROUP INSURANCE CERTIFICATE RIDER

to be attached to and made a part of the Certificate

<table>
<thead>
<tr>
<th>POLICYHOLDER</th>
<th>TRUSTEES OF THE AMERICAN VETERINARY MEDICAL ASSOCIATION GROUP HEALTH AND LIFE INSURANCE TRUST</th>
</tr>
</thead>
<tbody>
<tr>
<td>POLICY NUMBER</td>
<td>G-14885-0 (the &quot;Policy&quot;)</td>
</tr>
<tr>
<td>CONTRACT STATE</td>
<td>ILLINOIS</td>
</tr>
</tbody>
</table>

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.

North Dakota

____________________________________  ___________________________________
Secretary                                                          President

G-14885-0/CERT  1/1/04

GMR  1/1/04
The following applies to North Dakota residents:

For the purpose of reducing the suicide exclusion to within 12 months from an ISSUE 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 the ISSUE DATE; whether such COVERED PERSON is sane or insane. The only amount payable is a return of the applicable CONTRIBUTIONS.