Quick. Convenient. Straightforward.

Steps for registering on newyorklife.com to access your account and making a premium payment online





You have a choice when determining which product is right for you. Now, you also have a choice for service. An overview of online service for New York Life clients

Online service is available at www.newyorklife.com/vsc

Our service website is accessible every day of the week. You can:

- Perform service transactions, including:
 - Pay billed premiums¹
 - Pay your premium by loan or dividend²
 - Change your billing frequency³
 - Change bank account information for existing Check-O-Matic arrangements
 - Change your mailing address, email address, and/or phone number
 - Change your beneficiary⁴
 - Request a loan or dividend withdrawal²
 - Change future premium allocations or transfer funds among investment divisions⁵
 - Update your Investor Profile⁶
 - Report a death
- Download service forms
- View the Account Summary for an overview of your New York Life portfolio

- View correspondence, such as documents and statements, including:
 - Quarterly statements⁵
 - Consolidated statements
 Annual policy summaries
 - Premium notices
 - Federal income tax forms
- Subscribe for eDelivery and receive correspondence electronically, including:
 - Annual privacy notices and annual policy summaries
 - Tax forms
 - Prospectuses
 - Annual reports and semi-annual reports
 - Quarterly statements⁵
 - Consolidated statements
- Contact an Agent or Registered Representative

See policy details, such as:

- Cash, loan, and dividend values
- Premium payment information

You're on the go and so are we!

For clients who want quick and easy access to their policies on the go, we've got you covered. You can access information wherever needed from your smartphone or tablet.

From your mobile device, go to www.newyorklife.com/vsc to be automatically directed to our mobile-friendly site. Then, just enter your user name and password.

¹Applies to premium payment amounts under \$50,000 for Whole Life, Term Life,

Universal Life, and Target Life policies.

²Applies to whole life products.

³Term and whole life products only.

 $^{^4\!}A$ Change of Beneficiary form will still be required for some beneficiary transactions,

such as those for trusts, corporations, riders, and certain products.

⁵Applies to variable products.

⁶Applies to variable life and annuity policies, MainStay mutual funds, and

NYLIFE Securities AdviserOne brokerage accounts.

My Account registration on newyorklife.com and completing an online premium payment

Please note that if you are already registered for My Account on newyorklife.com, please skip ahead to step 7 on page 6 for instructions on how to make a premium payment online.

L. Visit www.newyorklife.com and click on "My Account"



Select "I don't have an online account yet"



3. Enter your last name, Social Security number, policy/account number, and date of birth. Then, click on "Continue"

| LEARN & PLAN PRODUCTS ABOUT CAREERS KEEP GOO | D GOING MY ACCOUNT CONTACT US |
|---|-------------------------------|
| | |
| | |
| Registration | _ |
| Step 1 of 3: Enter your personal information | |
| Last Name: | |
| Social Security Number (only last 4 digits required): | |
| Policy/Account Number: | |
| Date of Birth: [MM/DD/YYYY] | |
| CONTINUE » CANCEL | |

 Enter a user name and password. Reenter the password. Then, click on "Continue"



5. Select a secret question from the drop-down bar and then enter and reenter an answer. Click on "Continue"

| 、绿桥 | LEARN & PLAN | PRODUCTS | ABOUT | CAREERS | KEEP GOOD GOING | MY ACCOUNT | CONTACT US |
|-----------|-------------------|--------------|-------|---------|-----------------|------------|------------|
| | 1 a | 12 | 4 | | 12 | - | |
| | 100 | A | | | E | | 30 |
| Registr | ation | | | | | | |
| Step 3 o | of 3: Select a Se | cret Questic | n | | | | |
| Select Qu | estion: | | | | | | |
| Select a | Question? | | | | ~ | | |
| | | | | | | | |
| | | | | | | | |
| Enter Ans | wer: | | | | | | |
| Re-Enter | Answer: | | | | | | |
| | | | | | | | |
| | | | | | | | |
| PRE | vious co | NTINUE » | C | ANCEL | | | |

6. Click on "Access my account"

| 风脉 | LEARN & PLAN | PRODUCTS | ABOUT | CAREERS | KEEP GOOD GOING | MY ACCOUNT | CONTACT US | |
|-----------|---------------------|---------------|-------|---------|-----------------|------------|------------|--|
| | 9 | - | A HI | | | P | | |
| | | | | | | | | |
| Registra | tion Complete | | | | | | | |
| You accou | nt has been success | ully created. | | | | | | |
| Access my | account | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

5

If you already have access to your account on newyorklife.com, please log in by <u>clicking here</u> and continue below to step 7 to learn how to make a premium payment online.

If you experience difficulty with the above link, please copy and paste the following URL into your web browser: <u>http://www.newyorklife.com/vsc</u>

• Once you have logged in, you will be brought to the General Policy Information screen, which will display a "Make A Payment" link if a bill is available. You will only see this link if a bill is due. To proceed with a payment, click that link.

| VEXY. | Virtual Service Center | | Hello : |
|--------------------|-------------------------------------|--|---------|
| LYFE | Account Summary FAQs Contact Us | | |
| | Insured / Annuitant: | | |
| | Paline Number 200 | | |
| Local Desistant | Policy Number: 3302 | | |
| Rep | | | |
| eneral Policy Info | | | |
| Policy Values > | | | |
| m Payment Info a | 🧉 💧 Sign Ur | for New York Life eDelivery, Go GREEN, | |
| and Renafit Info | | | |
| dru denenciano | | | |
| new statements | General Policy Informa | tion | |
| Service Porms | | | |
| Report a Death | Owner: 1 | | |
| Ipdate Login Info | owner. | | |
| | Contact Information | User Name | |
| | | T991181425 | |
| | Update Address/Phone | Update Login | |
| | Sandara Post sense i line ins | Email | |
| | | None | |
| | | Add an Email Address | |
| | | Decument Delivery | |
| | | US Mail | |
| | | Update Document Delivery | |
| | | | |
| | | | |
| | All information in model of an | f na las lanta | |
| | All mormation is quoted as c | 1 03/20/2013. | |
| | Policy Type | Whole Life Insurance | |
| | Policy Status (2) | Active | |
| | Policy In Force Since | 05/15/2012 | |
| | Anniversary Date | 05/15/2012 | |
| | Policy Face Amount | \$50,000.00 | |
| | Premium Paid to Date | 01/15/2013 | |
| | Frequency of Payment (2) | Proportionate K | |
| | Dromium Amount | 407 67 Make & Daymont | |

8. On the next screen, you will select the bills to pay (see the red arrow) and click "Continue"

| | Virtual Service Center | | | | | | | | | | | |
|--|------------------------|------------|---------|----------------|---|--|--|--|--|--|--|--|
| Make a F | Make a Payment | | | | | | | | | | | |
| Step 1 of 3: Enter Payment Amount(s) for Policy 398 | | | | | | | | | | | | |
| Past Due Bill Your January bill is past due and requires payment. Bills more than 31 days past due may result in a lapse in your policy. | | | | | | | | | | | | |
| Select B | ill(s) to Pay: * | | | | Please Note: | | | | | | | |
| Select | Bill | Due Date | Amount | | If you make your payment before 8:00 p.m. Eastern Time, Monday - Friday, it will post your policy that day. | | | | | | | |
| | January Bill | 01/15/2013 | \$97.67 | <u>details</u> | If you make your payment after 5:00 p.m. Eastern hime, it will be posted the next business day. | | | | | | | |
| | | Total: | \$97.67 | | | | | | | | | |
| Contin | ue Cancel | | | | | | | | | | | |

9. You will now be prompted to choose your bank, if you already have bank account information on record. If you have more than one bank account on record, you will need to select which bank account you would like to use for the payment before continuing (see the red arrow).

If no bank is on record, you must add a new bank by providing your banking information (see the yellow arrow).

| YORY | Virtual Service Center | | | | | | | | |
|-------------------|--|----------------------|--------------------------|---------------|--|--|--|--|--|
| Make a | Payment | | | | | | | | |
| Step 2 o | of 3: Select Bank Information For Pa | yment On Policy | 398 | | | | | | |
| | | | | | | | | | |
| Select a | a Bank: * | | | | | | | | |
| Note: O | nly one bank account may be used (| per transaction. | | | | | | | |
| | Ba tr Name | Bank Type | Account Number | | | | | | |
| 0 | KEARNY FEDERAL SAVINGS BAN | Savings | xxxxxxxxxxxxxxxxxx | Remove | | | | | |
| 0 | KEARNY FEDERAL SAVINGS BAN | Savings | XXXXXXXXXXXXXX77 | Remove | | | | | |
| 0 | KEARNY FEDERAL SAVINGS BAN | Checking | XXXXXXXXXXXXX66 | Remove | | | | | |
| 0 | KEARNY FEDERAL SAVINGS BAN | Checking | XXXXXXXXXXXXXXXX44 | Remove | | | | | |
| 0 | O KEARNY FEDERAL SAVINGS BAN Checking XXXXXXXXXXXX22 | | | | | | | | |
| Add a B | ank de | | | | | | | | |
| Now Ba | unk* | | | | | | | | |
| New Do | | | | | | | | | |
| Account | t Holder's Name: | 123 Main New Tork | Street NY 50050 Data | 2172 | | | | | |
| Account | t Type: * Checking Y | THE UNION | NIP - | 00000 8 BKT | | | | | |
| Account | Number: * | Hy Bas | SP | | | | | | |
| Re-Ente | Account Number: * | | | | | | | | |
| Erree | | Nur | nber Number Number | | | | | | |
| Contin NOTE: N | Cancel | ng used to pay y | our policy. Incorrect ba | nk informatio | | | | | |
| existent | account. Bank information is sav | ed for future us | ie. | | | | | | |

10. You will then be brought to the e-Signature page. This page is designed to replace a wet signature on a form, and the information shown will be used as your authorization to process a debit to your bank account. Please click "Submit" to continue.

| | January Bill | | |
|---|---|--|--|
| | (Due 01/15/2013) | | Total |
| Premium Amount | \$97.67 | = | \$97.67 |
| | | | |
| Banking Information | | | |
| Account Holder's Name: | | | |
| Account Type: | CI | heckin | g |
| Routing Number: | | | |
| Account Number: | | | |
| Bank Name: | к | EARN | Y FEDERAL |
| | Authorizat | tion f | or ONE-TIM |
| Direct Payment via the Au payment. | tomatic Clearing H | louse | ("ACH") is t |
| I hereby authorize New Yor of Arizona ("New York Lit "Authorization"). The Auth enter will be retained for Insufficient Funds or Unco balance of premium. | ork Life Insurance fe") to electronical norization will not s future payments I illected Funds, Ner | Comp ly de sched choo w Yor | bany, New Y bit my depo lule any repo bse to subm rk Life will se |
| I understand that in order i Eastern Time (Monday thi Friday), on a weekend or Eastern Time on the date Life may not be able to ho ACH transactions to my ar | for the Authorization rough Friday). I un holiday, it will be the payment is so nor this Authorization count must complete | on to l nders proc chedu tion if y with | be processe tand that if led to be pro- the transac n all applicat |
| I have verified that all of th | e information abov | ve is o | correct. |
| By clicking Submit, I agree debited. | e to send my requ | est a | nd be bound |
| | | | |

Submit

Cancel/Modify

11. Lastly, the confirmation screen will appear. The payment will be processed at this stage.

| Virtual Se | rvice Center | | | | |
|---|--|--|--|---|---|
| Payment Confirmation | | | | | |
| Thank you | | | | | |
| March 26, 2013 | | | | | |
| This payment will be p Your confirmation nu | rocessed 03/26/3 umber is 311 January Bill | 2013. The draft | from your bank will occur withi | 1-5 business days. | |
| | 01/15/2013 | 10101 | | | |
| Premium Amount | \$97.67 | \$97.67 | | | |
| Banking Information | | | | | |
| Account Holder's Nam | ie: | | | | |
| Account Type: | | Checking | | | |
| Routing Number: | | | | | |
| Account Number: | | XXXXXXXXX | XXXXX44 | | |
| Bank Name: | | KEARNY F | EDERAL SAVINGS BAN | | |
| Direct Payment via t | the Automatic Cl | AUTH earing House ("A | ORIZATION FOR ONE-TIME D | RECT PAYMENT VIA ACH (ACH DEBITS) om a consumer account for the purpose of making a payment. | ^ |
| I hereby authorize N electronically debit n drafts beyond this oi any such debit be re the balance of premi | ew York Life Insu ny deposit accou ne-time payment turned due to In um. | urance Company, int for a one-tim t. The bank acco sufficient Funds | , New York Life Insurance and J e payment as designated abov out information I enter will be or Uncollected Funds, New Yor | Innuity Corporation, or NYLIFE Insurance Company of Arizona ("New York Life") to a, using ACH (the "Authorization"). The Authorization will not schedule any repeating etained for future payments I choose to submit at www.newyorklife.com/vsc. Should k Life will send a letter describing the reason for the failed draft, and the due date of | |
| I understand that in I understand that if may cancel a pendin York Life may not be account must complete | order for the Aut the Authorization g payment until a able to honor the y with all applica | thorization to be n is submitted af 8:00 p.m. EST on his Authorization ble laws. | processed on the same day the ter 8:00 pm EST (Monday thrown in the date the payment is sche if the transaction has already | at it is requested, it must be submitted before 8:00 p.m. EST (Monday through Friday), ugh Friday), on a weekend or holiday, it will be processed on the next business day. You duled to be processed by visiting www.newyorkifle.com/vsc. It is possible that New seen processed. I further understand that the origination of ACH transactions to my | |