

SERFF Tracking Number: HRTD-125822674 State: Arkansas
Filing Company: ING Life Insurance and Annuity Company State Tracking Number: 40498
Company Tracking Number: E-TPA-08
TOI: A02.11 Individual Annuities- Deferred Non- Sub-TOI: A02.11.002 Flexible Premium
Variable and Variable
Product Name: E-TPA-08
Project Name/Number: E-TPA-08 Employee-Directed Deduction of Third Party Administrator (TPA) Fees from Participant Accts/E-TPA-08

Filing at a Glance

Company: ING Life Insurance and Annuity Company

Product Name: E-TPA-08 SERFF Tr Num: HRTD-125822674 State: ArkansasLH

TOI: A02.11 Individual Annuities- Deferred Non- SERFF Status: Closed State Tr Num: 40498

Variable and Variable

Sub-TOI: A02.11.002 Flexible Premium Co Tr Num: E-TPA-08 State Status: Approved-Closed

Filing Type: Form Co Status: Reviewer(s): Linda Bird

Authors: Patricia Smith, Marylou Disposition Date: 10/17/2008

Tripp, Nora Baranowski

Date Submitted: 10/10/2008 Disposition Status: Approved

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name: E-TPA-08 Employee-Directed Deduction of Third Party Administrator (TPA) Fees from Participant Accts Status of Filing in Domicile: Pending

Project Number: E-TPA-08

Requested Filing Mode:

Date Approved in Domicile:

Domicile Status Comments: CT is our domiciliary state pending approval.

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 10/17/2008

State Status Changed: 10/17/2008

Corresponding Filing Tracking Number: E-TPA-08

Market Type: Group

Group Market Size: Small and Large

Group Market Type: Employer

Filing Description:

Re: ING Life Insurance and Annuity Company,

NAIC #86509, FEIN # 71-029478

ENDORSEMENT Form: E-TPA-08

Deemer Date:

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On behalf of ING Life Insurance and Annuity Company (ILIAC), the above-captioned form is being submitted for your review and approval. The endorsement is a new form and does not replace any previously approved form.

Form E-TPA-08 endorses the Group Combination Deferred Variable Annuity Contract Form G-CDA(12/99) and Certificate Form C-CDA(12/99) designed for use in multiple markets approved by your Department on 12/13/99. It also endorses our Group Fixed Deferred Annuity Contract G-FP3-01 and Certificate CERT-FP3-01 approved by your Department on 1/2/02, as well as, any other previously approved form that may apply that we inadvertently omitted from this letter. Please note that the endorsement will be used only in connection with new issues of the above contracts when and where appropriate.

The endorsement authorizes ILIAC to deduct from account values of Participants under the employer's Plan the amounts specified by the employer to pay costs associated with a third party administrator fee. ILIAC will pay the deducted amount to the third party administrator as authorized by the employer. If an employer does not direct such deductions, ILIAC may in its discretion elect to pay all or part of third party administrator expenses of the employer's Plan in accordance with any applicable provisions of the Contract.

We would like to begin using this endorsement immediately upon approval; therefore, your earliest review would be appreciated.

The endorsement is submitted in final printed form, subject to only minor modification in paper stock, ink, border, company logo, and adaptation to computer printing and the possible inclusion of a barcode. The above form has been filed with our domiciliary state of Connecticut. Please be advised that endorsement form E-TPA-08 has achieved a 50.1 Flesch readability score.

We appreciate all your help and attention to this filing. Please do not hesitate to call me if you have any other questions or need any additional information to help assist in your review at (860) 580-2854, or toll free at (800) 654-8065 (Ext. 5802854) or Email: Marylou.Tripp@US.ING.COM.

Company and Contact

SERFF Tracking Number: HRTD-125822674 State: Arkansas
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Filing Contact Information

Marylou Tripp, Contract Consultant Marylou.Tripp@us.ing.com
 One Orange Way (860) 580-2854 [Phone]
 Windsor, CT 06095 (860) 580-4844[FAX]

Filing Company Information

ING Life Insurance and Annuity Company CoCode: 86509 State of Domicile: Connecticut
 One Orange Way Group Code: 229 Company Type:
 Windsor, CT 06095 Group Name: State ID Number:
 (800) 654-8065 ext. [Phone] FEIN Number: 71-0294708

Filing Fees

Fee Required? Yes
 Fee Amount: \$20.00
 Retaliatory? No
 Fee Explanation:
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
ING Life Insurance and Annuity Company	\$20.00	10/10/2008	23108049

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Linda Bird	10/17/2008	10/17/2008

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Disposition

Disposition Date: 10/17/2008

Implementation Date:

Status: Approved

Comment:

Rate data does NOT apply to filing.

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Form	Employer-Directed Deduction of TPA Fees from Participant Accts Endorsement		Yes

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Form Schedule

Lead Form Number: E-TPA-08

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	E-TPA-08	Policy/Cont	Employer-Directed ract/Fratern Deduction of TPA al Fees from Participant Certificate: Accts Endorsement Amendmen t, Insert Page, Endorseme nt or Rider	Initial		50	E-TPA-08.pdf

ING Life Insurance and Annuity Company
Employer-Directed Deduction of Third Party Administrator (TPA)
Fees from Participant Accounts
ENDORSEMENT

The Contract and Certificate, if applicable are hereby endorsed as follows:

Upon written direction from an employer sponsoring a 403(b), 457(b) or 401(a) Plan, and upon confirmation from the employer that such deduction is permitted under the terms of its Plan, the ING Life Insurance and Annuity Company (the Company) will deduct from account values of Participants under the employer's Plan the amounts specified by the employer to pay costs associated with a third party administrator engaged by the employer to administer the Plan in accordance with its terms, the Code and the Treasury Regulations. The Company will deduct such amounts at the frequency specified by the employer, provided such frequency is agreed to by the Company. The Company will not retain any such amounts deducted but will pay them to the third party administrator as directed by the employer.

If an employer does not direct such deductions, the Company may in its discretion elect to pay all or part of third party administrator expenses of the employer's Plan in accordance with any applicable provisions of the Contract.

The effective date of this endorsement is the later of the Effective Date of the Contract or Certificate or the date the endorsement is attached to the Contract or Certificate.



President
ING Life Insurance and Annuity Company

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Supporting Document Schedules

Review Status:

Satisfied -Name: Certification/Notice

09/18/2008

Comments:

Attached is the compliance certification.

Attachment:

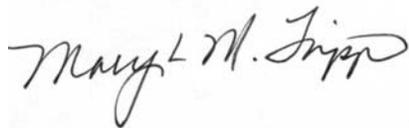
AR Compliance Cert.pdf

STATE OF ARKANSAS
CERTIFICATION OF COMPLIANCE

CARRIER: ING Life Insurance and Annuity Company

FORM NUMBER(S): E-TPA-08 FORM TITLE(S): Employer-Directed Deduction of Third
Party Administrator (TPA) Fees from
Participant Accounts Endorsement

I hereby certify that to the best of my knowledge and belief the above form submission complies with Rule and Regulation 19s10 as well as all applicable requirements for the State of Arkansas.



Signature of Officer or Representative

Marylou M. Tripp

Name
Contract Analyst

Title and/or Business Affiliation

October 10, 2008

Date