

SERFF Tracking Number: LCNC-125721631 State: Arkansas
Filing Company: The Lincoln National Life Insurance Company State Tracking Number: 39592
Company Tracking Number: FORM 32481-G-12/08
TOI: A10 Annuities - Other Sub-TOI: A10.000 Annuities - Other
Product Name: Section 403(b) Annuity Endorsement
Project Name/Number: Section 403(b) Annuity Endorsement (Group)/Form 32481-G-12/08

Filing at a Glance

Company: The Lincoln National Life Insurance Company

Product Name: Section 403(b) Annuity Endorsement SERFF Tr Num: LCNC-125721631 State: ArkansasLH

TOI: A10 Annuities - Other

SERFF Status: Closed

State Tr Num: 39592

Sub-TOI: A10.000 Annuities - Other

Co Tr Num: FORM 32481-G-12/08

State Status: Approved-Closed

Filing Type: Form

Co Status:

Reviewer(s): Linda Bird

Authors: Shirley Gordon, Omayra Vega, Renee Gardner

Disposition Date: 07/14/2008

Date Submitted: 07/11/2008

Disposition Status: Approved

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: Section 403(b) Annuity Endorsement (Group)

Status of Filing in Domicile: Not Filed

Project Number: Form 32481-G-12/08

Date Approved in Domicile:

Requested Filing Mode:

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Group

Submission Type: New Submission

Group Market Size: Small and Large

Overall Rate Impact:

Group Market Type: Employer

Filing Status Changed: 07/14/2008

State Status Changed: 07/14/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Lincoln National Life Insurance Company, NAIC #65676, FEIN# 35-0472300

RE: Form 32481-G-12/08 – Section 403(b) Group Annuity Endorsement

The above captioned form is submitted by The Lincoln National Life Insurance Company for your review and approval.

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This form is exempt from filing in our domicile State of Indiana effective April 7, 1999.

This form does not contain any unusual or possibly controversial items that deviate from normal company and industry standards. We certify that no assumptions or provisions unfairly discriminate in availability, rates, benefits, or any other way for prospective insureds. It is submitted in final printed form and is subject only to minor modification in paper stock, ink, and adaptation to computer printing.

This form is intended to be issued to both existing and new contractholders under our previously approved Group Annuity contracts:

It has been structured for use with any future contract we may file with the Department, if permitted by the product design.

This form was prepared to comply with revised Code section 403(b) regulations, effective January 1, 2009. This form will only be attached if the contract is funding a plan under Code section 403(b).

Thank you for your time and prompt review of this submission. Please let me know if I can provide any additional information that would assist you in the review process.

Sincerely,

Omayra Vega

Contract Analyst

800-238-6252, ext 63192 or 860-466-3192

FAX: 860-466-1348

E-Mail: omayra.vega@LFG.com

Company and Contact

Filing Contact Information

omayra vega, contract analyst

350 Church St

Hartford, CT 06103

omayra.vega@lfg.com

(860) 466-3192 [Phone]

(860) 466-1348[FAX]

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Filing Company Information

The Lincoln National Life Insurance Company CoCode: 65676 State of Domicile: Indiana
350 Church Street - MPM1 Group Code: 20 Company Type: Life
Hartford, CT 06103-1106 Group Name: State ID Number:
(860) 466-2899 ext. [Phone] FEIN Number: 35-0472300

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Filing Fees

Fee Required? Yes
Fee Amount: \$35.00
Retaliatory? Yes
Fee Explanation: Our Retaliatory fee is \$35.00
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
The Lincoln National Life Insurance Company	\$35.00	07/11/2008	21364398

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Linda Bird	07/14/2008	07/14/2008

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Disposition

Disposition Date: 07/14/2008

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
Supporting Document	Cover Letter		Yes
Form	403(b) Annuity Endorsement		Yes

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Form Schedule

Lead Form Number: Form 32481-G-12/08

Review Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	32481-G-12/08	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	Initial			403b Group Annuity Endorsement.pdf

Section 403(b) Annuity Endorsement

Made a part of the Contract to which it is attached

The Contract will be governed by this Endorsement and Code Section 403(b), and any contrary provision in the Contract is amended as follows:

DEFINITIONS

Account Value: The value held under this Contract. The value may be maintained in either the Fixed Account, the Variable Account or both, depending on allocations.

Participant: The individual for whose benefit the employer established an annuity program under Code Section 403(b) and for whom this Contract is purchased. This Participant will be the Annuitant under the Contract.

Plan Sponsor

The employer sponsoring the 403(b) plan.

MAXIMUM CONTRIBUTIONS

1. Total and overall limitations on Contributions in a calendar year for a Participant are subject to Code limitations and non-discrimination rules imposed upon annuity contracts governed by Code Sections 403(b) and 415, as they may be amended from time to time. All elective deferrals for a Participant may not exceed the limits of Code Section 402(g). Unless Lincoln Life has specifically agreed to do so for a particular plan, Lincoln Life assumes no responsibility under this Contract for monitoring these limits for a plan or for a Participant. Contributions in excess of such limits or in violation of any non-discrimination rule (and earnings thereon) may be distributed by Lincoln Life, at the direction of the Contractowner, Participant, or the Plan Sponsor, as permitted by law and by Section 3 of this Endorsement. Lincoln Life reserves the right to require an annual minimum Contribution no greater than \$200 annually.

Contributions in excess of the limits of Section 415 that are allowed to remain in the Contract, as well as employer contributions which are non-vested according to the terms of the 403(b) plan, will be accounted for separately and considered as governed by Section 403(c) as provided in the tax regulations under Section 403(b).

Lincoln Life will separately account for the following types of contributions and associated earnings:

- a) elective deferrals
- b) employer contributions
- c) post tax contributions
- d) Roth 403(b) contributions

Contributions not properly identified will be treated as elective deferrals.

CHARACTERIZATION OF TRANSFERS

2. For all Contributions transferred from another contract other than a contract issued by Lincoln Life, Lincoln Life must be provided with the following information in a form acceptable to Lincoln Life:
 - a) The source of such Contributions; for example, elective deferral, employer-contributions or post tax contributions. Where no source information is provided, Lincoln Life will treat such Contributions as 403(b) elective deferral amounts.
 - b) Whether such Contributions are a rollover under Code Section 402 or a transfer from a 403(b) plan and whether or not such transfer is subject to Code Section 403(b)(7). Where no such information is

provided, Lincoln Life will treat such Contributions as subject to Code Section 403(b)(7), and not subject to the terms of Code Section 403(b)(1).

- c) Identification of such Contributions made or earnings credited prior to January 1, 1987; or prior to January 1, 1989.

Contributions; not properly identified will be treated as contributions made after December 31, 1988 for purposes of Sections 3 and 4.

WITHDRAWAL DOCUMENTATION FOR SECTION 403(b) PLANS

3. Unless otherwise agreed to with the Plan Sponsor, withdrawal requests for Participants under Section 403(b) plans must be approved, in a form agreed to by Lincoln Life by the Plan's Sponsor; must provide instructions specifying the portion of a Participant's Account Value that is available for distribution; and provide instructions as to the disposition of non-vested amounts.

MINIMUM DISTRIBUTION REQUIREMENTS FOR SECTION 403(b) PLANS

4. Code Section 403(b)(10) requires a Participant to take withdrawals from the Contract or 403(b) plan in a manner which satisfies requirements of the required minimum distribution rules under Code Section 401(a)(9) and the regulations promulgated thereunder. To the extent they apply to 403(b) plans, these required minimum distribution rules are hereby incorporated by reference in this Endorsement as a permissible withdrawal, subject to Section 3. This incorporation by reference includes changes made to such minimum distribution rules by legislation, proposed and final regulation, or rulings by the United States Department of Treasury.

Unless Lincoln Life has specifically agreed with a Plan Sponsor, Lincoln Life assumes no responsibility for monitoring withdrawals, mandating distributions or insuring compliance with these required minimum distribution rules.

NONTRANSFERABLE

5. The Participant's interest in this Contract is nontransferable within the meaning of Section 401(g) of the Code. This Contract or the Participant's interest in this Contract may not be sold, assigned, discounted, or pledged as collateral for a loan and may not be alienated except under the terms of a qualified domestic relations order within the meaning of Section 414(p) of the Code or as otherwise permitted by applicable law.

NONFORFEITABLE

6. The rights of the Participant in this Contract are nonforfeitable as defined in the regulations under Section 411. Employer contributions may be subject to a vesting schedule. Also, see Section 1.

NON-TAXABLE EXCHANGES OR TRANSFERS

7. Non-taxable contract exchanges, plan to plan transfers or contract to plan transfers to purchase service credits under a defined benefit governmental plan pursuant to Code Section 403(b)(13) or other applicable law as may be made, are permitted under this Contract only to the extent permitted under the 403(b) plan.

DIRECT ROLLOVER

8. Participant's Account Values may be rolled over to another eligible retirement plan in accordance with Code Sections 403(b)(8) and 402(c), as they may be amended from time to time, subject to Section 3 of this Endorsement and in a time and manner prescribed by Lincoln Life.

LIMITATION ON INCIDENTAL BENEFITS

9. This Contract satisfies the incidental benefit requirements of Section 401(a).

DISTRIBUTION OF CUSTODIAL ACCOUNT CONTRIBUTIONS

10. Contributions transferred from any plan or arrangement which has been identified by the Participant or Contractowner as being subject to Code Section 403(b)(7) will continue to be subject to Code Section 403(b)(7), and are subject to Sections 3 and 4, unless otherwise agreed upon between Lincoln Life and the Contractowner.

ANNUITANT

11. The Contractowner represents that it is an eligible organization described in Section 403(b)(1)(A) of the Code and that the plan or arrangement meets the requirements of Code Section 403(b).

A contingent Annuitant or a joint Annuitant-cannot be named.

AUTHORITY TO AMEND TO COMPLY WITH TAX CODE

12. Lincoln Life reserves the right to amend or modify the Contract or this Endorsement to the extent necessary to comply with any law, regulation, ruling or other requirement necessary to establish or maintain the tax treatment under Code Section 403(b).

ERISA REQUIREMENTS

13. If the 403(b) plan or arrangement is subject to the requirements of ERISA, this Contract will also be subject to the requirements of ERISA. Lincoln Life is not the plan administrator of a plan or arrangement subject to ERISA. Any responsibility related to the appropriateness of any withdrawal, consents (or revocation thereof), or any other fiduciary decision related to the administration of the plan is that of the employer or the plan administrator.

The Lincoln National Life Insurance Company


Dennis R. Glass, President

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Rate Information

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Supporting Document Schedules

Review Status:

Satisfied -Name: Certification/Notice

07/03/2008

Comments:

Reg 19 Cert Attached.

Attachment:

Arkansas Reg. 19.pdf

Review Status:

Satisfied -Name: Cover Letter

07/03/2008

Comments:

Cover letter attached.

Attachment:

AR Cover letter.pdf

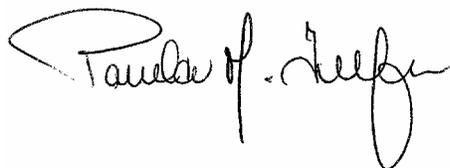
ARKANSAS

CERTIFICATE OF COMPLIANCE

The Lincoln National Life Insurance Company

Re: Form 32481-G-12/08

To the best of my knowledge and belief, the policy form listed above complies with the provisions of Rule and Regulation 19 as well as all applicable requirements of the Arkansas Insurance Department.

A handwritten signature in cursive script that reads "Pamela Telfer". The signature is written in black ink on a white background.

Pamela Telfer, AVP
Product Compliance

Date: July 8, 2008



The Lincoln National Life Insurance Company
350 Church Street, MPM1
Hartford, CT 06103-1103

July 8, 2008

Ms. Linda Bird
Life and Health Division
Arkansas Insurance Department
1200 West Third Street
Little Rock, AR 72201

Attention: Linda Bird
Life, A&H Division

Lincoln National Life Insurance Company, NAIC #65676, FEIN# 35-0472300

RE: Form 32481-G-12/08 – Section 403(b) Group Annuity Endorsement

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Thank you for your time and prompt review of this submission. Please let me know if I can provide any additional information that would assist you in the review process.

Sincerely,

A handwritten signature in cursive script that reads 'Omayra Vega'.

Omayra Vega
Contract Analyst
800-238-6252, ext 63192 or 860-466-3192
FAX: 860-466-1348
E-Mail: omayra.vega@LFG.com