

SERFF Tracking Number: SEFL-126332952 State: Arkansas
Filing Company: Assurity Life Insurance Company State Tracking Number: 43724
Company Tracking Number: CD ANNUITY
TOI: A02I Individual Annuities- Deferred Non- Sub-TOI: A02I.003 Single Premium
Variable
Product Name: CD Annuity
Project Name/Number: CD Annuity/CD Annuity

Filing at a Glance

Company: Assurity Life Insurance Company

Product Name: CD Annuity

TOI: A02I Individual Annuities- Deferred Non-
Variable

Sub-TOI: A02I.003 Single Premium

Filing Type: Form

SERFF Tr Num: SEFL-126332952 State: Arkansas

SERFF Status: Closed-Approved- State Tr Num: 43724
Closed

Co Tr Num: CD ANNUITY

State Status: Approved-Closed

Reviewer(s): Linda Bird

Author: Kristi Hendrickson

Disposition Date: 10/09/2009

Date Submitted: 10/08/2009

Disposition Status: Approved-
Closed

Implementation Date Requested:

Implementation Date:

State Filing Description:

General Information

Project Name: CD Annuity

Project Number: CD Annuity

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 10/09/2009

Status of Filing in Domicile: Authorized

Date Approved in Domicile: 10/05/2009

Domicile Status Comments: Approved

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 10/09/2009

Created By: Kristi Hendrickson

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Kristi Hendrickson

Filing Description:

Form Numbers Form Title

I A0909 Single Premium Deferred Non-Qualified Annuity

I A0919 Single Premium Deferred Qualified Annuity

47-100-03351 (R09-09) Application to Assurity Life Insurance Company

Assurity Life Insurance Company submits the above captioned forms for review and approval.

New Forms/Replacement:

<i>SERFF Tracking Number:</i>	<i>SEFL-126332952</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Assurity Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>43724</i>
<i>Company Tracking Number:</i>	<i>CD ANNUITY</i>		
<i>TOI:</i>	<i>A02I Individual Annuities- Deferred Non-Variable</i>	<i>Sub-TOI:</i>	<i>A02I.003 Single Premium</i>
<i>Product Name:</i>	<i>CD Annuity</i>		
<i>Project Name/Number:</i>	<i>CD Annuity/CD Annuity</i>		

These forms are new and have not been submitted previously. They will replace the forms listed below:

New Form Form being Replaced Approval Date

I A0909 A-L 275 January 21, 2003

I A0919 A-L 272 January 21, 2003

47-100-03351 (R09-09) 47-100-03351 December 11, 2006

008

I A0909, Single Premium Deferred Non-Qualified Annuity

I A0919, Single Premium Deferred Qualified Annuity

Forms I A0909 and I A0919 are individual, single premium deferred annuity policies. Form I A0919 is a qualified annuity intended for use in conjunction with the required prototype form as a single premium individual annuity authorized under IRC § 408(b). Form I A0909 is non-qualified.

Distribution/Marketing: The products will be distributed by Assurity's licensed agents and brokers.

47-100-03351 (R09-09), Application to Assurity Life Insurance Company

Application for all annuity forms offered by Assurity Life Insurance Company will be taken on this application form.

Company and Contact

Filing Contact Information

Kristi Hendrickson, Policy Filing Specialist	policyfiling@assurity.com
1526 K Street	402-437-3452 [Phone]
Lincoln, NE 68508	402-437-3802 [FAX]

Filing Company Information

Assurity Life Insurance Company	CoCode: 71439	State of Domicile: Nebraska
1526 K Street	Group Code: -99	Company Type: Life/Health
P.O. Box 82533	Group Name:	State ID Number:
Lincoln, NE 68501-2533	FEIN Number: 38-1843471	
(800) 276-7619 ext. [Phone]		

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No

SERFF Tracking Number: SEFL-126332952 State: Arkansas
Filing Company: Assurity Life Insurance Company State Tracking Number: 43724
Company Tracking Number: CD ANNUITY
TOI: A02I Individual Annuities- Deferred Non- Sub-TOI: A02I.003 Single Premium
Variable
Product Name: CD Annuity
Project Name/Number: CD Annuity/CD Annuity
Fee Explanation: 50.00 policy with forms
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Assurity Life Insurance Company	\$50.00	10/08/2009	31149123

SERFF Tracking Number: SEFL-126332952 State: Arkansas
Filing Company: Assurity Life Insurance Company State Tracking Number: 43724
Company Tracking Number: CD ANNUITY
TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.003 Single Premium
Variable
Product Name: CD Annuity
Project Name/Number: CD Annuity/CD Annuity

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Linda Bird	10/09/2009	10/09/2009

SERFF Tracking Number: SEFL-126332952 *State:* Arkansas
Filing Company: Assurity Life Insurance Company *State Tracking Number:* 43724
Company Tracking Number: CD ANNUITY
TOI: A02I Individual Annuities- Deferred Non- *Sub-TOI:* A02I.003 Single Premium
Variable
Product Name: CD Annuity
Project Name/Number: CD Annuity/CD Annuity

Disposition

Disposition Date: 10/09/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: SEFL-126332952 State: Arkansas
 Filing Company: Assurity Life Insurance Company State Tracking Number: 43724
 Company Tracking Number: CD ANNUITY
 TOI: A02I Individual Annuities- Deferred Non- Sub-TOI: A02I.003 Single Premium
 Variable
 Product Name: CD Annuity
 Project Name/Number: CD Annuity/CD Annuity

Form Schedule

Lead Form Number: I A0909

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	I A0909	Policy/Cont Single Premium ract/Fratern Deferred Non- al Qualified Annuity Certificate	Initial		50.200	Non-Qualified I A0909.pdf
	I A0919	Policy/Cont Single Premium ract/Fratern Deferred Qualified al Annuity Certificate	Initial		53.300	Qualified I A0919.pdf
	47-100-03351 (R09-09)	Application/ Application to Enrollment Assurity Life Form Insurance Company	Revised	Replaced Form #: 47-100-03351 Previous Filing #:	51.200	47-100-03351 _R09-09_.pdf



This is a legal contract between You (the Owner) and Us (Assurity Life Insurance Company, a stock company). It is issued in return for Your approved application and single premium. We agree to pay this policy's benefits to the Annuitant, if alive, on the Maturity Date.

RIGHT TO CANCEL

You may cancel this policy within 30 days of receiving it by returning the policy to Our administrative office. As soon as You deliver or mail the policy to Us, it is treated as if it was never issued. Your premium payment will be refunded when We receive the policy.

This policy is based on answers in the application forms. If all answers are not true and complete to the best of Your knowledge and belief, the policy may be affected.

Assurity Life Insurance Company has signed this policy on the Issue Date.



President



Secretary

Assurity Life Insurance Company
Administrative Office
PO Box 82533, Lincoln, Nebraska 68501-2533
Toll-free (800) 869-0355

SINGLE PREMIUM DEFERRED NON-QUALIFIED ANNUITY

Nonparticipating Policy

Agent Name: [Alex Agent]
Address: [123 Any Boulevard]
[Anytown XX 12345-6789]

Telephone: [(800) 456-7890]

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POLICY SCHEDULE

<u>SECURE PERIOD YEAR</u>	<u>SURRENDER CHARGE PERCENTAGE</u>
1	7.0%
2	7.0%
3	7.0%
[4	6.0%
5	5.0%
6	5.0%
7	5.0%]

Minimum Acceptable Initial Premium: \$[2,000.00]

Bonus Interest Rate: []%

Declared Interest Rate: [3]%

Guaranteed Interest Rate: [1.5]%

Secure Period: [3] years

The Bonus Interest Rate on the initial premium is effective for the 12-Month Period that begins on this policy's Issue Date.

Annuitant: [John Doe]

Policy Number: [1234567890]

Owner: [John Doe]

Initial Premium: \$[2,000.00]

Issue Date: [October 1, 2009]

Secure Period Start Date: [October 1, 2009]

Maturity Date: [October 1, 2034]

Policy Renewal Date: [October 1, 2012]

DEFINITIONS

12-Month Period means a consecutive period of 12 calendar months.

Adjusted Annuitant's Account means the balance of the Annuitant's Account on the Request Date plus the total amount withdrawn within the 12-Month Period preceding the Request Date.

Anniversary means the same day of the same month in each subsequent year following a given date.

Annuitant means the person on whose life the amount and duration of annuity payments depend.

Annuitant's Account means the single premium and interest credited, reduced by withdrawals. The Annuitant's Account changes as it is increased by interest earned and/or reduced by withdrawals. Interest paid on the Annuitant's Account will be at a rate not less than the Guaranteed Interest Rate.

Beneficiary means the person(s) named by the Owner in the application, or later changed as provided in the Change of Beneficiary section, to receive this policy's Death Benefit, if any.

Bonus Interest Rate means the interest rate credited to the single premium for the first Policy Year of any Secure Period. We will state the Bonus Interest Rate prior to the start date of any Secure Period.

Declared Interest Rate means the rate credited to the Annuitant's Account for the remainder of the Secure Period following the first Policy Year of any Secure Period. We will state the Declared Interest Rate prior to the start date of any Secure Period.

Guaranteed Interest Rate means the minimum interest rate to be credited on the Annuitant's Account, as shown on the Policy Schedule.

Issue Date means the date the Annuitant is insured for the benefits of this policy, as shown on the Policy Schedule.

Maturity Date means the Anniversary following the Annuitant's 90th birthday or the next Policy Renewal Date after age 90, whichever is later.

Nursing Home Confinement means being a resident of a facility that is licensed as a nursing home or the equivalent, by the state in which it is located. The facility must primarily provide nursing care, be supervised by a registered or licensed practical nurse, keep daily patient medical records, and record and control all medications dispensed.

Owner means the person named in the application, or later changed, who is entitled to the ownership rights. If no Owner is designated, the Annuitant is the Owner.

Physician means a licensed medical provider who acts within the scope of his or her license. The Physician must be someone other than You, the Annuitant, a member of Your immediate family, or a member of the Annuitant's immediate family.

Policy Renewal Date means the day following the last day of any Secure Period.

Policy Year means the one-year period from the Issue Date to the first Anniversary date, or from one Anniversary date to the next.

Request Date means the date We receive Your withdrawal request.

Secure Period means the period of time that begins on the Secure Period Start Date and ends on the day before the Policy Renewal Date.

Surrender Charge means an amount deducted from the Annuitant's Account for withdrawal amounts in excess of that available in the Withdrawals Free of Surrender Charges section. The Surrender Charge is based on the Request Date.

Surrender Value means the Annuitant's Account, less any applicable Surrender Charge.

Total Disability means a physical or mental impairment that:

- keeps a person from doing the important, substantial and material duties of their own occupation;
- starts while this policy is in force; and
- is expected to be permanent or to result in death.

The Total Disability must be certified by a Physician.

We, Us, or Our means Assurity Life Insurance Company.

You or Your means the Owner of the policy.

PREMIUM and RATES

Premium Payment. This policy is issued with the single premium paid at the time of application. No other premiums will be accepted under this policy.

Application of Interest Rates. During the first 12 months of any Secure Period, the single premium will earn interest at the Bonus Interest Rate in effect on the Issue Date or Policy Renewal Date of the policy. The Bonus Interest Rate will apply to the single premium, reduced by any withdrawals and applicable Surrender Charge.

After the first 12 months of any Secure Period, the Annuitant's Account will earn interest at the Declared Interest Rate.

POLICY RENEWAL

At the end of any Secure Period, this policy will automatically renew for a new Secure Period. The balance of the Annuitant's Account at the end of any Secure Period will be the single premium applied to a new Secure Period. A supplemental Policy Schedule page will be issued to You before the Policy Renewal Date. We will state the new Bonus Interest Rate and Declared Interest Rate for the new Secure Period. The policy will automatically renew at the end of any Secure Period unless You elect policy continuation or surrender the policy for the Surrender Value. A notice of policy renewal will be sent to You at least 30 days before the Policy Renewal Date. No Surrender Charges will apply to any withdrawal or policy surrender within 30 days prior to the Policy Renewal Date. Beginning with the Secure Period Start Date of the renewed policy, Surrender Charges will apply as provided in the Withdrawals section.

POLICY CONTINUATION

You may elect policy continuation prior to the Policy Renewal Date of any Secure Period. The election must be in writing and received at Our administrative office prior to the Policy Renewal Date. We will notify You of this option at least 30 days prior to the Policy Renewal Date. If elected, policy continuation will begin on the next Policy Renewal Date.

Under policy continuation, the Annuitant's Account will earn interest at a portfolio interest rate declared by Us, but not less than the Guaranteed Interest Rate. No Surrender Charges will apply to any withdrawals or surrender of the policy during policy continuation.

BENEFITS

This policy's proceeds will be the Annuitant's Account, less any applicable Surrender Charges, on the earlier of the:

- surrender of this policy prior to the Maturity Date;
- Maturity Date;
- Annuitant's date of death; or
- Owner's date of death.

Surrender. You may elect to surrender the policy for the Surrender Value at any time prior to the Maturity Date. The proceeds will be subject to Surrender Charges unless the surrender occurs 30 days prior to the Policy Renewal Date. Surrender Charges will not be applied during policy continuation.

You may elect a payment option at the time of surrender by providing a written statement to Our administrative office. If a payment option is not elected, the Surrender Value will be paid in a lump sum.

Options at Maturity. Prior to the Maturity Date, You may submit a written notice to elect to receive an annuity benefit or the Surrender Value in a lump sum. If You elect a Payment Option, We will begin payments on the Maturity Date. If You do not choose an option, the automatic benefit will be "Life Income with a 10-Year Guaranteed Period". Before the payments begin, You must exchange this policy for a supplementary agreement expressing the payment terms.

You are the person who will receive payments under a payment option. We must agree to a payment option if the Owner is not a natural person (such as a corporation or partnership) or there is an assignee. You will receive a payment contract explaining the payment option chosen. The payment contract will control payments if You die before all payments are made. Payment contracts cannot be assigned.

Payment Amount. Annuity payment amounts may be based on the:

- US Annuity 2000 mortality table;
- Surrender Value as of the Maturity Date;
- payment option chosen;
- Guaranteed Interest Rate;
- payment period chosen;
- frequency of payments;
- age of the Annuitant (proof of age may be required); and
- gender of the Annuitant.

The amount of the payment You receive may be reduced by any state or federal income taxes that We are required to withhold. Annuity payments, before income taxes are withheld, will not be less than the payments shown in the Payment Option Table.

Minimum Payment Amount. We reserve the right to pay the Surrender Value in a lump sum if any payment would be less than \$100.

Payment Options.

Payment Option 1 – Life Income. We will make payments as long as the Annuitant lives. Annuity payments stop when the Annuitant dies. You must promptly notify Us when the Annuitant dies and return to Us any payments We made to You after the Annuitant's death. **Note:** No residual value will remain when the Annuitant dies, even if We have made only one payment. No Beneficiary designation is applicable under this payment option.

Payment Option 2 – Fixed Period. We will make equal payments for a fixed number of years not to exceed 30 years. Payments will not be less than the amounts shown in the Payment Option Table. Payments may be increased by additional interest. If the Annuitant dies before the end of the guaranteed period, the Beneficiary may choose to receive the balance of the guaranteed payments as they are due or to receive a lump sum payment of the commuted value of any remaining guaranteed payments.

Payment Option 3 – Life Income with Guaranteed Period. We will make payments as long as the Annuitant lives. Payments are guaranteed for the number of years chosen. The minimum guaranteed period is five years, unless We agree to a shorter period. If the Annuitant dies before the end of the guaranteed period, the Beneficiary may choose to receive the balance of the guaranteed payments as they are due or to receive a lump sum payment of the commuted value of any remaining guaranteed payments. You must promptly notify Us when the Annuitant dies and return to Us any payments We made to You after the Annuitant's death.

Other Options. We may offer additional payment options on the date You elect a payment option. At Your request, We will provide the payment terms for any available payment option.

WITHDRAWALS

Withdrawal Procedure. You can make withdrawals from the Annuitant's Account by executing and signing the form specified by Us for requesting a withdrawal. The form must be submitted to Our administrative office. The amount of any withdrawal is limited to the account value less withdrawal fees. If the benefits have been assigned, the assignee will need to authorize any withdrawals made. We may defer withdrawals for up to six months. Payment of withdrawals ends Our responsibility under this policy for the portion of the Annuitant's Account withdrawn.

Withdrawal Amounts.

- 1. Withdrawals Free of Surrender Charges.** The amount You may withdraw free of a Surrender Charge is equal to 10% of the Adjusted Annuitant's Account, less any amount withdrawn during the 12-Month Period preceding the Request Date. The amount free of a Surrender Charge is limited to 10% of the Annuitant's Account during any 12-Month Period.
- 2. Withdrawals Subject to Surrender Charges.** A withdrawal amount that exceeds the amount withdrawn under the Withdrawals Free of Surrender Charges section is subject to a Surrender Charge. The percentage corresponding to the Secure Period Year, as shown on the Policy Schedule, is used to calculate the Surrender Charge. Such percentage is applied to the amount of the withdrawal in excess of the Withdrawals Free of Surrender Charges. The result is the Surrender Charge, which is deducted from the Annuitant's Account.

Circumstances Allowing Complete Withdrawal without Surrender Charge. Under the following circumstances You may withdraw 100% of the Annuitant's Account without being subject to a Surrender Charge:

- within 30 days of any Policy Renewal Date;
- anytime during policy continuation;
- upon Our acceptance of proof of the Annuitant's Total Disability;
- by selection of a payment option after the first Policy Year providing payments for life or at least five years; or
- 45 consecutive days after the Annuitant's Nursing Home Confinement, which must begin after the Issue Date.

DEATH PROCEEDS

Death Benefit. The Death Benefit is equal to the Annuitant's Account. Upon receiving proof of Your or the Annuitant's death at Our administrative office, We will process the death benefit as set forth below:

1. If You are the Annuitant and You die while this policy is in force and before the Maturity Date, We will pay the death benefit to the Beneficiary. If the Beneficiary is Your spouse, he or she may elect to a) continue the policy and exercise all of the Owner's rights until the Maturity Date; or b) receive full distribution of the proceeds within five years after Your date of death.
2. If You are not the Annuitant and the Annuitant dies while this policy is in force and before the Maturity Date, We will pay the death benefit to the Beneficiary.
3. If You are not the Annuitant and You die while this policy is in force and before the Maturity Date, We will pay the death benefit to the Beneficiary. If the Beneficiary is Your spouse, he or she may elect to continue the policy and exercise all of the Owner's rights.
4. If this policy is jointly owned and only one joint Owner dies, the other joint Owner will become the Owner and no death benefit will be paid. At least one other joint Owner must survive the deceased joint Owner by at least 120 hours, otherwise We will pay the death benefit to the Beneficiary.
5. If You die on or after the Maturity Date, no death benefit is payable. Payments will be made in accordance with the payment option chosen.

Method of Payment. A Beneficiary entitled to a death benefit may choose one of the following methods of receiving the death benefit:

- payment in a lump sum;
- equal payments for a fixed period, measured from Your or the Annuitant's date of death, not to exceed five years; or
- substantially equal installments over the recipient's life or over a period not to exceed the recipient's life expectancy. Payment must begin no later than one year after Your or the Annuitant's date of death.

If no Beneficiary is named or survives You or the Annuitant, the death benefit will be paid to You or to Your estate.

The recipient of the death benefit must choose how the proceeds will be paid within 60 days of Your or the Annuitant's date of death. If a choice is not made, the death benefit will be paid in a lump sum.

GENERAL PROVISIONS

Annual Report. A report on this policy is furnished annually to You. The annual report will show the balance of the Annuitant's Account at the beginning of the Policy Year, the end of the Policy Year and the amounts withdrawn and earned during the Policy Year.

Assignment. You may assign the benefits, if any, available under this policy. An assignment is a transfer of some or all of Your rights under this policy to an assignee. You assign this policy by entering into a contract with the assignee. The assignment must be in writing. We will not be responsible for the legal effect of any assignment or for any payments We make or other action taken prior to receiving the signed request.

Change of Beneficiary. The Beneficiary may be changed while the Annuitant is alive. You may change the Beneficiary by completing and signing a form approved by Us for changing a Beneficiary and returning the form to Our administrative office for Our written acknowledgement.

Naming a new Beneficiary voids any prior designation unless otherwise stated in the new designation.

When We furnish You written acknowledgment of the change of Beneficiary, the change becomes effective on the date You signed Our form. We are not liable for payments made or action taken prior to Our written acknowledgement of the Beneficiary change.

Change of Ownership. Policy ownership may be changed while the Annuitant is alive. You may change ownership by completing and signing a form approved by Us for changing ownership and returning the form to Our administrative office for Our written acknowledgement.

Naming a new Owner voids any prior designation unless stated otherwise in the new designation. This policy does not allow the naming of a contingent Owner.

When We furnish You written acknowledgment of a change of ownership, the change becomes effective on the date You signed Our form. We are not liable for payment made or action taken prior to Our written acknowledgement of the ownership change. An ownership change will not change the Beneficiary or the Payment Option.

Entire Contract; Changes. This policy is a legal contract between You and Us. The entire contract consists of the policy, which includes the application and any endorsements or amendments We have attached. No change in this policy will be effective until approved by one of Our officers. No agent has authority to change this policy or to waive any of its provisions.

Minimum Benefit. This policy's benefits will not be less than the minimum benefits required by law in Your state of residence.

Misstatement of Age or Gender. If the age or gender of the Annuitant has been misstated and the annuity benefit would be affected, We will adjust the annuity benefit to account for the correct age or gender. We will adjust any underpayments immediately, using the guaranteed minimum annual interest rate shown on the Policy Schedule. Any overpayments will be deducted from future payments.

Ownership. This policy belongs to You and all policy rights may be exercised by You. This policy may have joint Owners. If this policy is jointly owned, references to Owner means all joint Owners. Joint Owners have an undivided interest in this policy. All joint Owners must be in agreement to exercise any ownership right and must sign a request to do so. Upon the death of a joint Owner, the surviving joint Owners will remain the Owners.

PAYMENT OPTION TABLE

Fixed Period (Years)	Amount of Each Payment			
	<u>Annual</u>	<u>Semi-Annual</u>	<u>Quarterly</u>	<u>Monthly</u>
5	[\$206.00	\$103.38	\$51.79	\$17.28]
6	[172.93	86.79	43.47	14.51]
7	[149.32	74.94	37.54	12.53]
8	[131.61	66.05	33.09	11.04]
9	[117.84	59.14	29.63	9.89]
10	[106.83	53.61	26.86	8.96]
11	[97.83	49.10	24.59	8.21]
12	[90.33	45.33	22.71	7.58]
13	[83.98	42.15	21.11	7.05]
14	[78.55	39.42	19.75	6.59]
15	[73.84	37.06	18.56	6.20]
16	[69.72	34.99	17.53	5.85]
17	[66.09	33.17	16.61	5.55]
18	[62.86	31.55	15.80	5.27]
19	[59.98	30.10	15.08	5.03]
20	[57.38	28.80	14.43	4.81]

*Payments are shown for each \$1,000.00 applied under Payment Options.
Figures not shown will be furnished on request.*

SINGLE PREMIUM DEFERRED NON-QUALIFIED ANNUITY

Nonparticipating Policy

READ YOUR POLICY CAREFULLY



This is a legal contract between You (the Owner) and Us (Assurity Life Insurance Company, a stock company). It is issued in return for Your approved application and single premium. We agree to pay this policy's benefits to the Annuitant, if alive, on the Maturity Date.

RIGHT TO CANCEL

You may cancel this policy within 30 days of receiving it by returning the policy to Our administrative office. As soon as You deliver or mail the policy to Us, it is treated as if it was never issued. Your premium payment will be refunded when We receive the policy.

This policy is based on answers in the application forms. If all answers are not true and complete to the best of Your knowledge and belief, the policy may be affected.

Assurity Life Insurance Company has signed this policy on the Issue Date.



President



Secretary

Assurity Life Insurance Company
Administrative Office
PO Box 82533, Lincoln, Nebraska 68501-2533
Toll-free (800) 869-0355

SINGLE PREMIUM DEFERRED QUALIFIED ANNUITY

Nonparticipating Policy

Agent Name: [Alex Agent]
Address: [123 Any Boulevard]
 [Anytown XX 12345-6789]

Telephone: [(800) 456-7890]

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POLICY SCHEDULE

<u>SECURE PERIOD YEAR</u>	<u>SURRENDER CHARGE PERCENTAGE</u>
1	7.0%
2	7.0%
3	7.0%
[4	6.0%
5	5.0%
6	5.0%
7	5.0%]

Minimum Acceptable Initial Premium: \$[2,000.00]

Bonus Interest Rate: []%

Declared Interest Rate: [3]%

Guaranteed Interest Rate: [1.5]%

Secure Period: [3] years

The Bonus Interest Rate on the initial premium is effective for the 12-Month Period that begins on this policy's Issue Date.

Annuitant: [John Doe]

Policy Number: [1234567890]

Owner: [John Doe]

Initial Premium: \$[2,000.00]

Issue Date: [October 1, 2009]

Secure Period Start Date: [October 1, 2009]

Maturity Date: [October 1, 2034]

Policy Renewal Date: [October 1, 2012]

DEFINITIONS

12-Month Period means a consecutive period of 12 calendar months.

Adjusted Annuitant's Account means the balance of the Annuitant's Account on the Request Date plus the total amount withdrawn within the 12-Month Period preceding the Request Date.

Anniversary means the same day of the same month in each subsequent year following a given date.

Annuitant means the person on whose life the amount and duration of annuity payments depend.

Annuitant's Account means the single premium and interest credited, reduced by withdrawals. The Annuitant's Account changes as it is increased by interest earned and/or reduced by withdrawals. Interest paid on the Annuitant's Account will be at a rate not less than the Guaranteed Interest Rate.

Beneficiary means the person(s) named by the Owner in the application, or later changed as provided in the Change of Beneficiary section, to receive this policy's Death Benefit, if any.

Bonus Interest Rate means the interest rate credited to the single premium for the first Policy Year of any Secure Period. We will state the Bonus Interest Rate prior to the start date of any Secure Period.

Declared Interest Rate means the rate credited to the Annuitant's Account for the remainder of the Secure Period following the first Policy Year of any Secure Period. We will state the Declared Interest Rate prior to the start date of any Secure Period.

Guaranteed Interest Rate means the minimum interest rate to be credited on the Annuitant's Account, as shown on the Policy Schedule.

Issue Date means the date the Annuitant is insured for the benefits of this policy, as shown on the Policy Schedule.

Maturity Date means the Anniversary following the Annuitant's 90th birthday or the next Policy Renewal Date after age 90, whichever is later.

Nursing Home Confinement means being a resident of a facility that is licensed as a nursing home or the equivalent, by the state in which it is located. The facility must primarily provide nursing care, be supervised by a registered or licensed practical nurse, keep daily patient medical records, and record and control all medications dispensed.

Owner means the person named in the application, or later changed, who is entitled to the ownership rights. If no Owner is designated, the Annuitant is the Owner.

Physician means a licensed medical provider who acts within the scope of his or her license. The Physician must be someone other than You, the Annuitant, a member of Your immediate family, or a member of the Annuitant's immediate family.

Policy Renewal Date means the day following the last day of any Secure Period.

Policy Year means the one-year period from the Issue Date to the first Anniversary date, or from one Anniversary date to the next.

Request Date means the date We receive Your withdrawal request.

Secure Period means the period of time that begins on the Secure Period Start Date and ends on the day before the Policy Renewal Date.

Surrender Charge means an amount deducted from the Annuitant's Account for withdrawal amounts in excess of that available in the Withdrawals Free of Surrender Charges section. The Surrender Charge is based on the Request Date.

Surrender Value means the Annuitant's Account, less any applicable Surrender Charge.

Total Disability means a physical or mental impairment that:

- keeps a person from doing the important, substantial and material duties of their own occupation;
- starts while this policy is in force; and
- is expected to be permanent or to result in death.

The Total Disability must be certified by a Physician.

We, Us, or Our means Assurity Life Insurance Company.

You or Your means the Owner of the policy.

PREMIUM and RATES

Premium Payment. This policy is issued with the single premium paid at the time of application. No other premiums will be accepted under this policy.

Application of Interest Rates. During the first 12 months of any Secure Period, the single premium will earn interest at the Bonus Interest Rate in effect on the Issue Date or Policy Renewal Date of the policy. The Bonus Interest Rate will apply to the single premium, reduced by any withdrawals and applicable Surrender Charge.

After the first 12 months of any Secure Period, the Annuitant's Account will earn interest at the Declared Interest Rate.

POLICY RENEWAL

At the end of any Secure Period, this policy will automatically renew for a new Secure Period. The balance of the Annuitant's Account at the end of any Secure Period will be the single premium applied to a new Secure Period. A supplemental Policy Schedule page will be issued to You before the Policy Renewal Date. We will state the new Bonus Interest Rate and Declared Interest Rate for the new Secure Period. The policy will automatically renew at the end of any Secure Period unless You elect policy continuation or surrender the policy for the Surrender Value. A notice of policy renewal will be sent to You at least 30 days before the Policy Renewal Date. No Surrender Charges will apply to any withdrawal or policy surrender within 30 days prior to the Policy Renewal Date. Beginning with the Secure Period Start Date of the renewed policy, Surrender Charges will apply as provided in the Withdrawals section.

POLICY CONTINUATION

You may elect policy continuation prior to the Policy Renewal Date of any Secure Period. The election must be in writing and received at Our administrative office prior to the Policy Renewal Date. We will notify You of this option at least 30 days prior to the Policy Renewal Date.

Under policy continuation, the Annuitant's Account will earn interest at a portfolio interest rate declared by Us, but not less than the Guaranteed Interest Rate. No Surrender Charges will apply to any withdrawals or surrender of the policy during policy continuation.

BENEFITS

This policy's proceeds will be the Annuitant's Account, less any applicable Surrender Charges, on the earlier of the:

- surrender of this policy prior to the Maturity Date;
- Maturity Date;
- Annuitant's date of death; or
- Owner's date of death.

Surrender. You may elect to surrender the policy for the Surrender Value at any time prior to the Maturity Date. The proceeds will be subject to Surrender Charges unless the surrender occurs 30 days prior to the Policy Renewal Date. Surrender Charges will not be applied during policy continuation.

You may elect a payment option at the time of surrender by providing a written statement to Our administrative office. If a payment option is not elected, the Surrender Value will be paid in a lump sum.

Options at Maturity. Prior to the Maturity Date, You may submit a written notice to elect to receive an annuity benefit or the Surrender Value in a lump sum. If You elect a Payment Option, We will begin payments on the Maturity Date. If You do not choose an option, the automatic benefit will be "Life Income with a 10-Year Guaranteed Period". Before the payments begin, You must exchange this policy for a supplementary agreement expressing the payment terms.

You are the person who will receive payments under a payment option. We must agree to a payment option if the Owner is not a natural person (such as a corporation or partnership). You will receive a payment contract explaining the payment option chosen. The payment contract will control payments if You die before all payments are made.

Payment Amount. Annuity payment amounts may be based on the:

- US Annuity 2000 mortality table;
- Surrender Value as of the Maturity Date;
- payment option chosen;
- Guaranteed Interest Rate;
- payment period chosen;
- frequency of payments;
- age of the Annuitant (proof of age may be required); and
- gender of the Annuitant.

The amount of the payment You receive may be reduced by any state or federal income taxes that We are required to withhold. Annuity payments, before income taxes are withheld, will not be less than the payments shown in the Payment Option Table.

Minimum Payment Amount. We reserve the right to pay the Surrender Value in a lump sum if any payment would be less than \$100.

Payment Options.

Payment Option 1 – Life Income. We will make payments as long as the Annuitant lives. Annuity payments stop when the Annuitant dies. You must promptly notify Us when the Annuitant dies and return to Us any payments We made to You after the Annuitant's death. **Note:** No residual value will remain when the Annuitant dies, even if We have made only one payment. No Beneficiary designation is applicable under this payment option.

Payment Option 2 – Fixed Period. We will make equal payments for a fixed number of years not to exceed 30 years. Payments will not be less than the amounts shown in the Payment Option Table. Payments may be increased by additional interest. If the Annuitant dies before the end of the guaranteed period, the Beneficiary may choose to receive the balance of the guaranteed payments as they are due or to receive a lump sum payment of the commuted value of any remaining guaranteed payments.

Payment Option 3 – Life Income with Guaranteed Period. We will make payments as long as the Annuitant lives. Payments are guaranteed for the number of years chosen. The minimum guaranteed period is five years, unless We agree to a shorter period. If the Annuitant dies before the end of the guaranteed period, the Beneficiary may choose to receive the balance of the guaranteed payments as they are due or to receive a lump sum payment of the commuted value of any remaining guaranteed payments. You must promptly notify Us when the Annuitant dies and return to Us any payments We made to You after the Annuitant's death.

Other Options. We may offer additional payment options on the date You elect a payment option. At Your request, We will provide the payment terms for any available payment option.

WITHDRAWALS

Withdrawal Procedure. You can make withdrawals from the Annuitant's Account by executing and signing the form specified by Us for requesting a withdrawal. The form must be submitted to Our administrative office. The amount of any withdrawal is limited to the account value less withdrawal fees. We may defer withdrawals for up to six months. Payment of withdrawals ends Our responsibility under this policy for the portion of the Annuitant's Account withdrawn.

Withdrawal Amounts.

- 1. Withdrawals Free of Surrender Charges.** The amount You may withdraw free of a Surrender Charge is equal to 10% of the Adjusted Annuitant's Account, less any amount withdrawn during the 12-Month Period preceding the Request Date. The amount free of a Surrender Charge is limited to 10% of the Annuitant's Account during any 12-Month Period.
- 2. Withdrawals Subject to Surrender Charges.** A withdrawal amount that exceeds the amount withdrawn under the Withdrawals Free of Surrender Charges section is subject to a Surrender Charge. The percentage corresponding to the Secure Period Year, as shown on the Policy Schedule, is used to calculate the Surrender Charge. Such percentage is applied to the amount of the withdrawal in excess of the Withdrawals Free of Surrender Charges. The result is the Surrender Charge, which is deducted from the Annuitant's Account.

Circumstances Allowing Complete Withdrawal without Surrender Charge. Under the following circumstances You may withdraw 100% of the Annuitant's Account without being subject to a Surrender Charge:

- within 30 days of any Policy Renewal Date;
- anytime during policy continuation;
- upon Our acceptance of proof of the Annuitant's Total Disability;
- by selection of a payment option after the first Policy Year providing payments for life or at least five years; or
- 45 consecutive days after the Annuitant's Nursing Home Confinement, which must begin after the Issue Date.

DEATH PROCEEDS

Death Benefit. The Death Benefit is equal to the Annuitant's Account. Upon receiving proof of Your or the Annuitant's death at Our administrative office, We will process the death benefit as set forth below:

1. If You are the Annuitant and You die while this policy is in force and before the Maturity Date, We will pay the death benefit to the Beneficiary. If the Beneficiary is Your spouse, he or she may elect to a) continue the policy and exercise all of the Owner's rights until the Maturity Date; or b) receive full distribution of the proceeds within five years after Your date of death.
2. If You are not the Annuitant and the Annuitant dies while this policy is in force and before the Maturity Date, We will pay the death benefit to the Beneficiary.
3. If You are not the Annuitant and You die while this policy is in force and before the Maturity Date, We will pay the death benefit to the Beneficiary. If the Beneficiary is Your spouse, he or she may elect to continue the policy and exercise all of the Owner's rights.
4. If You die on or after the Maturity Date, no death benefit is payable. Payments will be made in accordance with the payment option chosen.

Method of Payment. A Beneficiary entitled to a death benefit may choose one of the following methods of receiving the death benefit:

- payment in a lump sum;
- equal payments for a fixed period, measured from Your or the Annuitant's date of death, not to exceed five years; or
- substantially equal installments over the recipient's life or over a period not to exceed the recipient's life expectancy. Payment must begin no later than one year after Your or the Annuitant's date of death.

If no Beneficiary is named or survives You or the Annuitant, the death benefit will be paid to You or to Your estate.

The recipient of the death benefit must choose how the proceeds will be paid within 60 days of Your or the Annuitant's date of death. If a choice is not made, the death benefit will be paid in a lump sum.

GENERAL PROVISIONS

Annual Report. A report on this policy is furnished annually to You. The annual report will show the balance of the Annuitant's Account at the beginning of the Policy Year, the end of the Policy Year and the amounts withdrawn and earned during the Policy Year.

Assignment. Neither the policy nor the benefits it provides can be assigned.

Change of Beneficiary. The Beneficiary may be changed while the Annuitant is alive. You may change the Beneficiary by completing and signing a form approved by Us for changing a Beneficiary and returning the form to Our administrative office for Our written acknowledgement.

Naming a new Beneficiary voids any prior designation unless otherwise stated in the new designation.

When We furnish You written acknowledgment of the change of Beneficiary, the change becomes effective on the date You signed Our form. We are not liable for payments made or action taken prior to Our written acknowledgement of the Beneficiary change.

Change of Ownership. Policy ownership may be changed while the Annuitant is alive. You may change ownership by completing and signing a form approved by Us for changing ownership and returning the form to Our administrative office for Our written acknowledgement.

Naming a new Owner voids any prior designation unless stated otherwise in the new designation. This policy does not allow the naming of a contingent Owner.

When We furnish You written acknowledgment of a change of ownership, the change becomes effective on the date You signed Our form. We are not liable for payment made or action taken prior to Our written acknowledgement of the ownership change. An ownership change will not change the Beneficiary or the Payment Option.

Entire Contract; Changes. This policy is a legal contract between You and Us. The entire contract consists of the policy, which includes the application and any endorsements or amendments We have attached. No change in this policy will be effective until approved by one of Our officers. No agent has authority to change this policy or to waive any of its provisions.

Minimum Benefit. This policy's benefits will not be less than the minimum benefits required by law in Your state of residence.

Misstatement of Age or Gender. If the age or gender of the Annuitant has been misstated and the annuity benefit would be affected, We will adjust the annuity benefit to account for the correct age or gender. We will adjust any underpayments immediately, using the guaranteed minimum annual interest rate shown on the Policy Schedule. Any overpayments will be deducted from future payments.

Ownership. This policy belongs to You and all policy rights may be exercised by You.

Required Minimum Distributions. Receipt of proceeds under this policy must begin no later than April 1 of the year following the year You turn age 70 ½ or such other age as the law specifies.

PAYMENT OPTION TABLE

Fixed Period (Years)	Amount of Each Payment			
	<u>Annual</u>	<u>Semi-Annual</u>	<u>Quarterly</u>	<u>Monthly</u>
5	[\$206.00	\$103.38	\$51.79	\$17.28]
6	[172.93	86.79	43.47	14.51]
7	[149.32	74.94	37.54	12.53]
8	[131.61	66.05	33.09	11.04]
9	[117.84	59.14	29.63	9.89]
10	[106.83	53.61	26.86	8.96]
11	[97.83	49.10	24.59	8.21]
12	[90.33	45.33	22.71	7.58]
13	[83.98	42.15	21.11	7.05]
14	[78.55	39.42	19.75	6.59]
15	[73.84	37.06	18.56	6.20]
16	[69.72	34.99	17.53	5.85]
17	[66.09	33.17	16.61	5.55]
18	[62.86	31.55	15.80	5.27]
19	[59.98	30.10	15.08	5.03]
20	[57.38	28.80	14.43	4.81]

*Payments are shown for each \$1,000.00 applied under Payment Options.
Figures not shown will be furnished on request.*

SINGLE PREMIUM DEFERRED QUALIFIED ANNUITY

Nonparticipating Policy

READ YOUR POLICY CAREFULLY

**ASSURITY® LIFE INSURANCE COMPANY**Post Office Box 82533, Lincoln, NE 68501-2533
(402) 476-6500 • (800) 276-7619 • FAX (402) 437-4591**Application for ANNUITY****PLEASE PRINT WITH BLACK INK**

Select one: Plus One Annuity Secure 3 Annuity
 Secure 5 Annuity Secure 7 Annuity
 Encore Bonus Annuity Other _____
 Single Premium Immediate Annuity

Select one: Non-qualified Annuity
 Simplified Employee Pension (SEP)
 Traditional Individual Retirement Annuity (IRA) Roth IRA
 Savings Incentive Match Program for Employees (SIMPLE IRA)

1. ANNUITANT (Only one Annuitant for each application.)

Name First Middle Last _____ Date of Birth (MM/DD/YYYY) / /

Social Security No. _____ Male Female Birth State/Country _____ Age _____

Home Address Street Address City State ZIP+4 _____

If this insurance is issued, will it replace, modify or borrow against existing or pending coverage? Yes No
 Does the Proposed Insured have other insurance coverage in force? Yes No
 If YES, please provide details below, and complete and return the appropriate State Replacement Form.

Name of the company _____ Policy No.(s) _____

For SEP or SIMPLE Plan only, name of employer _____

2. OWNER (Non-qualified only. Information needed only if Annuitant is not the Owner.)

Name First Middle Last _____ Date of Birth (MM/DD/YYYY) / /

Soc. Sec. or Tax I.D. No. _____ Relationship to Insured _____

Home Address Street Address City State ZIP+4 _____

3. SPOUSE AS JOINT-OWNER (Non-qualified only.)

Name First Middle Last _____ Date of Birth (MM/DD/YYYY) / /

Social Security No. _____ Birth State/Country _____

Home Address Street Address City State ZIP+4 _____

4. BENEFICIARIES

If there is more than one Beneficiary, those surviving the deceased by 120 hours shall share benefits equally unless otherwise indicated.

Primary Beneficiary Name (First, Middle, Last)	Social Security No.	Relationship to Insured	Date of Birth (MM/DD/YYYY)	Share %
			/ /	
			/ /	
			/ /	

If no Beneficiary survives the deceased by 120 hours, benefits will be paid to the Contingent Beneficiary. When there is more than one Contingent Beneficiary, those surviving the deceased by 120 hours shall share benefits equally unless otherwise indicated.

Contingent Beneficiary Name (First, Middle, Last)	Social Security No.	Relationship to Insured	Date of Birth (MM/DD/YYYY)	Share %
			/ /	
			/ /	
			/ /	

5. PREMIUM INFORMATION

Single Premium (must be \$2,000 or over) \$ _____ (If \$500,000 or more, call the Investment Department for approval.)

IRA only: Rollover Account Direct Transfer New Money
 ROTH IRA: Conversion from Traditional IRA Transfer/Rollover from existing Roth New Money



6. SINGLE PREMIUM IMMEDIATE ANNUITY ONLY

Select a payment type below: **Yes**, withhold federal and state income taxes, if applicable, from the taxable distribution

- Left at Interest—payments will continue until the policy is terminated. The amount will vary depending on the amount of interest paid.
- Fixed Amount—payments will be determined by you and will continue until the amount originally applied is paid-in full Amount \$ _____
- Fixed Period—payments will continue until the end of the fixed period selected Period _____ Years (minimum 5 years)
- Joint Last Survivor—payments will continue until the first spouse dies. Then a level or reduced payment will continue for the surviving spouse's lifetime. Survivor percentage _____ % (100, 75 or 50)
- Life Income Period Certain—payments will continue for a selected period or your life, if longer. Period _____ Years (minimum 5 years)
- Installment Refund—payments will continue as long as you are living or until the amount originally applied is paid-in-full.
- Life Only—payments will continue as long as you are living.

Substitute Form W-9 information (Request for Taxpayer Identification No. and Certification): I, the Owner (or each Joint Owner), certify under penalties of perjury that the number shown is my correct Taxpayer Identification Number. I am not subject to backup withholding due to failure to report interest and dividend income, and I am a U.S. Person (including a U.S. resident alien). The Internal Revenue Service does not require my consent to any provision of this document other than the certification required to avoid backup withholding.

Any person who knowingly, and with intent to defraud any insurance company or other person, files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and shall also be subject to a substantial civil penalty where and to the extent allowed by state law.

IT IS AGREED that Assurity Life Insurance Company may rely upon the above statements as true representations to the best of my knowledge and belief.

Signed at _____ City _____ State _____ on _____ / _____ / _____ Date (MM/DD/YYYY)

Signature of Proposed Annuitant Signature of Joint Owner (Spouse) Signature of Owner (If other than Annuitant)

Signature of Witness Signature of Licensed Agent Print Agent Name, Agent No. and Code

FIELD UNDERWRITER'S STATEMENT

Please answer the following questions:

1. a. What amount was collected with this application? \$ _____
b. Did you personally witness the Proposed Annuitant(s) (or Owner's if other than Annuitant) signature on the application? Yes No
c. How well do you know the Proposed Insured(s)? Well Slightly Not at all
2. If this insurance is issued, will it replace, modify or borrow against any existing or pending coverage? Yes No
Does any Proposed Insured have other insurance coverage in force? Yes No
3. Are commissions to be split? Yes No Agent No. _____ % Agent No. _____ %

I hereby certify that to the best of my knowledge and belief, the answers on the application and in this statement are true and correct.

Signature of Soliciting Agent _____ / _____ / _____ Date (MM/DD/YYYY) () - / () -
Business Phone No. and Fax No.

Soliciting Agent's Printed Name _____ Agent No. _____ Agent's E-mail

Special requests, remarks or instructions:



SERFF Tracking Number: SEFL-126332952 State: Arkansas
Filing Company: Assurity Life Insurance Company State Tracking Number: 43724
Company Tracking Number: CD ANNUITY
TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.003 Single Premium
Variable
Product Name: CD Annuity
Project Name/Number: CD Annuity/CD Annuity

Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification		
Comments:		
Attachment: READ CERT.pdf		

	Item Status:	Status Date:
Bypassed - Item: Application		
Bypass Reason: application being submitted for approval		
Comments:		

READABILITY CERTIFICATION

I hereby certify the following forms were tested for readability using Microsoft® Word XP program and achieved the following test results:

Company Name: Assurity Life Insurance Company

Form Number(s): I A0909 et al.

Type of Form: Annuity

Form No.	Description	Flesch Score
I A0909	Single Premium Deferred Non-Qualified Annuity	50.2
I A0919	Single Premium Deferred Qualified Annuity	53.3
47-100-03351 (R09-09)	Application for Annuity	51.2*

*when scored with I A0909



Signature

October 8, 2009

Date

Carol Watson
Vice President, General Counsel and Secretary