

SERFF Tracking Number: THRV-126317697 State: Arkansas
 Filing Company: Thrivent Financial for Lutherans State Tracking Number: 44064
 Company Tracking Number:
 TOI: A02I Individual Annuities- Deferred Non- Sub-TOI: A02I.003 Single Premium
 Variable
 Product Name: Replacement Face Pg SPDA
 Project Name/Number: /

Filing at a Glance

Company: Thrivent Financial for Lutherans

Product Name: Replacement Face Pg SPDA

TOI: A02I Individual Annuities- Deferred Non-
Variable

Sub-TOI: A02I.003 Single Premium

Filing Type: Form

SERFF Tr Num: THRV-126317697 State: Arkansas

SERFF Status: Closed-Approved- State Tr Num: 44064
Closed

Co Tr Num:

State Status: Approved-Closed

Reviewer(s): Linda Bird

Author: Karen Guyette

Disposition Date: 11/16/2009

Date Submitted: 11/05/2009

Disposition Status: Approved-
Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile:

Project Number:

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 11/16/2009

Explanation for Other Group Market Type:

State Status Changed: 11/16/2009

Deemer Date:

Created By: Karen Guyette

Submitted By: Karen Guyette

Corresponding Filing Tracking Number:

Filing Description:

In order to comply with Arkansas Rule 97 Life Insurance And Annuities Replacement, we are submitting for your review and approval the following form.

Replacement Face Page, Form A-AS-SPDAR AR (10)

This replacement face page will be used with Single Premium Deferred Annuity Contract, form A-AS-SPDA (04), which was approved by your department on 10/09/2003 (State Tracking No. 24064).

The replacement face page will be used in place of the existing contract face page when the application for insurance

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indicates that a replacement is involved. The replacement face page contains the 30-day notice of right to return the contract.

Company and Contact

Filing Contact Information

Karen Guyette, Compliance Specialist II karen.guyette@Thrivent.com
 625 Fourth Ave. South 800-847-4836 [Phone] 37251 [Ext]
 Minneapolis, MN 55415 612-340-5040 [FAX]

Filing Company Information

Thrivent Financial for Lutherans CoCode: 56014 State of Domicile: Wisconsin
 4321 North Ballard Road Group Code: 2938 Company Type: Fraternal
 Appleton, WI 54919-0001 Group Name: State ID Number:
 (800) 847-4836 ext. [Phone] FEIN Number: 39-0123480

Filing Fees

Fee Required? Yes
 Fee Amount: \$20.00
 Retaliatory? No
 Fee Explanation: 1 form X \$20 = \$20
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Thrivent Financial for Lutherans	\$20.00	11/05/2009	31826902

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Linda Bird	11/16/2009	11/16/2009

SERFF Tracking Number: *THR-126317697* State: *Arkansas*
 Filing Company: *Thrivent Financial for Lutherans* State Tracking Number: *44064*
 Company Tracking Number:
 TOI: *A021 Individual Annuities- Deferred Non- Variable* Sub-TOI: *A021.003 Single Premium*
 Product Name: *Replacement Face Pg SPDA*
 Project Name/Number: */*

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Actuarial Memo		No
Supporting Document	Statement of Variability		Yes
Form	Replacement Face Page		Yes

SERFF Tracking Number: *THR-126317697* State: *Arkansas*
 Filing Company: *Thrivent Financial for Lutherans* State Tracking Number: *44064*
 Company Tracking Number:
 TOI: *A021 Individual Annuities- Deferred Non- Variable* Sub-TOI: *A021.003 Single Premium*
 Product Name: *Replacement Face Pg SPDA*
 Project Name/Number: */*

Form Schedule

Lead Form Number: A-AS-SPDAR AR (10)

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	A-AS-SPDAR AR (10)	Other	Replacement Face Page	Initial		51.000	Replacement Face Page A-AS-SPDAR AR (10).pdf

This certificate of membership and single premium deferred annuity is a legal contract between you and Thrivent Financial for Lutherans. We issue this contract based on the Application signed by the applicant(s) and payment of the premium shown on page 3.

We will pay you the Annuity Income beginning on the Annuity Date (see page 3) if all Annuitants are living on that date and this contract is in force. If an Annuitant dies after Annuity Income payments have begun, any amount payable will depend upon the terms of the settlement option elected. We will pay the Death Proceeds to the beneficiary if the death of the Annuitant, or the death of the first Annuitant to die if this contract has two Annuitants, occurs before the Annuity Date. The Annuity Income and Death Proceeds will be paid according to the provisions of this contract.

Right to Cancel. Please read this contract carefully. You may cancel the contract for any reason before midnight of the 30th day after you first receive it. Do this by (1) mailing or delivering written notice to our Service Center or to the representative through whom you bought it, and (2) returning the contract. Notice given by mail and return of the contract by mail are effective on being postmarked, properly addressed and postage prepaid. If you cancel the contract, it will be deemed void from the beginning. Within 10 days after we receive notice of cancellation and the returned contract, we will refund the premium you have paid.

Single premium deferred annuity.
Annuity Income payable at Annuity Date.
Death Proceeds payable at death of Annuitant before Annuity Date.
Annual dividends payable if earned.

Signed for the Society

President []

Secretary []

ANNUITANT: [JOHN DOE]

AGE: [35] SEX: [MALE]

[ANNUITANT: [JANE DOE]

AGE: [35] SEX: [FEMALE]]

CONTRACT NUMBER: [B1234567]

DATE OF ISSUE: [JANUARY 1, 2010]

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Supporting Document Schedules

	Item Status:	Status Date:
<p>Satisfied - Item: Flesch Certification</p> <p>Comments:</p> <p>Attachments:</p> <p>AR SPDA Ctf of Compliance.pdf</p> <p>AR SPDA Flesch Ctf.pdf</p>		
<p>Bypassed - Item: Application</p> <p>Bypass Reason: N/A - no policy being submitted at this time.</p> <p>Comments:</p>		
<p>Bypassed - Item: Life & Annuity - Acturial Memo</p> <p>Bypass Reason: N/A - no policy being submitted at this time.</p> <p>Comments:</p>		
<p>Satisfied - Item: Statement of Variability</p> <p>Comments:</p> <p>Attachment:</p> <p>AR SPDA Statement of Variability.pdf</p>		

**CERTIFICATION
OF
COMPLIANCE**

FORM NUMBER

A-AS-SPDAR AR (10)

FORM TITLE

Replacement Face Page

I certify that the above form submission meets the provisions of Rule and Regulation 19 as well as all applicable requirements of the Arkansas Insurance Department.

Signature of Officer

David J. Christianson

Name (Typed or Printed)

Director, Contract Forms and Compliance

Title

November 5, 2009

Date

ARKANSAS

Certification

I, David J. Christianson, an officer of Thrivent Financial for Lutherans, hereby certify that the following forms have the following readability scores as calculated by the Flesch Reading Ease Test and that these forms comply with the requirements of Arkansas Code Ann. 23-80-206.

Form

Flesch Score

A-AS-SPDAR AR (10)

51

11/5/2009

Date

David J. Christianson
Director, Contract Forms and Compliance

STATEMENT OF VARIABILITY

Replacement Face Page, Form A-AS-SPDAR AR (10)

The following items have been bracketed to indicate that the information may be different in different replacement face pages or may be subject to change:

- Officers' signatures will change if new officers are elected
- Name of annuitant, age and sex are specific to each annuitant
- The name of the second annuitant, age, and sex will only appear if there is a joint annuitant
- Contract Number is different for each contract that we issue
- Date of Issue is the date the application is signed