

SERFF Tracking Number: FDLT-126142034 State: Arkansas
 Filing Company: Fidelity Security Life Insurance Company State Tracking Number: 42331
 Company Tracking Number: M-2018
 TOI: A02I Individual Annuities- Deferred Non- Variable Sub-TOI: A02I.002 Flexible Premium
 Product Name: Individual Flexible Premium Annuity
 Project Name/Number: Individual Flexible Premium Annuity /M-2018

Filing at a Glance

Company: Fidelity Security Life Insurance Company

Product Name: Individual Flexible Premium Annuity SERFF Tr Num: FDLT-126142034 State: Arkansas

TOI: A02I Individual Annuities- Deferred Non- Variable SERFF Status: Closed-Approved- Closed State Tr Num: 42331

Sub-TOI: A02I.002 Flexible Premium Co Tr Num: M-2018 State Status: Approved-Closed
 Filing Type: Form Reviewer(s): Linda Bird

Disposition Date: 05/14/2009

Authors: Jennifer Glaser, Kelly Humiston, Teresa Saling, Tara Wilson

Date Submitted: 05/12/2009 Disposition Status: Approved-Closed

Implementation Date Requested:

Implementation Date:

State Filing Description:

General Information

Project Name: Individual Flexible Premium Annuity

Project Number: M-2018

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 05/14/2009

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 05/14/2009

Created By: Teresa Saling

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Teresa Saling

Filing Description:

Fidelity Security Life Insurance Company

NAIC #71870 FEIN #43-0949844

Individual Flexible Premium Annuity

M-2018 Individual Flexible Premium Annuity Policy

S-2018 Policy Specification

SERFF Tracking Number: FDLT-126142034 State: Arkansas
Filing Company: Fidelity Security Life Insurance Company State Tracking Number: 42331
Company Tracking Number: M-2018
TOI: A02I Individual Annuities- Deferred Non- Sub-TOI: A02I.002 Flexible Premium
Variable
Product Name: Individual Flexible Premium Annuity
Project Name/Number: Individual Flexible Premium Annuity /M-2018

R-02944 Waiver of Premium for Flexible Premium Annuity Due to Total Disability Rider
A-01103 Individual Annuity Application

We respectfully submit the above referenced forms for for certification purposes. These forms are new and do not replace any forms previously filed or approved by your state.

This policy provides deferred annuity income benefits commencing at policy maturity. Flexible premiums are payable which will accumulate with interest in the Account Value. This product will be solicited by one-on-one agent sales. Rider form, R-02944 is designed to provide credit to the annuity plan of the planned premium shown on the Policy Specifications page if an Annuitant becomes totally disabled.

Variable information is indicated by brackets { }. The variables will not be adjusted to be less favorable than your state allows. The variables shown on the Policy Specifications page include information that is specific to the eligible insured.

If you have any questions or require additional information, please feel free to telephone me at (800) 648-8624, extension 1276, or Email me at tsaling@fslins.com.

Company and Contact

Filing Contact Information

Teresa Saling, Contract Analyst tsaling@fslins.com
3130 Broadway 800-648-8624 [Phone] 1276 [Ext]
Kansas City, MO 64111-2406 816-751-6026 [FAX]

Filing Company Information

Fidelity Security Life Insurance Company CoCode: 71870 State of Domicile: Missouri
3130 Broadway Group Code: 451 Company Type: Life & Health
Kansas City, MO 64111-2406 Group Name: State ID Number:
(800) 648-8624 ext. [Phone] FEIN Number: 43-0949844

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? Yes
Fee Explanation:

SERFF Tracking Number: FDLT-126142034 State: Arkansas
Filing Company: Fidelity Security Life Insurance Company State Tracking Number: 42331
Company Tracking Number: M-2018
TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium
Variable
Product Name: Individual Flexible Premium Annuity
Project Name/Number: Individual Flexible Premium Annuity /M-2018
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Fidelity Security Life Insurance Company	\$50.00	05/12/2009	27814343

SERFF Tracking Number: FDLT-126142034 State: Arkansas
Filing Company: Fidelity Security Life Insurance Company State Tracking Number: 42331
Company Tracking Number: M-2018
TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium
Variable
Product Name: Individual Flexible Premium Annuity
Project Name/Number: Individual Flexible Premium Annuity /M-2018

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Linda Bird	05/14/2009	05/14/2009

SERFF Tracking Number: FDLT-126142034 *State:* Arkansas
Filing Company: Fidelity Security Life Insurance Company *State Tracking Number:* 42331
Company Tracking Number: M-2018
TOI: A021 Individual Annuities- Deferred Non- *Sub-TOI:* A021.002 Flexible Premium
Variable
Product Name: Individual Flexible Premium Annuity
Project Name/Number: Individual Flexible Premium Annuity /M-2018

Disposition

Disposition Date: 05/14/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: FDLT-126142034 State: Arkansas
 Filing Company: Fidelity Security Life Insurance Company State Tracking Number: 42331
 Company Tracking Number: M-2018
 TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium
 Variable
 Product Name: Individual Flexible Premium Annuity
 Project Name/Number: Individual Flexible Premium Annuity /M-2018

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Form	Individual Flexible Premium Annuity Policy		Yes
Form	Policy Specifications		Yes
Form	Waiver of Premium for Flexible Premium Annuity Due to Total Disabilty Rider		Yes
Form	Individual Annuity Application		Yes

SERFF Tracking Number: FDLT-126142034 State: Arkansas
 Filing Company: Fidelity Security Life Insurance Company State Tracking Number: 42331
 Company Tracking Number: M-2018
 TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium
 Variable
 Product Name: Individual Flexible Premium Annuity
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Form Schedule

Lead Form Number: M-2018

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	M-2018	Policy/Contract/Fraternal Policy Certificate Individual Flexible Premium Annuity	Initial		0.000	M-2018.pdf
	S-2018	Schedule Pages Policy Specifications	Initial		0.000	S-2018.pdf
	R-02944	Policy/Contract/Fraternal Annuity Due to Total Certificate: Disability Rider Amendment, Insert Page, Endorsement or Rider	Initial		0.000	R-02944.pdf
	A-01103	Application/Individual Annuity Enrollment Application Form	Initial		0.000	A-01103.pdf



FIDELITY SECURITY LIFE INSURANCE COMPANY

3130 Broadway
Kansas City, Missouri 64111-2406
Phone 800-648-8624
A STOCK COMPANY
(Herein Called "the Company")

POLICY NUMBER: { }

EFFECTIVE DATE: { }

Fidelity Security Life Insurance Company (herein called the "Company") agrees to make the payments provided by this Policy.

This Policy is issued in consideration of the application for this Policy and of the payment of Premiums as provided in this Policy.

The provisions and tables on the following pages are part of this Policy.

This Policy is a legal Policy between the Policy Owner and the Company.

This Policy is issued by Fidelity Security Life Insurance Company at Kansas City, Missouri on the Policy Effective Date.

FIDELITY SECURITY LIFE INSURANCE COMPANY


President


Secretary

10-DAY RIGHT TO EXAMINE POLICY

Within 10 days after this Policy is first received, it may be canceled for any reason by delivering or mailing it to the agent through whom it was purchased or to the Home Office of the Company. Upon cancellation, the Company will return any Premium(s) paid.

INDIVIDUAL FLEXIBLE PREMIUM ANNUITY POLICY

Annuity Benefit Payable at Maturity Date

Death Benefit Payable in Event of the Annuitant's Death Prior to Maturity Date

Non-Participating

Please read this Policy carefully.

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DEFINITIONS

Age unless otherwise specified, in this Policy the word Age means age last birthday. Payment under this Policy will be subject to proof of Age acceptable to the Company.

Annuitant means the person named in the Policy Specifications on whose life the Annuity Benefit is based. The Annuitant is to receive annuity benefits as of the Maturity Date.

Effective Date means the date coverage begins under this Policy as shown in the Policy Specifications. Policy months, years and anniversaries are measured from this date.

Maturity Date means the date shown in the Policy Specifications on which the Annuity Benefits become payable. If a Maturity Date is not chosen, the Company uses the later of the Anniversary Date after the Annuitant's 70th birthday, or 10 years from the Effective Date. The Maturity Date can be changed with notification to Us in writing at any time prior to the designated Maturity Date, but not beyond the 85th birthday of the Annuitant.

Payee means any individual, corporation, partnership, fiduciary or any other legal entity entitled to receive payment in one sum or under an income option.

Surrender Charge Effective Date means the date shown in the Policy Specifications on which the Year of Surrender is determined and the corresponding Surrender Charge is calculated. Such date may be before the Effective Date of this Policy if issued as a conversion from another Annuity policy or rider.

PREMIUMS

Payments/Date of Receipt. Premiums may be paid at any time and for any amount while this Policy is in force before the Maturity Date and before the death of the Owner or Annuitant. The Planned Premium chosen by the Owner is shown in the Policy Specifications and may not be less than the Minimum Planned Premium shown in the Policy Specifications. Any premium is payable to the Company at the Home Office in Kansas City, Missouri. Any premium payment shall be credited to this Policy on the date received at the Home Office.

Premium Tax. In the event that a premium tax is imposed against this Policy, such tax may be deducted from the Account Value at the earlier of:

1. the date such premium tax is due; or
2. the date that: a) the Surrender Value is used to determine the value of the annuity payments; b) proceeds are payable upon death; or c) a partial Surrender is made from this Policy.

POLICY VALUES

Account Value. The Account Value equals $1. - 2. - 3. + 4.$ where:

1. equals 100% of the Premiums paid;
2. is any partial Surrender Amounts;
3. is any Premium Taxes deducted; and
4. is the interest earned on $1. - 2. - 3.$ from the date of deposit or the date of withdrawal. Interest shall be credited at a rate at least equal to the Guaranteed Interest Rate shown in the Policy Specifications. Excess interest may be credited to this Policy as declared by the Company and may be changed at any time.

SURRENDER PRIOR TO MATURITY DATE

After the first Policy Year and before the Maturity Date, the Owner may surrender all or part of the Account Value by filing a written request with the Company. The Company will pay to the Owner the Surrender Value in a single sum unless another income option is elected. The Surrender Value is equal to the Account Value less any applicable Surrender

Charge according to the Table of Surrender Charges shown in the Policy Specifications. The amount withdrawn must be at least \$250, or the entire Surrender Value, whichever is smaller. A partial surrender may not reduce the Account Value remaining below \$1,000.

The Owner may withdraw up to 10% of the Account Value without a Surrender Charge except that only one such withdrawal may be made in any Policy Year.

DEATH BENEFIT

If the Owner is not the Annuitant and the Owner dies before the Annuitant and before the Maturity Date, the Company will pay the Account Value to the Beneficiary upon receipt of due proof of the Owner's death. The Beneficiary may receive payments in a lump sum or over a period of years not exceeding his or her life expectancy beginning not later than one year after the Owner's death. If the Beneficiary is the Owner's spouse, the spouse may elect to keep this Policy in effect and become the new Owner.

If the Owner is not the Annuitant and the Annuitant dies before the Owner and before the Maturity Date, the Company will pay the Account Value to the Beneficiary upon receipt of due proof of death of the Annuitant. The Beneficiary may choose between a single payment and Option 1, 2 or 3 shown in the Annuity Benefits provision.

When the Owner is both the Owner and the Annuitant, and the Owner dies before the Maturity Date, the Account Value will be paid to the Beneficiary in accordance with the preceding paragraph.

Any written election of a method of settlement will become effective on the later of: a) the date the election is received by the Company; or b) the date due proof of death is received by the Company. If written election is not received by the Company within 60 days following the date due proof of death is received, payment shall be made under the Automatic Income Option shown in the Policy Specifications.

ANNUITY BENEFITS

If this Policy is in force on the Maturity Date, the Surrender Value will be paid according to the Automatic Income Option shown in the Policy Specifications unless another option is elected by the Owner in writing to the Company.

If the payout rates in use by the Company at the time proceeds become payable are more favorable than the monthly life income amount shown in the Income Options Tables, the Company will use the more favorable rates.

The proceeds of this Policy may be applied under any of these income options by written request to the Company. The options are:

Option 1 - Fixed Period: Payment will be made for a fixed period not to exceed 30 years.

Option 2 - Life Income: Payment will be made for the life of the Payee. Payments can be guaranteed for a minimum number of years, such as 10 or 20.

Option 3 - Fixed Amount: Payment of a fixed amount will be made until proceeds and interest are fully paid. The final payment is the balance left with the Company.

Elections of options are subject to these conditions:

1. election must be made by the Owner while the Annuitant is still living. If no election is made by the time of the Annuitant's death, then the Beneficiary may elect Option 1, 2 or 3;
2. proceeds must be enough to produce installment payments of at least \$25. Proceeds must be at least \$2,000;
3. options are available with the Company's consent if the Payee is a trustee or business entity;
4. unless the option was elected by the person to receive payment, withdrawal or transfer of funds between options may be made only to the extent stated in the election; and

5. if the option depends on Age, proof of a Payee's date of birth is required.

Payment of Proceeds. If payment of proceeds in one sum is not made within 30 days from the date the Company receives proof of death, the Company will pay interest on the proceeds from the date of notification to the date of payment, or as required by law.

Payments. The amount payable under an option including any excess interest is as the Company declares. The minimum interest rate used in determining payment amounts is shown in the Income Options Tables.

Supplemental Contract. When an option becomes effective, this Policy is surrendered in exchange for a supplementary contract. It provides for the manner of settlement and rights of the Payee(s). The supplementary contract Effective Date is the date proof of death is received by the Company or the date of other settlement. Payment may not be made to another without the Company's consent.

Income Protection. Unless otherwise provided in the election, a Payee does not have the right to commute, transfer or encumber amounts held or installments to become payable. To the extent provided by law, the proceeds, amount retained and installments are not subject to any Payee's debts, contracts or engagements.

Death of the Primary Payee. Upon the primary Payee's death, any payment certain under Option 1 or 2, or payment under Option 3 is continued to the contingent Payee. Amounts may be released in one sum if allowed by the contract. The final Payee is the estate of the last to die of the primary Payee and any contingent Payee.

TERMINATION

This Policy will terminate on the earliest of the following:

1. the date this Policy is surrendered in full or exchanged for a supplemental contract;
2. the date the Company receives a written request from the Owner to terminate this Policy. The request must be accompanied by this Policy for endorsement;
3. the earlier of the Owner's death or the Annuitant's death (unless upon the Owner's death, his or her spouse elects to continue); or
4. the Maturity Date.

GENERAL PROVISIONS

Owner. The Owner means the person or persons entitled to ownership rights in the Policy. The Owner is the Annuitant unless otherwise designated in the application or unless changed by the Owner. On the Maturity Date the Annuitant becomes the Owner.

Change of Owner. Before the Maturity Date, the Owner or Beneficiary, except an irrevocable Beneficiary, may be changed at any time in writing on forms the Company provides. The change date is the date the written request is accepted and recorded by the Company. If the Company pays the benefit before the Company receives a change request, the Company is released from further liability under this Policy to the extent of the Company's payment. The Company may require this Policy be returned for endorsement for any change requested. A tax advisor should be consulted as the transfer of value may be taxable.

Beneficiary. The Beneficiary means the person named to receive benefits upon the death of the Owner or the Annuitant. The Beneficiary is named in the application or in the most recent Beneficiary change recorded. The Owner may change the Beneficiary unless an irrevocable Beneficiary has been named. The interest of any Beneficiary, whether revocable or irrevocable, ceases when the Beneficiary dies before the Owner and Annuitant. Unless otherwise stated, two or more Beneficiaries in the same class share equally, and the interest of any deceased Beneficiary passes equally to the surviving Beneficiaries within a class. Unless otherwise provided in writing by the Owner, any Beneficiary must survive the Owner or Annuitant, as the case may be. If there is no surviving Beneficiary upon the death of the Owner or Annuitant, whichever first occurs, the estate of the Owner shall be the Beneficiary.

Assignment/Loans. The rights and interest of the Annuitant under this Policy are not assignable or transferable except to the Company on surrender or settlement. Loans are not available from this Policy.

Entire Policy. This Policy, the endorsements, if any, and the application, a copy of which is attached, constitutes the entire Policy between the parties. All statements made by the Annuitant shall be considered representations and not warranties, except in the case of fraud.

Incontestability. This Policy will not be contested.

Misstatement of Age or Sex. If the Age or sex of the Annuitant or any Payee under this Policy has been misstated, the Company will make an equitable adjustment of benefits or premiums or both. The benefits available and premiums payable under this Policy will be those that would be payable based on the correct Age and sex. If the misstatement is discovered prior to a benefit being due and payable, any excess premium paid will be refunded. The Company will request payment for any overdue premium. If the misstatement is discovered after a benefit is due and payable, any underpayment of benefits or excess premium paid will be paid in full with the next income payment. Any overpayment of benefits or overdue premium will be deducted from future income payments until totally repaid. If an Insured is not eligible for coverage because of Age or sex, the Company will refund all premiums paid on and after the date the Insured was no longer eligible.

Annual Report. The Company will send an Annual Report which shows the following:

1. the current Account Value and the current Surrender Value;
2. the amount and date of any Premiums paid since the last report;
3. the amount and date of any partial Surrenders since the last report; and
4. any other information required by state law.

Payment Deferral. The Company can delay payment of any amount surrendered for up to six months from the date of Surrender. However, interest continues to be earned at the declared rate or the rate required by the law of the state in which this Policy is issued, whichever is greater.

INCOME OPTIONS TABLES

OPTION 1 - INSTALLMENTS FOR A FIXED PERIOD

(Per \$1,000 of Proceeds)

Period (Years)	Monthly Payment	Period (Years)	Monthly Payment	Period (Years)	Monthly Payment
1	\$84.23	11	\$8.44	21	\$4.85
2	42.53	12	7.81	22	4.68
3	28.63	13	7.28	23	4.51
4	21.69	14	6.82	24	4.37
5	17.52	15	6.43	25	4.23
6	14.74	16	6.08	26	4.10
7	12.76	17	5.78	27	3.99
8	11.27	18	5.51	28	3.88
9	10.12	19	5.27	29	3.78
10	9.19	20	5.05	30	3.69

Quarterly income is 2.995 times the monthly income and annual income is 11.892 times the monthly income.

OPTION 2 - LIFE INCOME

(Per \$1,000 of Proceeds)

The amount of insurance income is based on the sex and attained Age of the Payee on the date of the first payment. The table below specifies the minimum amount of monthly income payment the Company guarantees to pay for each \$1,000 of annuity purchase value.

Annuitant's Age	Life Annuity		Life Annuity With 10 Years Certain	
	Male	Female	Male	Female
65	\$4.16	\$3.90	\$4.09	\$3.86
66	4.26	3.99	4.19	3.95
67	4.38	4.09	4.29	4.05
68	4.50	4.20	4.40	4.15
69	4.63	4.32	4.51	4.26
70	4.76	4.44	4.63	4.37
71	4.90	4.57	4.75	4.49
72	5.06	4.71	4.88	4.61
73	5.22	4.86	5.01	4.74
74	5.39	5.02	5.14	4.88
75	5.57	5.19	5.29	5.02

Values for Ages not shown in this Table will be furnished upon request and will be calculated on the same basis as those shown in this Table based on 2% interest and 50% of the 2000 Individual Annuity Mortality Table.

The Company reserves the right to apply Annuity purchase rates more favorable to the Annuitant than those shown in this Table.

FLEXIBLE PREMIUM ANNUITY POLICY
Annuity Benefit Payable at Maturity Date
Death Benefit Payable in Event of the Owner's or Annuitant's Death Prior to Maturity Date
Non-Participating

POLICY SPECIFICATIONS

ANNUITANT:
John S. Doe
123 Elm St.
Anytown, USA 99999

Policy Number: {FA-### }
Effective Date: {01/01/2009 }
Maturity Date: {01/01/2044 }
Surrender Charge Effective Date: {01/01/1999 }
Age At Issue: {35 }
Sex: {Male }
Base Plan Code: {7FA00N1 }

OWNER: As designated and on file with the Company
BENEFICIARY: As designated and on file with the Company

Annuitant's Coverage:

Initial Premium

FLEXIBLE PREMIUM ANNUITY POLICY	{\$0.00}
{ WAIVER OF PREMIUM FOR FLEXIBLE PREMIUM ANNUITY DUE TO TOTAL DISABILITY RIDER	{ \$41.47 }
{ TOTAL	{ \$41.47 }

Subsequent Premium

PAYABLE: {Monthly}

PLANNED PREMIUM* FOR FLEXIBLE PREMIUM ANNUITY POLICY	{ \$66.67 }
{ WAIVER OF PREMIUM FOR FLEXIBLE PREMIUM ANNUITY DUE TO TOTAL DISABILITY RIDER	{ \$41.47 }
{ TOTAL	{ \$108.14 }

MINIMUM PLANNED PREMIUM FOR FLEXIBLE PREMIUM ANNUITY POLICY {\$0 - \$500.00}

GUARANTEED INTEREST RATE: { 3.0% }

AUTOMATIC INCOME OPTION: The monthly life income payable at the Maturity Date is determined by applying the Account Value on the Maturity Date under Option 2 of the Income Options provision with payment guaranteed for 10 years, unless another option is elected.

*The Planned Premium is optional and can be increased or decreased.

TABLE OF SURRENDER CHARGES

Year of Surrender**	1	2	3	4	5	6	7	8	9	Thereafter
Surrender Charge as a Percentage of Account Value Surrendered	6%	6%	5%	5%	4%	3%	2%	2%	1%	0%

**Beginning with the Surrender Charge Effective Date.

THIS POLICY SPECIFICATIONS IS ATTACHED TO AND MADE A PART OF YOUR POLICY. IT REPLACES AND CANCELS ALL OTHER POLICY SPECIFICATIONS ISSUED PRIOR TO THE DATE SHOWN BELOW FOR THE ANNUITANT NAMED UNDER THIS POLICY NUMBER.



FIDELITY SECURITY LIFE INSURANCE COMPANY

3130 Broadway
Kansas City, Missouri 64111-2406
Phone 800-648-8624
A STOCK COMPANY
(Herein Called "the Company")

WAIVER OF PREMIUM FOR FLEXIBLE PREMIUM ANNUITY DUE TO TOTAL DISABILITY RIDER

By attachment of this Rider, the Policy is amended as follows:

The following Benefit is added to the Policy and will only apply if:

1. The Annuitant's application for such Benefit is approved by the Company; and
2. Premium payments are made for the Benefit. Premiums for this Rider are payable at the same interval as premiums for the Policy.

DEFINITIONS

Injury means bodily Injury sustained directly and independently of all other causes, which results in loss covered by this Rider. The Injury must occur and the loss must begin while the coverage for the Annuitant is in force under this Rider and the Policy.

Sickness means a bodily disorder; a disease; or Complications of Pregnancy. The Sickness must occur while the coverage for the Annuitant is in force under the Policy.

Complications Of Pregnancy means any of these:

1. a condition which, while affected by pregnancy, is still classified by accepted medical standards as a Sickness, disease or Injury apart from the normal bodily changes that accompany pregnancy; or
2. an extrauterine or ectopic pregnancy; or
3. a spontaneous termination of pregnancy during a period of gestation in which a viable birth is not possible.

Total Disability/Totally Disabled means that because of Injury or Sickness:

1. during the first 24 months of disability, the Annuitant cannot perform the material and substantial duties of his or her regular occupation. The Annuitant must be under the care of a Physician. For a homemaker or student, regular occupation will be considered the same as an occupation for wage or profit.
2. after 24 months of disability, the Annuitant is completely unable to perform the material and substantial duties of any occupation for which he or she is reasonably fitted by education, training or experience. The Annuitant must be under the care of a Physician, unless the Physician certifies that the Annuitant does not need the regular care of a Physician for such disabling condition.

The loss of a professional or occupational license for any reason does not, in itself, constitute Total Disability.

WAIVER OF PREMIUM BENEFIT

The Company will credit as an annuity premium paid to the Flexible Premium Annuity Policy, the Planned Premium shown in the Policy Specifications, under the following conditions:

1. the Insured must become Totally Disabled by Injury or Sickness;
2. the Total Disability must begin while the Policy and this Rider are in effect;
3. the Total Disability must begin before the Policy anniversary date following the Annuitant's 60th birthday; and
4. the Total Disability must continue for more than six months.

After six months of Total Disability, annuity premiums will be waived back to the date the Total Disability began.

Only annuity premium payments under the Policy during the Annuitant's Total Disability are credited. The premiums will be credited according to the payment mode in force when Total Disability began. Values and other benefits of the Flexible Premium Annuity Benefit will be the same as if the annuity premiums credited had been paid in cash.

In no event will benefits be paid after the Policy anniversary following the Annuitant's 65th birthday.

PREMIUMS

The Company provides this coverage in return for premium payment. Premiums are payable to the Company. The first premium is due on the Annuitant's Effective Date. Premiums must be paid to the Company on or before the due date. {The premium rates are shown in the Policy Specifications.}

Premium Changes. The Company has the right to change the premium rates on any premium due date on or after the first Policy Anniversary Date. The Company will provide written notice at least {31 – 45} days before the date of change. The premium rates also may be changed at any time the terms of the Policy are changed.

Refund of Premium at Death or upon Cancellation. The portion of any premium paid that applies to a period beyond the end of the Policy month in which the Annuitant's death occurs is added to the proceeds. The Company will refund any unearned premiums upon cancellation of this Policy.

Grace Period. This Policy has a 31-day grace period for the payment of each premium due after the first premium. Coverage will continue in force during the grace period. It will terminate at the end of the grace period if all premiums that are due are not paid. The Company will require pro rata payment of all premiums for the period this coverage continues in force including the premiums for the grace period. If the Annuitant dies during the grace period, the premium due is paid from the proceeds of this Policy.

EXCLUSIONS

Waiver of Premium will not be granted if Total Disability results from one of the following:

1. the Annuitant intentionally inflicts on himself or herself while sane or insane (in Colorado or Missouri while sane); or
2. caused by war, declared or undeclared, or any act of war.

TERMINATION

This Rider will terminate on the earliest of:

1. the Policy Anniversary Date following the Annuitant's 60th birthday, unless Totally Disabled;
2. the date this Rider lapses for failure to pay premiums;

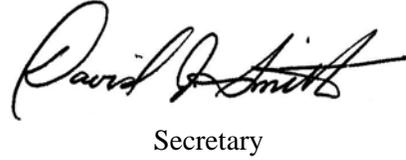
3. the date the Flexible Premium Annuity Policy is surrendered, matures or otherwise terminates; or
4. on the next premium due date following the date the Company receives a written request from the Owner to terminate coverage.

This Rider takes effect on the effective date {of the Policy to which it is attached} {shown in the Policy Specification}. It is subject to all the definitions, limitations, exclusions and conditions of the Policy except as stated.

FIDELITY SECURITY LIFE INSURANCE COMPANY



Richard C. Jones
President



David J. Smith
Secretary

INDIVIDUAL ANNUITY APPLICATION

Annuitant	Name: First		Middle	Last	
	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Age	Date of Birth	Social Security #
	Home Address		City	State	Zip Code
Owner	Owner's Name (if other than Annuitant)		Social Security No.	Relationship to Annuitant	
	Owner's Address		City	State	Zip Code
Beneficiary	Primary Beneficiary's Name		Social Security No.	Relationship to Annuitant	
	Contingent Beneficiary's Name		Social Security No.	Relationship to Annuitant	
Coverage and Benefits	<input checked="" type="checkbox"/> Individual Flexible Premium Annuity <input type="checkbox"/> Waiver of Premium for Flexible Premium Annuity Due to Total Disability Rider {(R-02944)}				Monthly Premium
	*Indicates Planned Premium which may be increased or decreased.				\$ _____ *
Premiums and Payment Method	TOTAL MONTHLY PREMIUM {(ALL BENEFITS)}: \$ _____				
	Premium Mode:	<input type="checkbox"/> Annual <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Quarterly <input type="checkbox"/> Allotment	<input type="checkbox"/> List Bill {(Need a minimum of 3)} <input type="checkbox"/> Monthly Pre-Authorized Check (PAC) (Attach Authorization and Void Check)		
	Send Premium Notices to:	<input type="checkbox"/> Insured <input type="checkbox"/> Owner	<input type="checkbox"/> Other (Please attach a separate sheet with name and address)	Requested Effective Date:	
Replacement	Will the annuity you are buying from us replace any existing life insurance or annuity? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please give the name of the insurance company or companies and a contract or policy number for each product being replaced. Please also complete the replacement forms. _____ _____				
Signature	Owner's Signature		Date		
Agent Statement	To the best of my knowledge a replacement: <input type="checkbox"/> is <input type="checkbox"/> is not involved?				
	Agent's Signature		Agent's Name		
	Agent's #		Date		

<p>SPECIAL REQUESTS</p>	<p>ADMINISTRATIVE OFFICE USE</p>
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SERFF Tracking Number: FDLT-126142034 State: Arkansas
Filing Company: Fidelity Security Life Insurance Company State Tracking Number: 42331
Company Tracking Number: M-2018
TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium
Variable
Product Name: Individual Flexible Premium Annuity
Project Name/Number: Individual Flexible Premium Annuity /M-2018

Supporting Document Schedules

Item Status: **Status**
Date:

Satisfied - Item: Flesch Certification

Comments:

Please see attached.

Attachment:

Readability Certification.pdf

Item Status: **Status**
Date:

Bypassed - Item: Application

Bypass Reason: Not Applicable, application is being filed with the policy.

Comments:

