

SERFF Tracking Number: MLLM-126209529 State: Arkansas
Filing Company: Commonwealth Annuity and Life Insurance Company State Tracking Number: 45110
Company Tracking Number: 0146ALM01-27
TOI: A02.11 Individual Annuities- Deferred Non- Variable and Variable Sub-TOI: A02.11.002 Flexible Premium
Product Name: Commonwealth Annuity and Life Insurance Company
Project Name/Number: Endorsement/0146ALM01-27

Filing at a Glance

Company: Commonwealth Annuity and Life Insurance Company

Product Name: Commonwealth Annuity and Life Insurance Company SERFF Tr Num: MLLM-126209529 State: Arkansas

TOI: A02.11 Individual Annuities- Deferred Non- Variable and Variable SERFF Status: Closed-Approved- Closed State Tr Num: 45110

Sub-TOI: A02.11.002 Flexible Premium Co Tr Num: 0146ALM01-27 State Status: Approved-Closed

Filing Type: Form Reviewer(s): Linda Bird

Author: Jeff Kulesus Disposition Date: 03/08/2010

Date Submitted: 03/05/2010 Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: Endorsement

Project Number: 0146ALM01-27

Requested Filing Mode: Review & Approval

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments: Form 4029-10 has been submitted and is pending review and approval in Massachusetts.

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 03/08/2010

Created By: Jeff Kulesus

Corresponding Filing Tracking Number: SKML-125200807

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 03/08/2010

Deemer Date:

Submitted By: Jeff Kulesus

Filing Description:

Form 4029-10 is submitted for your review and approval consideration on behalf of Commonwealth Annuity and Life Insurance Company ("Commonwealth Annuity", or "Company"). A letter from Commonwealth Annuity authorizing Milliman to conduct this filing is included with this submission.

SERFF Tracking Number: MLLM-126209529 State: Arkansas
Filing Company: Commonwealth Annuity and Life Insurance Company State Tracking Number: 45110
Company Tracking Number: 0146ALM01-27
TOI: A02.11 Individual Annuities- Deferred Non- Variable and Variable Sub-TOI: A02.11.002 Flexible Premium
Product Name: Commonwealth Annuity and Life Insurance Company
Project Name/Number: Endorsement/0146ALM01-27

Form 4029-10 is designed for use with forms 3038-07 and 3039-07, which were previously approved by the Department on 07-19-2007; SERF Tracking # SKML-125200807, State File # 36236. The purpose of form 4029-10 is to amend the Assignment and Owner provisions of the previously approved forms so the Contracts will comply with the new S.E.C. 12h requirements. It is Commonwealth Annuity's intent that upon approval, copies of form 4029-10 will be attached to all new issues of the previously identified Contracts on a go-forward basis only.

The form is submitted in final printed format except for slight font and formatting variations that may occur due to Commonwealth production printers. Commonwealth takes care to assure that printer-based variations are minimized; however, should changes occur, such changes will not alter the content or meaning of any approved form.

Please note that portions of the form are bracketed as variable and may change as described in the Statement of Variability.

No part of this filing contains unusual or possibly controversial items from normal Company or Industry standards. The form was filed concurrently in the domiciliary State of Massachusetts and is there pending review and approval.

Flesch Scores are not provided for form 4029-10 because it falls under SEC/Federal regulation.

Your prompt review and approval of this form is greatly appreciated.

Company and Contact

Filing Contact Information

Jeff Kulesus, Consultant Jeff.Kulesus@Milliman.com
2 Conway Park, Ste. 180 312-499-5635 [Phone]
150 Field Drive 847-604-8671 [FAX]
Lake Forest, IL 60045

Filing Company Information

(This filing was made by a third party - MUSA01)

Commonwealth Annuity and Life Insurance Company CoCode: 84824 State of Domicile: Massachusetts
132 Turnpike Road, Suite 210 Group Code: 3891 Company Type: Life
Southborough, MA 01772 Group Name: State ID Number:
(508) 460-2400 ext. [Phone] FEIN Number: 04-6145677

SERFF Tracking Number: MLLM-126209529 State: Arkansas
Filing Company: Commonwealth Annuity and Life Insurance State Tracking Number: 45110
Company
Company Tracking Number: 0146ALM01-27
TOI: A02.11 Individual Annuities- Deferred Non- Sub-TOI: A02.11.002 Flexible Premium
Variable and Variable
Product Name: Commonwealth Annuity and Life Insurance Company
Project Name/Number: Endorsement/0146ALM01-27

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation: 1 form x \$50.00@ = \$50.00
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Commonwealth Annuity and Life Insurance Company	\$50.00	03/05/2010	34636120

SERFF Tracking Number: MLLM-126209529 State: Arkansas
Filing Company: Commonwealth Annuity and Life Insurance Company State Tracking Number: 45110
Company Tracking Number: 0146ALM01-27
TOI: A02.11 Individual Annuities- Deferred Non- Variable and Variable Sub-TOI: A02.11.002 Flexible Premium
Product Name: Commonwealth Annuity and Life Insurance Company
Project Name/Number: Endorsement/0146ALM01-27

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Linda Bird	03/08/2010	03/08/2010

SERFF Tracking Number: MLLM-126209529 State: Arkansas
Filing Company: Commonwealth Annuity and Life Insurance Company State Tracking Number: 45110
Company Tracking Number: 0146ALM01-27
TOI: A02.11 Individual Annuities- Deferred Non- Variable and Variable Sub-TOI: A02.11.002 Flexible Premium
Product Name: Commonwealth Annuity and Life Insurance Company
Project Name/Number: Endorsement/0146ALM01-27

Disposition

Disposition Date: 03/08/2010

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: MLLM-126209529 State: Arkansas
 Filing Company: Commonwealth Annuity and Life Insurance State Tracking Number: 45110
 Company
 Company Tracking Number: 0146ALM01-27
 TOI: A02.11 Individual Annuities- Deferred Non- Sub-TOI: A02.11.002 Flexible Premium
 Variable and Variable
 Product Name: Commonwealth Annuity and Life Insurance Company
 Project Name/Number: Endorsement/0146ALM01-27

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification	No	No
Supporting Document	Application	No	No
Supporting Document	Life & Annuity - Actuarial Memo	No	No
Supporting Document	Authorization Letter	Yes	Yes
Supporting Document	Statement of Variability	Yes	Yes
Supporting Document	Compliance Certification	Yes	Yes
Supporting Document	Regulation 6 Certification for Variable Products	Yes	Yes
Form	Endorsement	Yes	Yes

SERFF Tracking Number: MLLM-126209529 State: Arkansas
 Filing Company: Commonwealth Annuity and Life Insurance State Tracking Number: 45110
 Company
 Company Tracking Number: 0146ALM01-27
 TOI: A02.11 Individual Annuities- Deferred Non- Sub-TOI: A02.11.002 Flexible Premium
 Variable and Variable
 Product Name: Commonwealth Annuity and Life Insurance Company
 Project Name/Number: Endorsement/0146ALM01-27

Form Schedule

Lead Form Number: 4029-10

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	4029-10	Policy/Cont Endorsement ract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	Initial		0.000	4029-10 - Endorsement 02-26- 2010.pdf



Commonwealth Annuity and Life Insurance Company

Service Center:

[PO Box 758550]

[Topeka, KS 66675-8550]

Phone: [1-800-533-7881]

ENDORSEMENT

This Endorsement is made a part of the Contract to which it is attached and is effective as of the Contract issue date.

The "Assignment" provision of the Contract is replaced by the following:

Assignment — All assignments are subject to acceptance by the Company. The Company reserves the right to refuse any assignment or other transfer of the Contract at any time on a non-discriminatory basis.

Subject to the acceptance of the assignment by the Company, you may assign a Non-Qualified Contract during the Accumulation Period and prior to the death of an Owner by completing and returning our assignment form to our Service Center. No assignment is binding on us until we accept it, and we assume no responsibility for the validity of any assignment. Generally, an interest in a Qualified Contract may not be assigned. Assignments are subject to any payments made or action taken by us before we receive such notice.

If an assignment of the Contract is in effect on the Annuity Date, we reserve the right to pay the assignee, in one sum, that portion of the Contract Value (less any applicable premium taxes) to which the assignee appears to be entitled. Amounts payable during the Annuity Period may not be assigned or encumbered (to the extent permitted by law, annuity payments are not subject to levy, attachment or other judicial process for the payment of the payee's debts or obligations). An assignment may be a taxable event and may subject you to immediate tax liability and to a 10% tax penalty. Any claim is subject to proof of interest of the assignee. You are solely responsible for the validity or effect of any assignment.

The "Owner" provision of the Contract is replaced by the following:

Owner — You may exercise every option and right conferred by this Contract. Where the Contract is owned jointly, the consent of both Owners is required in order to exercise any ownership rights.

Upon written request to the Service Center prior to the death of an Owner, you may request the addition, change or removal of an Owner. You must furnish information sufficient to clearly identify a new Owner to us. An addition, change, or removal of an Owner is subject to our approval.

If we approve the change, the effective date of the change will be the date the request was signed by you, except for action taken by us prior to receiving the request. Any change is subject to the payment of any proceeds. We may require you to return this Contract to us for endorsement of a change.

Changing the owner may result in certain tax consequences to you.

IN WITNESS WHEREOF, Commonwealth Annuity and Life Insurance Company has caused this Endorsement to be signed by its President and Secretary.


President


Corporate Secretary

SERFF Tracking Number: MLLM-126209529 State: Arkansas
 Filing Company: Commonwealth Annuity and Life Insurance Company State Tracking Number: 45110
 Company Tracking Number: 0146ALM01-27
 TOI: A02.11 Individual Annuities- Deferred Non- Variable and Variable Sub-TOI: A02.11.002 Flexible Premium
 Product Name: Commonwealth Annuity and Life Insurance Company
 Project Name/Number: Endorsement/0146ALM01-27

Supporting Document Schedules

	Item Status:	Status Date:
Bypassed - Item: Flesch Certification		
Bypass Reason: The Amendatory Endorsement provided with this submission is regulated under Federal law; therefore, we request that this requirement be waived.		

Comments:

	Item Status:	Status Date:
Bypassed - Item: Application		
Bypass Reason: An application will not be used for endorsement form 4029-10; therefore, we request that this requirement be waived.		

Comments:

	Item Status:	Status Date:
Satisfied - Item: Authorization Letter		
Comments: Authorization Letter		
Attachment: Authorization Letter.pdf		

	Item Status:	Status Date:
Satisfied - Item: Statement of Variability		
Comments: Statement of Variability		
Attachment: Statement of Variability.pdf		

SERFF Tracking Number: MLLM-126209529 State: Arkansas
Filing Company: Commonwealth Annuity and Life Insurance Company State Tracking Number: 45110
Company Tracking Number: 0146ALM01-27
TOI: A02.11 Individual Annuities- Deferred Non- Variable and Variable Sub-TOI: A02.11.002 Flexible Premium
Product Name: Commonwealth Annuity and Life Insurance Company
Project Name/Number: Endorsement/0146ALM01-27

Item Status: **Status**
Date:

Satisfied - Item: Compliance Certification

Comments:

Compliance Certification

Attachment:

AR Compliance Certification.pdf

Item Status: **Status**
Date:

Satisfied - Item: Regulation 6 Certification for
Variable Products

Comments:

Regulation 6 Certification for Variable Products

Attachment:

AR Regulation 6 Certification.pdf

COMMONWEALTH ANNUITY
Commonwealth Annuity and
Life Insurance Company
a Goldman Sachs Company

132 Turnpike Road, Suite 210
Southborough, MA 01772

Tel: (508) 460-2400

Fax: (508) 460-2401

www.commonwealthannuity.com

February 2, 2010

Jeff Kulesus, FLMI
Consultant
Milliman, Inc.
Two Conway Park
150 Field Drive, Suite 180
Lake Forest, Illinois 60045

RE: State Insurance Filings

Dear Mr. Kulesus:

This letter will serve as authorization from Commonwealth Annuity and Life Insurance Company for employees of Milliman, Inc. to file policy forms and other related material, and respond to inquiries on our behalf with all state insurance departments and jurisdictions where Commonwealth Annuity and Life Insurance Company is authorized to do business.

Sincerely,



Michael A. Reardon
Commonwealth Annuity and Life Insurance Company
President and Chief Executive officer
Tel: 508-460-2423
Fax: 212.493.0324
mreardon@cwannuity.com

COMMONWEALTH ANNUITY AND LIFE INSURANCE COMPANY
STATEMENT OF VARIABILITY
ENDORSEMENT

Form 4029-10

- Company logo – The Company logo has been bracketed to allow change of the logo without refiling the forms at some future date. The Company acknowledges that such change will not include a Company name change unless such name change is first filed with and approved by the Department.
- Service Center Address and/or Telephone Number – Will change if the Service Center address and/or telephone number changes.
- Officer signatures and titles - Will change if the Company officers and/or titles change.

Arkansas Compliance Certification

Company: Commonwealth Annuity and Life Insurance Company

Forms: 4029-10 Endorsement

On behalf of Commonwealth Annuity and Life Insurance Company (Company) I certify the following requirements have been reviewed and the forms and Company practices are in compliance with the following.

1. Ark. Code Ann. 23-79-138 Information to accompany policies

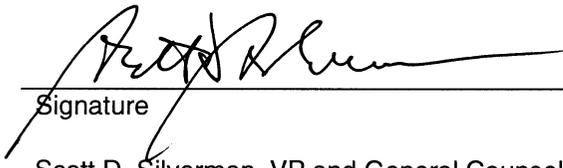
An information notice including; (1) the complete address and telephone number of the policyholder's service office of the company, (2) the name, address, and telephone number of the agent soliciting the policy, if applicable, and (3) the address and telephone number of the Arkansas State Insurance Department is provided to the policy owner.

2. Regulation 49 Life and Disability Guaranty Fund Notices

The Company provides a Life and Health Guaranty Notice to each policy owner.

3. Regulation 19 Unfair Sex Discrimination in the Sale of Insurance

The Company certifies it meets the provisions of this rule as well as all applicable requirements of the Department.



Signature
Scott D. Silverman, VP and General Counsel

Name/Title

March ⁵4, 2010

Date

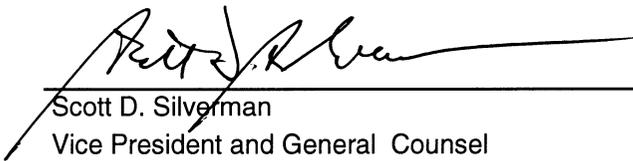
Commonwealth Annuity and Life Insurance Company

Regulation 6 Certification

To: Insurance Department in the State of Arkansas

Re: 4029-10 Endorsement

The company has reviewed the enclosed form(s) and certifies that, to the best of its knowledge and belief, each form submitted is consistent and complies with the requirements of Regulation 6.



Scott D. Silverman
Vice President and General Counsel

Date: March ⁵4, 2010