

SERFF Tracking Number: SALA-127286143 State: Arkansas
 Filing Company: SunAmerica Annuity and Life Assurance Company State Tracking Number: 49230
 Company Tracking Number: ASE-6257 (5/11)
 TOI: A02.1G Group Annuities - Deferred Non-Variable and Variable Sub-TOI: A02.1G.002 Flexible Premium
 Product Name: Payment Enhancement Endorsement
 Project Name/Number: /

Filing at a Glance

Company: SunAmerica Annuity and Life Assurance Company

Product Name: Payment Enhancement Endorsement SERFF Tr Num: SALA-127286143 State: Arkansas

TOI: A02.1G Group Annuities - Deferred Non-Variable and Variable SERFF Status: Closed-Approved-Closed State Tr Num: 49230

Sub-TOI: A02.1G.002 Flexible Premium Co Tr Num: ASE-6257 (5/11) State Status: Approved-Closed

Filing Type: Form Reviewer(s): Linda Bird

Authors: Tina Smith, Aly Lopez

Disposition Date: 07/11/2011

Date Submitted: 07/06/2011

Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile: Authorized

Project Number:

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments: Domiciliary state, Arizona, exempts this filing per ARS 20-1110.F and R20-6-218.

Explanation for Combination/Other:

Market Type: Group

Submission Type: New Submission

Group Market Size: Small and Large

Group Market Type: Discretionary

Overall Rate Impact:

Filing Status Changed: 07/11/2011

State Status Changed: 07/11/2011

Deemer Date:

Created By: Tina Smith

Submitted By: Tina Smith

Corresponding Filing Tracking Number:

Filing Description:

We are submitting the above-mentioned annuity certificate data form and endorsement form for your review and approval. They are new forms and not intended to replace any form previously approved by your Department. Domiciliary state, Arizona, exempts this filing per ARS 20-1110.F and R20-6-218.

SERFF Tracking Number: SALA-127286143 State: Arkansas
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Company Tracking Number: ASE-6257 (5/11)
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Variable and Variable
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The submitted Certificate Data Page form AS-992C-PVGII (5/11) and its corresponding endorsement form ASE-6257 (5/11) will be used with contract form AS-992C (12/11) that was approved by your Department under state tracking number 48020 on 2/24/2011. The Certificate Data page AS-992C-PVGII (5/11) is similar to the approved data page AS-992C-PAVG (12/10) that was also approved under the same SERFF tracking number as the base certificate. The data page will replace the approved certificate's data page when endorsement form ASE-6257 (5/11) is used.

Endorsement Form ASE-6257 (5/11) is a Payment Enhancement Endorsement that credit additional amounts to the contract value depending on the amount of the purchase payment made. There is a 9 year withdrawal charge associated with this feature. There is no additional cost associated with this payment enhancement feature. The nine year withdrawal charges are shown on the Certificate Data Page that is used with the Endorsement. The endorsement is also similar to endorsement form ASE-6229 (12/10) that was also approved under the same SERFF tracking number.

We have provided you with redline for ease in reviewing.

To the best of our knowledge and belief, this submission is in compliance with the statutes and regulations of your state and contains nothing that has been previously objected to or disapproved by your Department. No part of this filing contains any unusual or possibly controversial items from normal company or industry standards.

Company and Contact

Filing Contact Information

Tina Smith, Contract Analyst III
1999 Ave of the Stars
37th Floor
Los Angeles, CA 90067

tsmith@sunamerica.com
800-871-2000 [Phone] 6209 [Ext]
310-772-6569 [FAX]

Filing Company Information

SunAmerica Annuity and Life Assurance
Company
1999 Ave of the Stars
37th Floor
Los Angeles, CA 90067
(800) 871-2000 ext. [Phone]

CoCode: 60941 State of Domicile: Arizona
Group Code: Company Type: Annuity
Group Name: AIG State ID Number:
FEIN Number: 86-0198983

Filing Fees

SERFF Tracking Number: SALA-127286143 State: Arkansas
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	07/11/2011	07/11/2011

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Linda Bird	07/07/2011	07/07/2011	Tina Smith	07/07/2011	07/07/2011

SERFF Tracking Number: SALA-127286143 *State:* Arkansas
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Variable and Variable
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Disposition

Disposition Date: 07/11/2011

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: SALA-127286143 State: Arkansas
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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	Redline versions		Yes
Form	Payment Enhancement Endorsement		Yes
Form	Certificate Data Page		Yes

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Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 07/07/2011
Submitted Date 07/07/2011
Respond By Date 08/08/2011

Dear Tina Smith,

This will acknowledge receipt of the captioned filing.

Objection 1

Comment: Regulation 57 was revised effective January 2010, the filing fee is now \$50.00 per form. We will hold your filing in a pending status until the additional \$60.00 is received.

Please feel free to contact me if you have questions.

Sincerely,
Linda Bird

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Variable and Variable
Product Name: Payment Enhancement Endorsement
Project Name/Number: /

Response Letter

Response Letter Status Submitted to State
Response Letter Date 07/07/2011
Submitted Date 07/07/2011

Dear Linda Bird,

Comments:

Thank you for letting us know about the fee increase.

Response 1

Comments: I sent the additional fee.

Related Objection 1

Comment:

Regulation 57 was revised effective January 2010, the filing fee is now \$50.00 per form. We will hold your filing in a pending status until the additional \$60.00 is received.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Again, thank you for your assistance.

Sincerely,

Aly Lopez, Tina Smith

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Form Schedule

Lead Form Number: ASE-6257 (5/11)

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	ASE-6257 (5/11)	Certificate Amendment, Insert Page, Endorsement or Rider	Payment Enhancement Endorsement	Initial		0.000	ASE-6257 (5-11) .pdf
	AS-992C-PVGII (5/11)	Data/Declaration Pages	Certificate Data Page	Initial		0.000	AS-992C-PVGII (5-11) .pdf

SUNAMERICA ANNUITY AND LIFE ASSURANCE COMPANY

PAYMENT ENHANCEMENT ENDORSEMENT

Notwithstanding any provision in the Contract or Certificate (“Contract”) to the contrary, this Payment Enhancement Endorsement (the “Endorsement”) becomes a part of the Contract to which it is attached. Should any provision in this Endorsement conflict with the Contract, the provisions of this Endorsement will prevail.

Subject to the terms and conditions set forth below, this Endorsement credits additional amounts to Your Contract Value based on certain Purchase Payment(s) made to Your Contract prior to Age [86].

DEFINITIONS

For purposes of this Endorsement, the following definitions apply. Terms not defined in this Endorsement shall have the same meaning given to them in the Contract.

PAYMENT ENHANCEMENT

Amounts allocated to Your Contract Value by Us. Payment Enhancements are not considered Purchase Payments.

PAYMENT ENHANCEMENT RATE

The percentage applied to each Purchase Payment to calculate the Payment Enhancement.

PAYMENT ENHANCEMENT PROVISIONS

ALLOCATION OF PAYMENT ENHANCEMENTS

We will allocate Payment Enhancement(s) to available Variable Portfolio(s) and/or Fixed Account Option(s) in the same proportion as each corresponding Purchase Payment. The Initial Payment Enhancement Rate applicable to the Initial Purchase Payment is as shown on the Contract Data Page.

Payment Enhancement(s) for subsequent Purchase Payment(s) [are limited to the first two Contract Years and] will be determined by the Payment Enhancement Rate in effect at the time Your subsequent Purchase Payment is received by Us. We will send You a confirmation of the Payment Enhancement(s) allocated to Your Contract Value.

If Your death occurs within 12 months of a Payment Enhancement being allocated to Your Contract, We will deduct the Payment Enhancement from the Contract Value or Maximum Anniversary Value, if applicable, when calculating the Death Benefit. Upon Spousal Beneficiary Continuation, if the continuing spouse’s date of death occurs within 12 months of a Payment Enhancement being allocated to the Contract, We will deduct the Payment Enhancement from the Contract Value or Maximum Anniversary Value, if applicable, when calculating the Death Benefit payable to the continuing spouse’s Beneficiary.

DURING THE RIGHT TO EXAMINE/RIGHT TO CANCEL PERIOD

If You cancel Your Contract and Your state law requires:

1. The return of Contract Value, unless required by applicable law or regulation, We will refund the Contract Value as of the business day during which the Contract is received by Us or Your written request to cancel is received by Us in good order. The Contract Value is reduced by the amount of all Payment Enhancements We allocated to Your Contract Value; or
2. The return of Purchase Payment(s), We will refund the Purchase Payment(s).

We reserve the right to allocate Your Payment Enhancement(s) to a Variable Portfolio with a cash management objective until the end of the Right To Examine/Right To Cancel period.

Signed for the Company to be effective as of the Contract Date.



Mallery L. Reznik
Senior Vice President



Jana W. Greer
President

CERTIFICATE DATA PAGE

Certificate Number: [P9999999999]

Certificate Date: [June 2, 2011]

Participant: [JOHN DOE] **Date of Birth:** [March 1, 1976] **Age at Issue:** [35]

[**Participant:** [JANE DOE] **Date of Birth:** [June 10, 1976] **Age at Issue:** [34]]

Annuitant: [JOHN DOE] **Date of Birth:** [March 1, 1976] **Age at Issue:** [35]

[**Annuitant:** [JANE DOE] **Date of Birth:** [June 10, 1976] **Age at Issue:** [34]]

Beneficiary: As named by You

Initial Purchase Payment: [\$25,000.00]

Initial Payment Enhancement Rate: [1%]

Purchase Payment Age Limit: [Prior to the 86th birthday]

Minimum Subsequent Purchase Payment: [\$500]

Fixed Account Options – Minimum Guarantee Rate: [1.0% - 3.0%]

Minimum Partial Withdrawal Amount: [\$1,000]

Maximum Penalty-Free Withdrawal Percentage: [10%]

Minimum Systematic Withdrawal Amount: [\$100]

Minimum Amount Remaining After a Partial Withdrawal: [\$2,500]

Withdrawal Charge Schedule:

Number of Full Years Elapsed Between Purchase Payment Contribution And Date of Withdrawal	Withdrawal Charge as a Percentage of Withdrawn Purchase Payment
0	9%
1	9%
2	8%
3	8%
4	7%
5	6%
6	5%
7	4%
8	3%
9+	0%

See Page 11 for Withdrawal Provisions.

Minimum Transfer Amount: [\$100]

Separate Account Charge (including guaranteed death benefit risk charge of [0.10%]):

Contract Years 1-9: [1.90%]

Contract Years 10 & Thereafter: [1.30%]

Annual Certificate Maintenance Fee: [\$50]

Transfer Fee: [\$25]

Earliest Annuity Date After Certificate Date: [Two years]

Latest Annuity Date: [1st day of the month following Age 95]

Separate Account: [Variable Separate Account]

Optional Elections:
SunAmerica Income Plus

Optional Election Details:
See Attached Endorsement ASE-6248

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 Variable and Variable
 Product Name: Payment Enhancement Endorsement
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Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification		
Comments:		
Attachments:		
CofR.pdf		
AR Cert of Comp 6.pdf		
AR Cert of Comp 19.pdf		

	Item Status:	Status Date:
Bypassed - Item: Application		
Bypass Reason: This is an endorsement filing.		
Comments:		

	Item Status:	Status Date:
Satisfied - Item: Life & Annuity - Acturial Memo		
Comments:		
Attachment:		
AS-992C-PVGII (5-11).pdf		

	Item Status:	Status Date:
Satisfied - Item: Redline versions		
Comments:		
Attachments:		
AS-992C-PVGII (5-11) RED .pdf		
ASE-6257 (5-11)REDLINE .pdf		

SUNAMERICA ANNUITY AND LIFE ASSURANCE COMPANY

1 SunAmerica Center

Los Angeles, CA 90067-6022

CERTIFICATION OF READABILITY

This is to certify that the forms listed below are in compliance with Public Act 79-300.

A. Option Selected

1. Policy and its related forms are scored for the Flesch reading ease test as one unit and the combined score is _____.
2. Policy and its related forms are scored separately for the Flesch reading ease test. Scores for the policy are indicated below.

Forms and Form Numbers to which Certification is applicable:

<u>Form</u>	<u>Form Number</u>	<u>Flesch Score</u>
Endorsement	ASE-6257 (5/11)	50.4

B. Test Option Selected

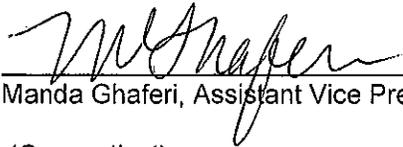
1. Test was applied to entire policy form(s).
2. Test was applied on sample basis. Form(s) contain(s) more than 10,000 words. Copy of form(s) enclosed indicating word samples tested.

C. Standards for Certification+

A checked box indicates the standard has been achieved.

1. The policy text achieves a minimum score of 45 on the Flesch reading ease test in accordance with the option chosen in Section A above.
2. It is printed in not less than ten point type, one point lead. (This does not apply to specification pages, schedules and tables.)
3. The layout and spacing of the policy separate the paragraphs from each other and from the border of the paper.
4. The section titles are captioned in bold face type or otherwise stand out significantly from the text.
5. Unnecessarily long, complicated or obscure words, sentences, paragraphs or constructions are not used in the policy.
6. The style, arrangement and overall appearance of the policy give no undue prominence to any portion of the policy, of any endorsements or riders.
7. A table of contents or an index of the principal sections is included in the policy. (This applies only if the policy has more than 3,000 words or consists of more than 3 pages.)

Signed for the Company at Los Angeles, California on 6/14/11



Manda Ghaferi, Assistant Vice President

(Connecticut)

**SUNAMERICA ANNUITY AND LIFE ASSURANCE COMPANY
1 SUNAMERICA CENTER
LOS ANGELES, CALIFORNIA 90067-6022**

Certification of Compliance

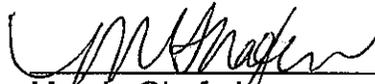
SUNAMERICA ANNUITY AND LIFE ASSURANCE COMPANY does hereby certify that the following listed form(s):

Endorsement: ASE-6257 (5/11); AS-992C-PVGII (5/11)

Do comply with all Sections of the **Arkansas** Insurance Code and regulations applicable to such insurance policies and related forms, and will be so construed. We also certify that we are in compliance with Rule and Regulation 6 regarding Variable Annuity Contracts.

6/14/11

Date



Manda Ghaferi
Assistant Vice President

**SUNAMERICA ANNUITY AND LIFE ASSURANCE COMPANY
1 SUNAMERICA CENTER
LOS ANGELES, CALIFORNIA 90067-6022**

Certification of Compliance

SUNAMERICA ANNUITY AND LIFE ASSURANCE COMPANY does hereby certify that the following listed form(s):

ASE-6257 (5/11); AS-992C-PVGII (5/11)

Do comply with all Sections of the **Arkansas** Insurance Code and regulations applicable to such insurance policies and related forms, and will be so construed. We also certify that we are in compliance with Rule and Regulation 19 (2nd Revision) regarding Unfair Sex Discrimination in the Sale of Insurance.

6/15/11
Date



Manda Ghaferi
Assistant Vice President

CERTIFICATE DATA PAGE

Certificate Number: [P9999999999] **Certificate Date:** [~~May~~ June 2, 2011]

Participant: [JOHN DOE] **Date of Birth:** [March 1, 1976] **Age at Issue:** [35]]

[**Participant:** [JANE DOE] **Date of Birth:** [June 10, 1976] **Age at Issue:** [34]]

Annuitant: [JOHN DOE] **Date of Birth:** [March 1, 1976] **Age at Issue:** [35]

[**Annuitant:** [JANE DOE] **Date of Birth:** [June 10, 1976] **Age at Issue:** [34]]

Beneficiary: As named by You

Initial Purchase Payment: [\$25,000.00]

Initial Payment Enhancement Rate: [1%]

Purchase Payment Age Limit: [Prior to the 86th birthday]

Minimum Subsequent Purchase Payment: [\$500]

Fixed Account Options – Minimum Guarantee Rate: [1.0% - 3.0%]

Minimum Partial Withdrawal Amount: [\$1,000]

Maximum Penalty-Free Withdrawal Percentage: [10%]

Minimum Systematic Withdrawal Amount: [\$100]

Minimum Amount Remaining After a Partial Withdrawal: [\$2,500]

Withdrawal Charge Schedule:

Number of Full Years Elapsed Between Purchase Payment Contribution And Date of Withdrawal	Withdrawal Charge as a Percentage of Withdrawn Purchase Payment
0	9%
1	9% <u>89%</u>
2	8%
3	8% <u>78%</u>
4	7%
5	6%
6	5%
7	4%
8	3%
9+	0%

See Page 11 for Withdrawal Provisions.

CERTIFICATE DATA PAGE (Cont'd.)

Minimum Transfer Amount: [\$100]

Separate Account Charge (including guaranteed death benefit risk charge of [0.10%]): ~~[1.65%]~~

Contract Years 1-9: [1.90%]

Contract Years 10 & Thereafter: [1.30%]

Annual Certificate Maintenance Fee: [\$50]

Transfer Fee: [\$25]

Earliest Annuity Date After Certificate Date: [Two years]

Latest Annuity Date: [1st day of the month following Age 95]

Separate Account: [Variable Separate Account]

Optional Elections:
SunAmerica Income Plus

Optional Election Details:
See Attached Endorsement ASE-6248

SUNAMERICA ANNUITY AND LIFE ASSURANCE COMPANY

PAYMENT ENHANCEMENT ENDORSEMENT

Notwithstanding any provision in the Contract or Certificate (“Contract”) to the contrary, this Payment Enhancement Endorsement (the “Endorsement”) becomes a part of the Contract to which it is attached. Should any provision in this Endorsement conflict with the Contract, the provisions of this Endorsement will prevail.

Subject to the terms and conditions set forth below, this Endorsement credits additional amounts to Your Contract Value based on certain Purchase Payment(s) made to Your Contract prior to Age [86]. ~~The expenses for this annuity may be higher than the expenses for an annuity without Payment Enhancements. This Endorsement may not be elected with other Endorsements containing different Withdrawal Charges or Schedules.~~

DEFINITIONS

For purposes of this Endorsement, the following definitions apply. Terms not defined in this Endorsement shall have the same meaning given to them in the Contract.

PAYMENT ENHANCEMENT

Amounts allocated to Your Contract Value by Us. Payment Enhancements are not considered Purchase Payments.

PAYMENT ENHANCEMENT RATE

The percentage applied to each Purchase Payment to calculate the Payment Enhancement.

PAYMENT ENHANCEMENT PROVISIONS

ALLOCATION OF PAYMENT ENHANCEMENTS

We will allocate Payment Enhancement(s) to available Variable Portfolio(s) and/or Fixed Account Option(s) in the same proportion as each corresponding Purchase Payment. The Initial Payment Enhancement Rate applicable to the Initial Purchase Payment is as shown on the Contract Data Page.

Payment Enhancement(s) for ~~Subsequent~~ subsequent Purchase Payment(s) [are limited to the first two Contract Years and] will be determined by the Payment Enhancement Rate in effect at the time Your ~~subsequent~~ Subsequent Purchase Payment is received by Us. We will send You a confirmation of the Payment Enhancement(s) allocated to Your Contract Value.

If Your death occurs within 12 months of a Payment Enhancement being allocated to Your Contract, We will deduct the Payment Enhancement from the Contract Value or Maximum Anniversary Value, if applicable, when calculating the Death Benefit. Upon Spousal Beneficiary Continuation, if the continuing spouse’s date of death occurs within 12 months of a Payment Enhancement being allocated to the Contract, We will deduct the Payment Enhancement from the Contract Value or Maximum Anniversary Value, if applicable, when calculating the Death Benefit payable to the continuing spouse’s Beneficiary.

DURING THE RIGHT TO EXAMINE/RIGHT TO CANCEL PERIOD

If You cancel Your Contract and ~~this Endorsement and if Your Contract~~ Your state law requires:

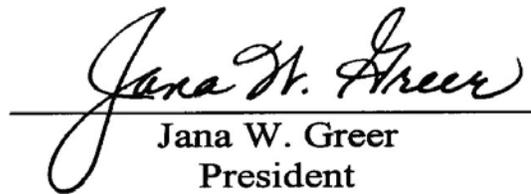
1. The return of Contract Value, unless required by applicable law or regulation, We will refund the Contract Value as of the business day during which the Contract is received by Us or Your written request to cancel is received by Us in good order. The Contract Value is reduced by the ~~lesser of: (a) the value of all Payment Enhancements as of the date on which We receive Your request to cancel Your Contract; or (b) the~~ amount of all Payment Enhancements We allocated to Your Contract Value; or
2. The return of Purchase Payment(s), We will refund the Purchase Payment(s).

We reserve the right to allocate Your Payment Enhancement(s) to a Variable Portfolio with a cash management objective until the end of the Right To Examine/Right To Cancel period.

Signed for the Company to be effective as of the Contract Date.



Mallery L. Reznik
Senior Vice President



Jana W. Greer
President