

<i>SERFF Tracking Number:</i>	<i>AGNN-127342652</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Western National Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>49447</i>
<i>Company Tracking Number:</i>	<i>R424-11-SPIA</i>		
<i>TOI:</i>	<i>A05I Individual Annuities- Immediate Non-Variable</i>	<i>Sub-TOI:</i>	<i>A05I.000 Annuities - Immediate Non-variable</i>
<i>Product Name:</i>	<i>R424-11-SPIA</i>		
<i>Project Name/Number:</i>	<i>/</i>		

## Filing at a Glance

Company: Western National Life Insurance Company

Product Name: R424-11-SPIA

SERFF Tr Num: AGNN-127342652 State: Arkansas

TOI: A05I Individual Annuities- Immediate Non-Variable

SERFF Status: Closed-Approved- Closed State Tr Num: 49447

Sub-TOI: A05I.000 Annuities - Immediate Non-variable

Co Tr Num: R424-11-SPIA State Status: Approved-Closed

Filing Type: Form

Reviewer(s): Linda Bird

Author: Angie Fox

Disposition Date: 08/09/2011

Date Submitted: 08/02/2011

Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

## General Information

Project Name:

Status of Filing in Domicile: Pending

Project Number:

Date Approved in Domicile:

Requested Filing Mode:

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Individual Market Type:

Overall Rate Impact:

Filing Status Changed: 08/09/2011

State Status Changed: 08/09/2011

Deemer Date:

Created By: Angie Fox

Submitted By: Angie Fox

Corresponding Filing Tracking Number:

Filing Description:

This form is being submitted for your review and approval. This form is new and does not replace any form previously approved by your Department. The filing includes no assumption or provisions that unfairly discriminate in availability, rates, benefits, or any other way for prospective insureds of the same class, equal expectation of life, and degree of risk. This filing does not contain any unusual or controversial items. To the best of our knowledge, information and belief, the forms submitted herewith are in compliance with the provisions of the insurance laws, rules, regulations and bulletins of your state, and such form contains no provisions previously disapproved by your Department.

Form R424-11-SPIA attaches to the Company's previously-approved SPIA Contract (Policy Form 01016A, approved on

SERFF Tracking Number: AGNN-127342652 State: Arkansas  
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 Company Tracking Number: R424-11-SPIA  
 TOI: A051 Individual Annuities- Immediate Non- Variable Sub-TOI: A051.000 Annuities - Immediate Non-variable  
 Product Name: R424-11-SPIA  
 Project Name/Number: /

05/22/01) and amends the Contract to provide for the acceleration of six months' worth of annuity payments. If the policy owner elects to exercise this feature, he or she would receive a lump sum payment equal to the value of the next scheduled monthly payment and the next five scheduled monthly payments for a total of six months' worth of payments. Regularly scheduled monthly payments will resume after six months.

## Company and Contact

### Filing Contact Information

Angie Fox, [angie.fox@aigretirement.com](mailto:angie.fox@aigretirement.com)  
 2919 Allen Parkway, L10-30 713-831-6050 [Phone]  
 Houston, TX 77019 713-831-6932 [FAX]

### Filing Company Information

Western National Life Insurance Company CoCode: 70432 State of Domicile: Texas  
 2929 Allen Parkway, L10-30 Group Code: 12 Company Type:  
 Houston, TX 77019 Group Name: State ID Number:  
 (713) 831-6006 ext. [Phone] FEIN Number: 75-0770838

## Filing Fees

Fee Required? Yes  
 Fee Amount: \$100.00  
 Retaliatory? Yes  
 Fee Explanation: the fee required to make this submission in our domicile state of Texas is \$100, therefore, \$100 is included.  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Western National Life Insurance Company	\$100.00	08/02/2011	50271536

SERFF Tracking Number: AGNN-127342652 State: Arkansas  
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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Linda Bird	08/09/2011	08/09/2011

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Variable  
*Product Name:* R424-11-SPIA  
*Project Name/Number:* /

## **Disposition**

Disposition Date: 08/09/2011

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

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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 - Acturial Memo		No
Supporting Document	sov		Yes
Form	Annuity Income Payment Advance Rider		Yes

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## Form Schedule

Lead Form Number: R424-11-SPIA

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	R424-11-SPIA	Policy/Cont Annuity Income ract/Fratern Payment Advance al Rider Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		50.700	R424-11-SPIA.pdf

**WESTERN NATIONAL**  
Life Insurance Company

[205 East 10<sup>th</sup> Avenue  
Amarillo, Texas 79101  
Telephone 800.424.4990]

**Annuity Income Payment Advance Rider**

This amendatory endorsement attaches to and forms a part of your Western National Life Insurance Company Contract. This endorsement is effective on the annuity's Policy Date. In case of conflict between the provisions of the Contract and those of this endorsement, this endorsement will prevail.

This rider amends your Contract to provide for the acceleration of six months' worth of annuity payments. If you are receiving annuity Income Payments on a monthly basis and you elect to exercise this feature, you will receive a lump sum payment equal to the value of your next scheduled monthly payment and the next five scheduled monthly payments for a total of six months' worth of payments. Regularly scheduled monthly payments will resume after six months.

Accelerated payments are fully taxable. This feature may only be elected twice during the life of the annuity Contract. This feature is not available if you are under age 59½ or if the annuity Contract is a qualified Plan.

All other terms and conditions of your Contract remain the same.

**WESTERN NATIONAL LIFE INSURANCE COMPANY**

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**SECRETARY**

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## Supporting Document Schedules

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> Flesch Certification		
<b>Comments:</b>		
<b>Attachment:</b> flesch.pdf		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Bypassed - Item:</b> Application		
<b>Bypass Reason:</b> n/a		
<b>Comments:</b>		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> Life & Annuity - Acturial Memo		
<b>Comments:</b>		
<b>Attachment:</b> Act Memo.pdf		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> SOV		
<b>Comments:</b>		
<b>Attachment:</b> SOV-R424-11-SPIA.pdf		

## CERTIFICATION

WESTERN NATIONAL LIFE INSURANCE COMPANY, NAIC # 70432, hereby certifies that the following form(s) comply with the Flesch scale of readability requirements of your State and the forms achieved the following score:

<u>Form Number</u>	<u>Form Description</u>	<u>Flesch Score</u>
R424-11-SPIA	Annuity Income Payment Advance Rider	50.7



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Tracey Harris  
Vice President

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May 17, 2011  
Date

**Statement of Variability for Form:  
R424-11-SPIA  
Western National Life Insurance Company  
Variability denoted by the use of brackets  
July 27, 2011**

- For administrative purposes, the location, telephone number and other annuity contact information is bracketed.
- For administrative purposes, the Officer signature is bracketed on the cover page of the policy.



Tracey Harris  
Vice President

July 27, 2011