

State: Arkansas **Filing Company:** Jackson National Life Insurance Company
TOI/Sub-TOI: A02.11 Individual Annuities- Deferred Non-Variable and Variable/A02.11.002 Flexible Premium
Product Name: Elite Access Variable and Fixed Annuity Application
Project Name/Number: Elite Access Variable and Fixed Annuity Application/VDA 650 04/13

Filing at a Glance

Company: Jackson National Life Insurance Company
Product Name: Elite Access Variable and Fixed Annuity Application
State: Arkansas
TOI: A02.11 Individual Annuities- Deferred Non-Variable and Variable
Sub-TOI: A02.11.002 Flexible Premium
Filing Type: Form
Date Submitted: 11/19/2012
SERFF Tr Num: JACK-128759799
SERFF Status: Closed-Approved-Closed
State Tr Num:
State Status: Approved-Closed
Co Tr Num: VDA 650 04/13

Implementation: 01/07/2013
Date Requested:
Author(s): Julia Braem, Jamie Morse, Julie Hughes, Lynne Gerding
Reviewer(s): Linda Bird (primary)
Disposition Date: 11/29/2012
Disposition Status: Approved-Closed
Implementation Date:

State Filing Description:

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General Information

Project Name: Elite Access Variable and Fixed Annuity Application

Status of Filing in Domicile: Pending

Project Number: VDA 650 04/13

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Individual Market Type:

Overall Rate Impact:

Filing Status Changed: 11/29/2012

State Status Changed: 11/29/2012

Deemer Date:

Created By: Lynne Gerding

Submitted By: Julia Braem

Corresponding Filing Tracking Number: VDA 650 04/13

Filing Description:

Submitted for your review and approval is the above referenced form. This application is new and will replace the previous application which used an individual matrix page approach.

Replaced Application Page Form Number - Page Number - SERFF Tracking Number - Approval Date

VDA 651 03/12 - 1 - JACK-127654391 - October 18, 2011

VDA 652 03/12 - 2 - JACK-127654391 - October 18, 2011

VDA 653 03/12 - 3 - JACK-127654391 - October 18, 2011

VDA 654 03/12 - 4 - JACK-127654391 - October 18, 2011

VDA 655 03/12 - 5 - JACK-127654391 - October 18, 2011

VDA 656 03/12 - 6 - JACK-127654391 - October 18, 2011

This application will be used with the following contracts.

Contract Number - SERFF Tracking Number - Approval Date

VA650 - JACK-127654391 - October 18, 2011

VA660 - JACK-127654391 - October 18, 2011

A readability certification has not been included with this submission, as this form is regulated as a security by the Securities and Exchange Commission and is not subject to readability requirements. This form will be issued by Jackson National Life Insurance Company, and will be marketed to the general public by appropriately licensed registered representatives through broker/dealers and financial institutions. The issue ages are currently 0 to 85, but are subject to change based on business needs.

The application contains fraud language that is specific to individual states. The language is clearly identified as to those states.

This form was filed in our domicile state on November 19, 2012. To the best of our knowledge and belief the provisions of the application comply with applicable laws and regulations of your jurisdiction. With regard to Regulation 19, Jackson National Life hereby certifies that we do NOT discriminate based on sex in the sale of insurance.

We will receive customer information required to issue a contract from an agent, broker, or financial representative. This information may be forwarded to us by facsimile, telephone, or electronically via the Internet, an extranet, or secure network. We would then issue the annuity contract based upon the information received from the agent, broker or financial

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representative. The annuity contract, including any contract data page, would then be delivered to the customer. We will maintain appropriate procedures to ensure the truth and accuracy of customer information received from the agent, broker or financial representative.

We will use this application in electronic environments, including laptop and a web based application process. We will secure both the integrity of applications signed by electronic signature, and the confidentiality of any information transmitted; including transmission of information via secured socket layer/secured line. Information contained in the application will be transmitted to Company's administrative office electronically as well as the electronic signature of the Owner/Applicant. Current technology will be used to ensure that the confidential information is not compromised. All processes used will comply with the Uniform Electronic Transactions Act, and to the extent applicable, the Federal ESIGN Act.

Variables within this form have been bracketed and generally consist of names, dates and numbers. This form, when issued, may vary in line breaks due to the removal of brackets, as well as format, paper size, border and Company logo. We will correct any minor typographical error that may be identified after filing. Additionally, a small square bar code may be placed in the far bottom left-hand corner.

The application includes an additional page to allow for flexibility to expand the Premium Allocation section for additional variable investment divisions. Pages 6 and 7 would move to pages 7 and 8; however the content of these pages would remain as they are in this filing. No information will be added or deleted from these pages. We have denoted this additional page as variable. It will be removed from the application if this space is not needed for the number of investment divisions marketed. This information has also been added to the Statement of Variability.

The form may vary somewhat in format, such as the two-sided pages versus one-sided pages. The content of the form will remain exactly as submitted.

We certify that Jackson complies with A.C.A. Statute 23-79-138 and Regulation 49 by providing the required disclosures at time of contract issue.

We look forward to your favorable review. If I can be of any assistance to you, or if additional information is required, please contact me by telephone at 800/317-7989, by facsimile at 517/706-5522, or by email at pd&sf@jackson.com.

Company and Contact

Filing Contact Information

Jamie Morse, Filing Specialist	pd&sf@jackson.com
1 CORPORATE WAY	800-317-7989 [Phone]
LANSING, MI 48951	517-706-5522 [FAX]

Filing Company Information

Jackson National Life Insurance Company	CoCode: 65056	State of Domicile: Michigan
1 Corporate Way	Group Code: 918	Company Type:
Lansing, MI 48915	Group Name:	State ID Number:
(800) 317-7989 ext. [Phone]	FEIN Number: 38-1659835	

Filing Fees

State: Arkansas **Filing Company:** Jackson National Life Insurance Company
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Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? No
 Fee Explanation: \$50.00 per form - 1 form
 Per Company: No

Company	Amount	Date Processed	Transaction #
Jackson National Life Insurance Company	\$50.00	11/19/2012	65053964

SERFF Tracking #:

JACK-128759799

State Tracking #:

Company Tracking #:

VDA 650 04/13

State:

Arkansas

Filing Company:

Jackson National Life Insurance Company

TOI/Sub-TOI:

A02.11 Individual Annuities- Deferred Non-Variable and Variable/A02.11.002 Flexible Premium

Product Name:

Elite Access Variable and Fixed Annuity Application

Project Name/Number:

Elite Access Variable and Fixed Annuity Application/VDA 650 04/13

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	11/29/2012	11/29/2012

State: Arkansas **Filing Company:** Jackson National Life Insurance Company
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Disposition

Disposition Date: 11/29/2012

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Statement of Variability		Yes
Form	Elite Access Variable and Fixed Annuity Application		Yes

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Form Schedule

Lead Form Number: VDA 650 04/13

Item No.	Schedule Item Status	Form Name	Form Number	Form Type	Form Action	Action Specific Data	Readability Score	Attachments
1		Elite Access Variable and Fixed Annuity Application	VDA 650 04/13	AEF	Initial		0.000	VDA 650 04-13 (Base Bracketed 11-19-12).pdf

Form Type Legend:

ADV	Advertising	AEF	Application/Enrollment Form
CER	Certificate	CERA	Certificate Amendment, Insert Page, Endorsement or Rider
DDP	Data/Declaration Pages	FND	Funding Agreement (Annuity, Individual and Group)
MTX	Matrix	NOC	Notice of Coverage
OTH	Other	OUT	Outline of Coverage
PJK	Policy Jacket	POL	Policy/Contract/Fraternal Certificate
POLA	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	SCH	Schedule Pages



Elite AccessSM (04/13)
 VARIABLE AND FIXED ANNUITY APPLICATION [(VA650)]
 [VARIABLE ANNUITY APPLICATION [(VA660)]]

JACKSON[®]
 NATIONAL LIFE INSURANCE COMPANY
 [Home Office: Lansing, Michigan
 www.jackson.com]

First Class Mail: P.O. Box 30314
 Lansing, MI 48909-7814

Overnight Mail: 1 Corporate Way
 Lansing, MI 48951

Customer Care: 800-873-5654
Bank or Financial Institution Customer Care: 800-777-7779
Fax: 800-943-6761
Hours: 8:00 a.m. to 8:00 p.m. ET
Email: contactus@jackson.com

Broker/Dealer or External Account No. (if applicable)

Jackson pre-assigned Contract number: (if applicable)

PLEASE PRINT CLEARLY

If Owner is a Trust, Trustee Certification form [X5335] or trust documents are required with application.

It is required for Good Order that you provide a physical address.

If Owner (and/or Joint Owner) is not a U.S. Citizen and/or a U.S. Resident, [Form W-9] or [Form W-8BEN] (as applicable) is required with application.

Primary Owner

Type of Ownership: Individual/Joint Custodian Trust Corporation/Pension Plan Government Entity

Sex Male Female
 U.S. Citizen Yes No

Social Security Number or Tax I.D. Number Telephone Number (including area code)
 ()

First Name Middle Name Last Name Date of Birth (mm/dd/yyyy)
 / /

Non-Natural Owner/Entity Name (if applicable) Email Address (print clearly)

Physical Address Line 1 (No P.O. Boxes) Line 2 City State ZIP Code

Mailing Address Line 1 Line 2 City State ZIP Code

Joint Owner

First Name Middle Name Last Name

Social Security Number Date of Birth (mm/dd/yyyy) Sex Male Female
 / /

U.S. Citizen Yes No

Email Address (print clearly) Relationship to Owner Telephone Number (including area code)
 ()

Physical Address Line 1 (No P.O. Boxes) Line 2 City State ZIP Code

Primary Annuitant

Same as Owner Social Security Number Telephone No. (including area code) Sex Male Female
 ()

U.S. Citizen Yes No

First Name Middle Name Last Name Date of Birth (mm/dd/yyyy)
 / /

Physical Address Line 1 (No P.O. Boxes) Line 2 City State ZIP Code



Joint Annuitant

Same as Joint Owner Social Security Number Telephone No. (including area code) () Sex Male Female
 U.S. Citizen Yes No

First Name Middle Name Last Name Date of Birth (mm/dd/yyyy) / /

Physical Address Line 1 (No P.O. Boxes) Line 2 City State ZIP Code

Beneficiary(ies)

- It is required for Good Order that the Death Benefit Percentage be whole numbers and **must** total 100% for each beneficiary type.
- Please use form [X3041] for additional beneficiaries.

Primary Percentage of Death Benefit % Social Security/Tax I.D. Number

First Name Middle Name Last Name Date of Birth (mm/dd/yyyy) / /

Non-Natural Entity Name Relationship to Owner Telephone No. (including area code) ()

Physical Address (No P.O. Boxes) Apt/Suite # City State ZIP Code

Primary Contingent Percentage of Death Benefit %

Individual Name (First, Middle, Last) or Non-Natural Entity Name Telephone No. (including area code) ()

Social Security/Tax I.D. Number Date of Birth (mm/dd/yyyy) / / Relationship to Owner

Physical Address (No P.O. Boxes) Apt/Suite # City State ZIP Code

Electronic Delivery Authorization

GO GREEN. IT'S ONLY NATURAL.



- Check the boxes next to the types of documents you wish to receive electronically.

I consent to receive electronically:

ALL DOCUMENTS Prospectuses and prospectus supplements Annual and Semi-Annual reports
 Periodic and immediate confirmation statements Other Contract-related correspondence

This consent will continue unless and until revoked and will cover delivery to you in the form of an email or by notice to you of a document's availability on Jackson National Life Insurance Company's (also referred to as Jackson) website. Please contact the appropriate Jackson Service Center or go to www.jackson.com to update your email address, revoke your consent to electronic delivery or request paper copies. Certain types of correspondence may continue to be delivered by the United States Postal Service for compliance reasons. Registration on Jackson's website (www.jackson.com) is required for electronic delivery of Contract-related correspondence.

My email address is:

I (We) will notify the company of any new email address.

The computer hardware and software requirements that are necessary to receive, process and retain electronic communications that are subject to this consent are as follows: To view and download material electronically, you must have a computer with internet access, an active email account and Adobe Acrobat Reader. If you don't already have Adobe Acrobat Reader, you can download it free from www.adobe.com.

There is no charge for electronic delivery of electronic communications, although you may incur the costs of internet access and of such computer and related hardware and software as may be necessary for you to receive, process and retain electronic communications from Jackson. Please make certain you have given Jackson a current email address. Also let Jackson know if that email address changes. We may need to notify you of a document's availability through email. You may request paper copies, whether or not you consent or revoke your consent for electronic delivery, at any time and for no charge. Even if you have given us consent, we are not required to make electronic delivery and we have the right to deliver any communications in paper form.



Optional Benefit May not be available in all states and once selected cannot be changed.

- **Optional Benefit:** Additional charges will apply. Please see the prospectus for details.

Liquidity Option (Contract Form [VA660])

Fixed Account Options are not available if Liquidity Option is selected.

Premium Allocation

Tell us how you want your annuity premiums invested. Whole percentages only. **TOTAL ALLOCATION MUST EQUAL 100%.**

Total number of allocation selections may not exceed [18].

% Traditional Investments		% Traditional Investments		% Traditional Investments	
Equity Investments		Fixed Income		Specialty Strategies	
	Curian/American Funds® Growth		JNL/Franklin Templeton Global Multisector Bond		Curian/DFA U.S. Micro Cap
	JNL®/American Funds Growth-Income		JNL/Goldman Sachs Emerging Markets Debt		Curian/Franklin Templeton Frontier Markets
	Curian/The Boston Company Equity Income		Curian/PIMCO Credit Income		JNL/Eastspring Investments Asia ex-Japan
	JNL/DFA U.S. Core Equity		JNL/PIMCO Real Return		JNL/Eastspring Investments China-India
	Curian/Epoch Global Shareholder Yield		JNL/PIMCO Total Return Bond		Curian/TBD Latin America
	JNL/Franklin Templeton International Small Cap Growth		JNL/PPM America Floating Rate Income		Curian/TBD Emerging Markets Small Cap
	JNL/Franklin Templeton Small Cap Value		JNL/PPM America High Yield Bond		Curian/TBD Developed Markets Europe
	JNL/Invesco International Growth		JNL/T. Rowe Price Short-Term Bond		Curian/TBD Eastern Europe
	JNL/Invesco Small Cap Growth		JNL/WMC Money Market		Curian/TBD European 30
	JNL/JPMorgan MidCap Growth		Curian/TBD International Bond		JNL/Mellon Capital Nasdaq® 25
	JNL/Lazard Emerging Markets		JNL/Mellon Capital Bond Index		JNL/Mellon Capital NYSE® International 25
	JNL/PPM America Mid Cap Value	% Traditional Investments			JNL/Mellon Capital Pacific Rim 30
	JNL/T. Rowe Price Established Growth	Sector Strategies			JNL/Mellon Capital S&P SMid 60
	JNL/T. Rowe Price Value		JNL/Mellon Capital Communications Sector		JNL/Mellon Capital Value Line® 30
	JNL/WMC Balanced		JNL/Mellon Capital Consumer Brands Sector		JNL/S&P 4
	JNL/Mellon Capital S&P 500® Index		JNL/Mellon Capital Financial Sector		
	JNL/Mellon Capital S&P® 400 MidCap Index		JNL/Mellon Capital Healthcare Sector		
	JNL/Mellon Capital Small Cap Index		JNL/Mellon Capital Oil & Gas Sector		
	JNL/Mellon Capital International Index		JNL/Mellon Capital Technology Sector		
	JNL/Mellon Capital Emerging Markets Index		JNL/Mellon Capital Utilities Sector		

Premium Allocations continued on pages [5] and [6].



Premium Allocation

! Tell us how you want your annuity premiums invested. Whole percentages only. **TOTAL ALLOCATION MUST EQUAL 100%.**

Variable Funds - TBD

! Total number of allocation selections may not exceed 18.

Premium Allocations continued on page 6.



Premium Allocation (Cont. from page 4 [and 5])

Tell us how you want your annuity premiums invested. Whole percentages only. **TOTAL ALLOCATION MUST EQUAL 100%.**

Total number of allocation selections may not exceed 18.

NOTE: The Contract permits Jackson without advance notice to restrict the amount of Premium payments into, and the amount and frequency of transfers between, into and from, any Fixed Account Option; to close any Fixed Account Option; and to require transfers from a Fixed Account Option. Accordingly, you should consider whether investment in a Fixed Account Option is suitable given your investment objectives.

% Alternative Investments		% Risk Management Strategies		% Guidance Portfolios	
	JNL/AQR Managed Futures Strategy		Curian Dynamic Risk Advantage® - Growth	Diversified - Strategic	
	JNL/BlackRock Commodity Securities Strategy		Curian Dynamic Risk Advantage - Diversified		Curian Guidance - Conservative
	Curian/The Boston Company Multi-Alpha Market Neutral Equity		Curian Dynamic Risk Advantage - Income		Curian Guidance - Moderate
	JNL/Brookfield Global Infrastructure	% Tactically Managed Strategies			Curian Guidance - Moderate Growth
	Curian/FAMCO Flex Core Covered Call		Curian Tactical Advantage 35		Curian Guidance - Growth
	Curian/Franklin Templeton Natural Resources		Curian Tactical Advantage 60		Curian Guidance - Maximum Growth
	JNL/Invesco Global Real Estate		Curian Tactical Advantage 75	% Guidance Portfolios	
	JNL/Mellon Capital Global Alpha		JNL/BlackRock Global Allocation	Diversified - Tactical	
	Curian/Neuberger Berman Currency		JNL/Ivy Asset Strategy		Curian Guidance Tactical Moderate Growth
	Curian/Nicholas Convertible Arbitrage	% Guidance Portfolios SM			Curian Guidance Tactical Maximum Growth
	Curian/PineBridge Merger Arbitrage	Focused		Emerging Growth	
	JNL/Red Rocks Listed Private Equity		Curian Guidance - Institutional Alt 100 Conservative		Curian Guidance - Emerging Markets Conservative
	Curian/Van Eck International Gold		Curian Guidance - Institutional Alt 100 Moderate		Curian Guidance - Emerging Markets Moderate
	Curian/BlackRock Global long/short credit		Curian Guidance - Institutional Alt 100 Growth		Curian Guidance - Emerging Markets Growth
	Curian/UBS long/short credit		Curian Guidance - Equity 100	% Guidance Portfolios	
	Curian/PPMA long/short credit		Curian Guidance - Fixed Income 100	Other	
	Curian/TBD Emerging Markets long/short credit	% Guidance Portfolios			Curian Guidance - Dividend Equity Income
	Curian/Eaton Vance Global Macro	Rising Rate/Inflation			Curian Guidance - Institutional Alt 65
	Curian/TBD International Real Estate		Curian Guidance - Rising Interest Rate concentrated	% Fixed Account Options *	
	Curian/TBD International Infrastructure		Curian Guidance - Rising Interest Rate diversified	*Not available if the Liquidity Option is selected.	
			Curian Guidance - Real Assets		1-Year
					3-Year
					5-Year
					7-Year

Systematic Investment (periodic premium reallocation programs)

Other Systematic Investment Options may be available. Please see Systematic Investment form (V5485).

Automatic Rebalancing. The 3-, 5- and 7-Year Fixed Account Options are not available for Automatic Rebalancing.

Frequency: Monthly Quarterly Semiannually Annually

Start Date (mm/dd/yyyy) **OR** Immediately after issue.

Note: If no date is selected, the program will begin one month/quarter/half-year/year (depending on the frequency you selected) from the date Jackson applies the first premium payment. If no frequency is selected, the frequency will be annual. No transfers will be made on days 29, 30 or 31.



Annuitization/Income Date

Specify Income Date (mm/dd/yyyy)

/	/
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If an Annuitization/Income Date is not specified, the Company will default to the Latest Income Date as shown in the Contract.

Notice to Applicant

ARKANSAS, COLORADO, KENTUCKY, MAINE, NEW MEXICO, OHIO, PENNSYLVANIA, AND WEST VIRGINIA RESIDENTS, PLEASE NOTE: Any person who knowingly, and with intent to defraud any insurance company or other person, files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

ALABAMA RESIDENTS, PLEASE NOTE: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or who knowingly presents false information in an application for insurance is guilty of a crime and may be subject to restitution fines or confinement in prison, or any combination thereof.

In **COLORADO**, any insurance company, or agent of an insurance company, who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding, or attempting to defraud, the policyholder or claimant

with regard to a settlement or award payable from insurance proceeds, shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

DISTRICT OF COLUMBIA RESIDENTS, PLEASE NOTE: WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits, if false information materially related to a claim was provided by the applicant.

LOUISIANA AND RHODE ISLAND RESIDENTS, PLEASE NOTE: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

NEW JERSEY RESIDENTS, PLEASE NOTE: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

Client Acknowledgements

1. I (We) hereby represent to the best of my (our) knowledge and belief that each of the statements and answers contained in this application are true, complete and correctly recorded.
2. I (We) certify that the Social Security or Taxpayer Identification number(s) shown above is (are) correct.
3. **I (We) understand that annuity benefits, death benefit values, and withdrawal values, if any, when based on the investment experience of an Investment Division in the separate account of Jackson, are variable and may be increased or decreased, and the dollar amounts are not guaranteed.**
4. I (We) have been given a current prospectus for this variable annuity and for each available Investment Division.
5. The Contract I (we) have applied for is suitable for my (our) insurance and investment objectives, financial situation and needs.
6. I understand the restrictions imposed by 403(b)(11) of the Internal Revenue Code. I understand the investment alternatives available under my employer's 403(b) plan, to which I may elect to transfer my Contract Value.
7. I (We) understand that the Contract's Fixed Account Minimum Interest Rate will be redetermined each Redetermination Date. The redetermined rate, which may be higher or lower than the Initial Fixed Account Minimum Interest Rate, will apply for that entire Redetermination Period. (Not applicable if Liquidity Optional Benefit is selected.)
8. **I (We) understand that allocations to the Fixed Account Options, with certain exceptions, are subject to an adjustment if withdrawn or transferred prior to the end of the applicable period, which may reduce amounts withdrawn or transferred. (Not applicable if Liquidity Optional Benefit is selected.)**
9. I (We) certify that the age of the Owner and any Joint Owner, primary spousal Beneficiary, Annuitant, or Joint Annuitant, if applicable, stated in this application are true and correctly recorded.
10. I (We) understand that Jackson issues other annuities with similar features, benefits, limitations and charges. I (We) have discussed the alternatives with my (our) financial representative.

Client Signatures

It is required for Good Order that all applicable parties to the Contract sign here.

Owner's Signature	Date Signed (mm/dd/yyyy)	State where signed
<input type="text"/>	<input type="text" value="/ /"/>	<input type="text"/>
Owner's Title (required if owned by an Entity)		
<input type="text"/>		
Joint Owner's Signature	Date Signed (mm/dd/yyyy)	State where signed
<input type="text"/>	<input type="text" value="/ /"/>	<input type="text"/>
Annuitant's Signature (if other than Owner)	Date Signed (mm/dd/yyyy)	State where signed
<input type="text"/>	<input type="text" value="/ /"/>	<input type="text"/>
Joint Annuitant's Signature (if other than Joint Owner)	Date Signed (mm/dd/yyyy)	State where signed
<input type="text"/>	<input type="text" value="/ /"/>	<input type="text"/>

Producer/Representative Acknowledgements

Complete this certification regarding sales material section only if:

- Your client has other existing policies or annuity contracts

AND

- Will be either terminating any of those existing policies or using the funds from existing policies to fund this new Contract.

I certify that:

I did not use sales material(s) during the presentation of this Jackson product to the applicant.

I used only Jackson-approved sales material(s) during the presentation of this Jackson product to the applicant. In addition, copies of all approved sales material(s) used during the presentation were left with the applicant.

- By signing this form, I certify that:
- I am authorized and qualified to discuss the Contract herein applied for.
 - I have fully explained the Contract to the client, including Contract restrictions and charges and I believe this transaction is suitable given the client's financial situation and needs.
 - The Producer/Representative's Certification Regarding Sales Material has been answered correctly.
 - I have read Jackson's Position With Respect to the Acceptability of Replacements [XADV5790] and ensure that this replacement (if applicable) is consistent with that position.
 - The applicant's Statement Regarding Existing Policies or Annuity Contracts has been answered correctly to the best of my knowledge and belief.
 - The applicant's statement as to whether or not an existing life insurance policy or annuity contract is being replaced is true and accurate to the best of my knowledge and belief.
 - I have complied with requirements for disclosures and/or replacements as necessary.

Program Options Note: Contact your home office for program information. If no option is indicated, the designated default will be used.

Jackson Prod./Rep. No.	Producer/Representative Signature	Date Signed (mm/dd/yyyy)
<input type="text"/>	<input type="text"/>	<input type="text" value="/ /"/>
First Name	Middle Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Email Address (print clearly)	Business Telephone No. (including area code)	
<input type="text"/>	<input type="text" value="()"/>	
Program Options *	Percentage	
[A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/>]	<input type="text"/> %	

* **NOTE:** If Liquidity Option is selected, only Program Option E is available.

If more than one Producer/Representative is participating in a Program Option on this case, please provide all Producer/Representative names, Jackson Producer/Representative numbers and percentages for each (totaling 100%).

It is required for Good Order that all Producer/Rep numbers be supplied.

Producer/Representative Name # 2	Jackson Producer/Representative No.	Percentage
<input type="text"/>	<input type="text"/>	<input type="text"/> %
Producer/Representative Name # 3	Jackson Producer/Representative No.	Percentage
<input type="text"/>	<input type="text"/>	<input type="text"/> %

**Not FDIC/NCUA Insured • Not Bank/CU guaranteed • May lose value
Not a deposit • Not insured by any federal agency**

SERFF Tracking #:

JACK-128759799

State Tracking #:

Company Tracking #:

VDA 650 04/13

State:

Arkansas

Filing Company:

Jackson National Life Insurance Company

TOI/Sub-TOI:

A02.11 Individual Annuities- Deferred Non-Variable and Variable/A02.11.002 Flexible Premium

Product Name:

Elite Access Variable and Fixed Annuity Application

Project Name/Number:

Elite Access Variable and Fixed Annuity Application/VDA 650 04/13

Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Statement of Variability		
Comments:			
Attachment(s):			
VDA 650 04-13 Statement of Variability - Base.pdf			

**JACKSON NATIONAL LIFE INSURANCE COMPANY
STATEMENT OF VARIABILITY**

Form Number: VDA 650 04/13

Revised: 11/16/2012

Page(s)	Bracketed (Variable)	Range of Variables
1	[Elite Access (04/13)]	This is the current marketing name for this contract. The marketing name on the application may change to correspond with any changes made to the marketing name of the contracts. This edition date could change to reflect subsequent product launches.
1	[(VA650)]	This is the form number for the current underlying contract with which this application will be used. This form number could change to reflect a different approved contract.
1	[Variable Annuity Application]	This is current description for the Elite Access Variable Annuity with Liquidity Option. This could be removed if the Company stops marketing this product.
1,4	[(VA660)]	This is the form number for the current underlying contract with which this application will be used. This form number could change to reflect a different approved contract or be removed if the Company stops marketing this product.
1	[Home Office: Lansing, Michigan www.jackson.com]	This is the current home office address, city/state and website of Jackson National Life Insurance Company. In the future, if changed, this will reflect a different, valid address within the confines of the United States, as well as a valid Company website.
1	Customer Care Mailing Address and Contact Information	These are the current post office boxes and toll-free telephone numbers of Jackson's Customer Care Service Centers. In the future, if changed, this will reflect a valid street address within the confines of the United States, as well as a valid telephone number and email address.
1	Type of Ownership: <input type="checkbox"/> Individual/Joint <input type="checkbox"/> Custodian <input type="checkbox"/> Trust <input type="checkbox"/> Corporation/Pension Plan <input type="checkbox"/> Government Entity]	These are the current types of annuity ownerships the Company is currently tracking. Should Company needs require a change to add to or eliminate ownership types for tracking, this section would be modified.
1	Trustee Certification form [X5335]	This is the current form number for the administrative form listed. In the future, if changed, this will reflect an updated administrative form number.
1	[Form W-9] [Form W-8BEN]	These are the IRS forms that are required for all non-US Citizen and/or non-US resident applicants. In the future, if the IRS changes the form number of these forms, this will reflect the valid IRS form number.
1	Page 1 of [8]	This field will contain a page number, either 7 or 8. The application includes an additional page to allow for flexibility to expand the Premium Allocation section to accommodate the addition of Investment Divisions. The pagination could change if we do not utilize page 5 as part of the application and that page is removed.
1-8	Control Number [V650 04/13]	This number would change if there were a change to the bracketed information on the application requiring revision of the applications. If changed, this will reflect a revised control number and/or revision date.
2	Additional beneficiary designation form [X3041]	This is the current form number for the administrative form listed. In the future, if changed, this will reflect an updated administrative form number.
2	Electronic Delivery of Statements/Correspondence <input type="checkbox"/> ALL DOCUMENTS <input type="checkbox"/> Prospectuses and prospectus supplements <input type="checkbox"/> Annual and Semi-Annual reports <input type="checkbox"/> Periodic and immediate confirmation statements <input type="checkbox"/> Other Contract-related correspondence.]	These are the current documents offered electronically by the Company. Any different information will reflect new statements or correspondence provided by the Company.
2	[www.adobe.com]	This is this website for Adobe Systems Incorporated. Any different web address will reflect the current website where Adobe Acrobat Reader or other software program may be downloaded.
2	Page 2 of [8]	This field will contain a page number, either 7 or 8. The application includes an additional page to allow for flexibility to expand the Premium Allocation section to accommodate the addition of Investment Divisions. The pagination could change if we do not utilize

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		page 5 as part of the application and that page is removed.
3	[Annuity Type] section	The IRS rules regarding annuity types may change. Any changes regarding annuity types made by IRS rules would be changed in this section as well.
3	Notice Regarding Replacement form [X0512]	This is the current form number for the administrative form listed. In the future, if changed, this will reflect an updated administrative form number.
3	Transfer Information [Non-Qualified Plans Types: <input type="checkbox"/> IRC 1035 Exchange <input type="checkbox"/> Non-1035 Exchange All Other Plan Types: <input type="checkbox"/> Direct Transfer <input type="checkbox"/> Direct Rollover <input type="checkbox"/> Non-Direct Rollover]	These are the current transfer options offered by the Company. Any different information will reflect new market options.
3	Telephone/Electronic Transfers Authorization If no election is made, Jackson will default to "Yes" for residents of all states except [Nebraska, New Hampshire, and North Dakota.]	These are the states that currently require the Company to default to No for authorization of telephone/electronic transfers. Any additional states will reflect a requirement made by that state.
3	Page 3 of [8]	This field will contain a page number, either 7 or 8. The application includes an additional page to allow for flexibility to expand the Premium Allocation section to accommodate the addition of Investment Divisions. The pagination could change if we do not utilize page 5 as part of the application and that page is removed.
4	Optional Benefit	This is the current Optional Benefit option offered by the Company. Additional benefits may be added (as approved) or removed.
4-6	Number of Premium allocations allowed: [18]	This is the number of allocations that are currently allowed by our IT systems. The number of allocations may change as our IT systems are upgraded, not to exceed 100.
4-6	Premium Allocation section. Investment Division names	These are the current Investment Divisions offered by the Company. In the future, if changed, the Investment Divisions offered by the Company will reflect Investment Division names that have been appropriately filed with the SEC.
4	Premium Allocations continued on page[s] 5 [and 6].	The application includes an additional page to allow for flexibility to expand the Premium Allocation section to accommodate the addition of Investment Divisions. If the Company does not utilize the additional Premium Allocation page, the pagination in the direction to additional Premium Allocation pages would change to remove the "s" on pages and the reference to "and 6".
4	Page 4 of [8]	This field will contain a page number, either 7 or 8. The application includes an additional page to allow for flexibility to expand the Premium Allocation section to accommodate the addition of Investment Divisions. The pagination could change if we do not utilize page 5 as part of the application and that page is removed.
5	Premium Allocation section page	This is an additional page to allow for flexibility to expand the Premium Allocation section to accommodate the addition of Investment Division names. If the Company does not offer enough Investment Divisions to utilize this extra space, this page will be deleted from the application. The only addition to this page would be for Investment Division names.
6	Premium Allocation (Cont. from page[s] 4 [and 5])	The application includes an additional page to allow for flexibility to expand the Premium Allocation section to accommodate the addition of Investment Divisions. If the Company does not utilize the additional Premium Allocation page, the pagination in the direction to additional Premium Allocation pages would change to remove the "s" on pages and the reference to "and 5".
6	Fixed Account Options names	These are the current Fixed Account Options offered by the Company. The Company may offer one Fixed Account Option, any combination of Fixed Account Options or no Fixed Account Option based upon the yield on investments available to the Company in relation to the statutory minimum interest rate.
6	Automatic Rebalancing option	These are the current rebalancing options offered by the company. Any different information will reflect currently available rebalancing options offered by the Company.
6	Page [6 of 8]	The pagination could change if we do not utilize page 5 as part of the application and that page is removed. If so then, page 6 would

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		change to 5; and page 8 would change to 7.
7	Notice to Applicant section: Fraud Notice Disclosures	Bracketed for changes required by states for disclosure regarding fraud notice.
7	Page [7 of 8]	The pagination could change if we do not utilize page 5 as part of the application and that page is removed. If so then, page 7 would change to 6; and page 8 would change to 7.
8	Position With Respect to the Acceptability of Replacement Materials [XADV5790]	This is the current form number for the administrative form listed. In the future, if changed, this will reflect an updated administrative form number.
8	Program Options [<input type="checkbox"/> Option A etc.]	These are the current program options available to the Producer. The Company could add options or delete options.
8	Page [8 of 8]	The pagination could change if we do not utilize page 5 as part of the application and that page is removed. If so then, page 8 would change to 7 for both instances.