

SERFF Tracking Number: GARD-126409396 State: Arkansas
 Filing Company: The Guardian Life Insurance Company of America State Tracking Number: 44284
 Company Tracking Number: 09-R295
 TOI: L07I Individual Life - Whole Sub-TOI: L07I.101 Fixed/Indeterminate Premium - Single Life
 Product Name: PT EWL Endorsement
 Project Name/Number: PT EWL/09-R295

Filing at a Glance

Company: The Guardian Life Insurance Company of America

Product Name: PT EWL Endorsement

SERFF Tr Num: GARD-126409396 State: Arkansas

TOI: L07I Individual Life - Whole

SERFF Status: Closed-Approved-Closed State Tr Num: 44284

Sub-TOI: L07I.101 Fixed/Indeterminate Premium - Single Life

Co Tr Num: 09-R295

State Status: Approved-Closed

Filing Type: Form

Reviewer(s): Linda Bird

Authors: Lisa Capella, Louis A Conte, Peter Diggins, Margaret Lewis-Forbes, John Monahan, Carol Nardella, Monica Wilson, Connie Gelfat, Carline Hamilton, Kathleen Tobin

Disposition Date: 12/10/2009

Date Submitted: 12/09/2009

Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: PT EWL

Status of Filing in Domicile: Pending

Project Number: 09-R295

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 12/10/2009

Explanation for Other Group Market Type:

State Status Changed: 12/10/2009

Deemer Date:

Created By: Connie Gelfat

Submitted By: John Monahan

Corresponding Filing Tracking Number:

SERFF Tracking Number: GARD-126409396 State: Arkansas
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Product Name: PT EWL Endorsement
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Filing Description:

Re: The Guardian Life Insurance Company of America

NAIC #: 429-64246 FEIN #: 13-5123390

Modification of Policy Provisions Endorsement, form 09-R295

Dear Director:

We are filing a new endorsement form entitled "Modification of Policy Provisions" for your Department's approval. This rider does not replace any previously approved form. This form will be used with our Whole Life Insurance Policy, 08-EWL AR which was previously approved by your Department on 6/16/2008 (DOI # 39254). We plan on introducing this form on March 2010.

In addition to the general market, our plan is to begin offering this life insurance product in tax-qualified, pension trust owned market. As such, we need to make the previously approved policy unisex. The minimum face amount for the unisex plan will be \$50,000.

Endorsement form 09-R295 deleted all references to the insured's gender. The endorsement also changes several of the Settlement Option tables (to make them unisex), and makes several other changes to the policy language. When this policy is issued in the tax qualified Pension market, endorsement form 09-R295 will always be attached to the policy to make it unisex.

The Mortality Table for this product, when issued unisex, is the Composite 2001 Commissioners' Standard Ordinary (80) Mortality Table. The enclosed endorsement references this table.

Form 09-R295 will be marketed with an illustration. We have enclosed all applicable certifications, transmittal forms, filing fees, etc. for this filing. We have also enclosed a unisex actuarial memoranda that will be used when this endorsement is issued, however please note that the reserve memoranda has not changed since the previously approved policy filing.

I hope this information is satisfactory and that we may receive your Department's approval of this submission at your earliest convenience. If you have any questions or concerns over this submission, please feel free to contact me at (212) 598-8419 or toll-free at (877) 600-1460, or via SERFF.

Sincerely,

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John J. Monahan
 Director
 Individual Markets Compliance

Company and Contact

Filing Contact Information

Kathleen Tobin, Life Team Leader Kathleen_Tobin@glic.com
 7 Hanover Square 212-919-8727 [Phone]
 New York, NY 10004 212-919-2592 [FAX]

Filing Company Information

The Guardian Life Insurance Company of America CoCode: 64246 State of Domicile: New York
 7 Hanover Square Group Code: 429 Company Type: Life
 New York, NY 10004 Group Name: State ID Number:
 (212) 598-8704 ext. [Phone] FEIN Number: 13-5123390

Filing Fees

Fee Required? Yes
 Fee Amount: \$20.00
 Retaliatory? No
 Fee Explanation: per endorsement/rider
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
The Guardian Life Insurance Company of America	\$20.00	12/09/2009	32632173

SERFF Tracking Number: GARD-126409396 State: Arkansas
Filing Company: The Guardian Life Insurance Company of State Tracking Number: 44284
America
Company Tracking Number: 09-R295
TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single
Life
Product Name: PT EWL Endorsement
Project Name/Number: PT EWL/09-R295

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Linda Bird	12/10/2009	12/10/2009

SERFF Tracking Number: GARD-126409396 *State:* Arkansas
Filing Company: The Guardian Life Insurance Company of *State Tracking Number:* 44284
America
Company Tracking Number: 09-R295
TOI: L07I Individual Life - Whole *Sub-TOI:* L07I.101 Fixed/Indeterminate Premium - Single
Life
Product Name: PT EWL Endorsement
Project Name/Number: PT EWL/09-R295

Disposition

Disposition Date: 12/10/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: GARD-126409396 State: Arkansas
 Filing Company: The Guardian Life Insurance Company of America State Tracking Number: 44284
 Company Tracking Number: 09-R295
 TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single Life
 Product Name: PT EWL Endorsement
 Project Name/Number: PT EWL/09-R295

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Actuarial Memo		No
Form	Modification of Policy Provisions Endorsement		Yes

SERFF Tracking Number: GARD-126409396 State: Arkansas
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Form Schedule

Lead Form Number: 09-R295

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	09-R295	Policy/Cont	Modification of Policy Initial ract/Fratern Provisions al Endorsement Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		45.000	09-R295.pdf

Modification of Policy Provisions Endorsement

References to Gender

Any references to the gender of the Insured in the "Policy Value Options Available" and "Age and Sex" provisions of the policy, and in the policy's "Index" are deleted.

Mortality Table

The mortality table reference on the Policy Data page is deleted and replaced by the following:

THE MORTALITY TABLE REFERRED TO IN THE BASIS OF VALUES PROVISION IS THE COMPOSITE 2001 COMMISSIONERS' STANDARD ORDINARY (80) MORTALITY TABLE, AGE NEAREST BIRTHDAY, WITH CONTINUOUS FUNCTIONS. THE INTEREST RATE REFERRED TO IN THE BASIS OF VALUES PROVISION IS 4%.

Changes to Owner Section

- The following language has been added to the "Owner" provision of the policy:

We will deal with the owner according to the terms of this policy. We will not be bound by the provisions of any trust agreement. We will not be responsible for the actions of any trustee and will be fully discharged in making any payments to such trustee.

- The "Successor Owner" and "Joint Owner" provisions in the policy have been deleted.

Changes to Payment Options Section

- The paragraph entitled "Option 6 – Joint and Survivor Income" is deleted and replaced by the following:

Option 6 - Joint and Survivor Income: We will make monthly payments during the lifetime the insured and the insured's spouse and during the survivor's remaining lifetime. The guaranteed monthly payments shown in the Option 6 tables include interest at 3% a year. If the insured dies before the insured's spouse, the monthly payment for the remaining lifetime will be either:

- one half the payment during the insured's lifetime if you elect Option 6a, or
 - 75% of the payment during the insured's lifetime if you elect Option 6b.
- The following language has been added to the end of the "Options Available" provision of the policy:

The Payment Option Tables are based on the Annuity 2000 Mortality Tables (female), projected 20 years to the year 2020 by 50% of female Scale G factors for females. Males and females have the same guaranteed annuity payout tables.

- As shown below, the tables for Options 4, 5 and 6 have been deleted and replaced by the following:

OPTIONS 4 AND 5 - GUARANTEED MONTHLY PAYMENT FOR EACH \$1000 OF PROCEEDS+

Age	Option 4	Option 5	Age	Option 4	Option 5
20	2.89	2.88	54	3.96	3.88
21	2.90	2.89	55	4.03	3.94
22	2.92	2.91	56	4.10	4.00
23	2.93	2.92	57	4.17	4.06
24	2.95	2.94	58	4.24	4.13
25	2.96	2.95	59	4.32	4.20
26	2.98	2.97	60	4.41	4.27
27	3.00	2.99	61	4.50	4.35
28	3.02	3.01	62	4.59	4.43
29	3.04	3.03	63	4.69	4.52
30	3.06	3.05	64	4.80	4.61
31	3.08	3.07	65	4.91	4.70
32	3.10	3.09	66	5.03	4.81
33	3.12	3.11	67	5.16	4.91
34	3.15	3.13	68	5.29	5.03
35	3.17	3.16	69	5.43	5.15
36	3.20	3.18	70	5.57	5.27
37	3.23	3.21	71	5.73	5.41
38	3.26	3.24	72	5.89	5.55
39	3.29	3.26	73	6.06	5.70
40	3.32	3.29	74	6.24	5.86
41	3.35	3.32	75	6.42	6.03
42	3.39	3.36	76	6.61	6.20
43	3.42	3.39	77	6.81	6.39
44	3.46	3.43	78	7.00	6.59
45	3.50	3.46	79	7.20	6.80
46	3.54	3.50	80	7.40	7.03
47	3.59	3.54	81	7.60	7.26
48	3.63	3.58	82	7.80	7.52
49	3.68	3.63	83	7.99	7.78
50	3.73	3.67	84	8.17	8.06
51	3.79	3.72	85	8.34	8.35
52	3.84	3.77			
53	3.90	3.82			

+ Guaranteed monthly payments for any ages not shown will be furnished upon request.

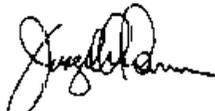
OPTION 6-GUARANTEED MONTHLY PAYMENT FOR EACH \$1000 OF PROCEEDS+

		Age of Annuitant									
Age of Annuitant	50	51	52	53	54	55	56	57	58	59	
50	3.57	3.60	3.64	3.67	3.71	3.75	3.79	3.82	3.87	3.91	
51	3.58	3.61	3.65	3.68	3.72	3.76	3.80	3.84	3.88	3.93	
52	3.59	3.62	3.66	3.70	3.74	3.78	3.82	3.86	3.90	3.95	
53	3.60	3.63	3.67	3.71	3.75	3.79	3.83	3.88	3.92	3.96	
54	3.60	3.64	3.68	3.72	3.76	3.80	3.85	3.89	3.94	3.98	
55	3.61	3.65	3.69	3.73	3.78	3.82	3.86	3.91	3.95	4.00	
56	3.62	3.66	3.70	3.74	3.79	3.83	3.88	3.92	3.97	4.02	
57	3.63	3.67	3.71	3.76	3.80	3.85	3.89	3.94	3.99	4.04	
58	3.64	3.68	3.72	3.77	3.81	3.86	3.91	3.96	4.01	4.06	
59	3.65	3.69	3.73	3.78	3.82	3.87	3.92	3.97	4.02	4.07	
60	3.65	3.70	3.74	3.79	3.83	3.88	3.93	3.98	4.04	4.09	
61	3.66	3.70	3.75	3.79	3.84	3.89	3.94	4.00	4.05	4.11	
62	3.67	3.71	3.76	3.80	3.85	3.90	3.96	4.01	4.07	4.12	
63	3.67	3.72	3.76	3.81	3.86	3.91	3.97	4.02	4.08	4.14	
64	3.68	3.72	3.77	3.82	3.87	3.92	3.98	4.04	4.09	4.15	
65	3.68	3.73	3.78	3.83	3.88	3.93	3.99	4.05	4.11	4.17	
66	3.69	3.73	3.78	3.83	3.89	3.94	4.00	4.06	4.12	4.18	
67	3.69	3.74	3.79	3.84	3.89	3.95	4.01	4.07	4.13	4.19	
68	3.69	3.74	3.79	3.85	3.90	3.96	4.02	4.08	4.14	4.21	
69	3.70	3.75	3.80	3.85	3.91	3.96	4.02	4.09	4.15	4.22	
70	3.70	3.75	3.80	3.86	3.91	3.97	4.03	4.09	4.16	4.23	

		Age of Annuitant									
Age of Annuitant	60	61	62	63	64	65	66	67	68	69	70
50	3.95	3.99	4.04	4.08	4.13	4.18	4.22	4.27	4.32	4.37	4.43
51	3.97	4.01	4.06	4.11	4.15	4.20	4.25	4.30	4.35	4.41	4.46
52	3.99	4.04	4.08	4.13	4.18	4.23	4.28	4.33	4.38	4.44	4.49
53	4.01	4.06	4.11	4.15	4.20	4.26	4.31	4.36	4.42	4.47	4.53
54	4.03	4.08	4.13	4.18	4.23	4.28	4.34	4.39	4.45	4.51	4.56
55	4.05	4.10	4.15	4.20	4.26	4.31	4.37	4.42	4.48	4.54	4.60
56	4.07	4.12	4.17	4.23	4.28	4.34	4.40	4.45	4.51	4.57	4.64
57	4.09	4.14	4.20	4.25	4.31	4.37	4.43	4.49	4.55	4.61	4.67
58	4.11	4.16	4.22	4.28	4.34	4.40	4.46	4.52	4.58	4.65	4.71
59	4.13	4.19	4.24	4.30	4.36	4.42	4.49	4.55	4.61	4.68	4.75
60	4.15	4.21	4.26	4.33	4.39	4.45	4.52	4.58	4.65	4.72	4.79
61	4.17	4.23	4.29	4.35	4.41	4.48	4.55	4.61	4.68	4.75	4.83
62	4.18	4.24	4.31	4.37	4.44	4.51	4.57	4.65	4.72	4.79	4.86
63	4.20	4.26	4.33	4.39	4.46	4.53	4.60	4.68	4.75	4.83	4.90
64	4.22	4.28	4.35	4.42	4.49	4.56	4.63	4.71	4.78	4.86	4.94
65	4.23	4.30	4.37	4.44	4.51	4.58	4.66	4.74	4.82	4.90	4.98
66	4.25	4.32	4.39	4.46	4.53	4.61	4.69	4.77	4.85	4.93	5.02
67	4.26	4.33	4.40	4.48	4.55	4.63	4.71	4.80	4.88	4.97	5.06
68	4.27	4.35	4.42	4.50	4.57	4.66	4.74	4.82	4.91	5.00	5.10
69	4.29	4.36	4.44	4.51	4.59	4.68	4.76	4.85	4.94	5.04	5.13
70	4.30	4.37	4.45	4.53	4.61	4.70	4.79	4.88	4.97	5.07	5.17

+ Guaranteed monthly payments for any ages not shown will be furnished upon request.

The Guardian Life Insurance Company of America


Secretary

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Filing Company: The Guardian Life Insurance Company of State Tracking Number: 44284
America
Company Tracking Number: 09-R295
TOI: L07I Individual Life - Whole Sub-TOI: L07I.101 Fixed/Indeterminate Premium - Single
Life
Product Name: PT EWL Endorsement
Project Name/Number: PT EWL/09-R295

Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification Comments: Attachments: Readabiity Certification.pdf Certificate of Compliance with Rule 19 and 49.pdf		

	Item Status:	Status Date:
Bypassed - Item: Application Bypass Reason: not applicable Comments:		



STATE OF ARKANSAS
READABILITY CERTIFICATION

COMPANY NAME: The Guardian Life Insurance Company of America

This is to certify that the form(s) referenced below has achieved a Flesch Reading Ease Score as indicated below and complies with the requirements of Ark. Stat. Ann. Section 66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Language Simplification Act.

<u>Form Title</u>	<u>Form Number</u>	<u>Flesch Score</u>
Modification of Policy Provisions Endorsement	09-R295	45

Name: John J. Monahan
Title: Director, Individual Markets Compliance
Date: December 7, 2009



**Certificate of Compliance with
Arkansas Rule and Regulation 19 and 49**

Insurer: The Guardian Life Insurance Company of America

Form Number(s): 09-R295

I hereby certify that the filing above meets all applicable Arkansas requirements including the requirements of Rule and Regulation 19 and 49.

Signature of Company Officer

John J. Monahan

Name

Director

December 7, 2009

Date