

SERFF Tracking Number: JEPL-126125683 State: Arkansas  
 Filing Company: The Lincoln National Life Insurance Company State Tracking Number: 42176  
 Company Tracking Number: AMD-2912  
 TOI: L09I Individual Life - Flexible Premium Sub-TOI: L09I.002 Joint (Last Survivor)  
 Adjustable Life  
 Product Name: Amendment to Policy  
 Project Name/Number: AMD-2912/AMD-2912

## Filing at a Glance

Company: The Lincoln National Life Insurance Company

Product Name: Amendment to Policy SERFF Tr Num: JEPL-126125683 State: Arkansas  
 TOI: L09I Individual Life - Flexible Premium SERFF Status: Closed-Approved- State Tr Num: 42176  
 Adjustable Life Closed  
 Sub-TOI: L09I.002 Joint (Last Survivor) Co Tr Num: AMD-2912 State Status: Approved-Closed  
 Filing Type: Form Reviewer(s): Linda Bird  
 Authors: Jane Neidermyer, William Otten, Jeanine Taylor, Lori Saltmarsh  
 Disposition Date: 05/08/2009  
 Date Submitted: 04/23/2009 Disposition Status: Approved-Closed  
 Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

## General Information

Project Name: AMD-2912 Status of Filing in Domicile: Pending  
 Project Number: AMD-2912 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: 05/08/2009 Explanation for Other Group Market Type:  
 State Status Changed: 05/08/2009  
 Deemer Date: Created By: Jeanine Taylor  
 Submitted By: Jane Neidermyer Corresponding Filing Tracking Number:  
 Filing Description:  
 Re: Individual Life Insurance Policy Forms  
 AMD-2912 Amendment to Flexible Premium Adjustable Survivorship Life Insurance Policy  
 The Lincoln National Life Insurance Company  
 Group & NAIC #: 020-65676

We are submitting the above referenced amendment for your review and approval. This is a new form and will not

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replace any form previously approved by your Department. The amendment AMD-2912 will be used with Flexible Premium Adjustable Survivorship Life Insurance Policy SUL 5030 approved by your Department on 4/15/2009.

The amendment will be attached to the policy at the time of issue. The amendment changes the requirements of the three provisions under the Changes in Insurance Coverage provision of the policy by (1) removing the requirement that both insureds be alive on the date of the request for a decrease in Specified Amount or a change to the Death Benefit Option elected and (2) changing the maximum allowable attained age reference specific to a request to Increase the Specified Amount.

We have bracketed the officer name and signature and the service office address in the form as variable information because they may change for new issues in the future (but not in-force policies). It is our understanding that changes to the bracketed items for new issues will not necessitate a new filing. We confirm that the brackets will not actually appear on the form at issue and any of the changes made will be completed within the allowable limits of the laws in the state in which the policy was issued.

The amendment AMD-2912 achieves a Flesch score of 56.71. This filing has been submitted to Indiana, our state of domicile, and is currently pending approval. The appropriate certifications, transmittal forms, checklists and any applicable filing fees are included with this filing as part of the supporting documentation. To the best of our knowledge and belief, the form complies with the laws and regulations of your State. This submission contains no unusual or possibly controversial items from the standpoint of normal company or industry standards.

We trust that the information provided is satisfactory and look forward to your response. Should you require any additional information, please feel free to contact me directly at 1-800-258-3648 ext 5627.

## Company and Contact

### Filing Contact Information

Jane Neidermyer, Senior Compliance Analyst jane.neidermyer@lfg.com  
One Granite Place 800-258-3648 [Phone] 5627 [Ext]  
PO Box 515 603-226-5128 [FAX]  
Concord, NH 03302-0515

### Filing Company Information

The Lincoln National Life Insurance Company CoCode: 65676 State of Domicile: Indiana  
350 Church Street Group Code: 20 Company Type: Life Insurance  
Hartford, CT 06103 Group Name: State ID Number:  
(800) 258-3648 ext. [Phone] FEIN Number: 35-0472300

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**Filing Fees**

Fee Required? Yes  
Fee Amount: \$35.00  
Retaliatory? Yes  
Fee Explanation: \$35.00 for each form filed  
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
The Lincoln National Life Insurance Company	\$35.00	04/23/2009	27385133



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## **Disposition**

Disposition Date: 05/08/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.



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## Form Schedule

Lead Form Number: AMD-2912

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	AMD-2912	Policy/Cont	Amendment to SUL ract/Fratern 5030 al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		56.710	AMD-2912 .pdf

**The Lincoln National Life Insurance Company**

**Service Office:** 100 North Greene Street, P.O. Box 21008, Greensboro, North Carolina 27420

**AMENDMENT TO FLEXIBLE PREMIUM ADJUSTABLE SURVIVORSHIP  
LIFE INSURANCE POLICY**

This Amendment is a part of this policy and it takes effect on the Policy Date. This Amendment is subject to the terms and conditions of this policy unless otherwise stated herein.

The Changes in Insurance Coverage provision of the policy is revised by removing the requirement that both Insureds be alive on the date of the request for (1) a Decrease in Specified Amount or (2) Changes in Death Benefit Option.

The Increases in Specified Amount Provision of the policy is revised by removing "and prior to the younger Insured's Attained Age 121."

**Termination**

This Amendment will cease if the policy is surrendered or otherwise terminated.



Secretary

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## Supporting Document Schedules

	<b>Item Status:</b>	<b>Status Date:</b>
<p><b>Satisfied - Item:</b> Flesch Certification</p> <p><b>Comments:</b></p> <p><b>Attachments:</b></p> <p>AR_Readability.pdf</p> <p>AR_Cert. of Compliance.pdf</p>		
<p><b>Bypassed - Item:</b> Application</p> <p><b>Bypass Reason:</b> This amendment will not need a separate application - it will be part of SUL 5030.</p> <p><b>Comments:</b></p>		
<p><b>Bypassed - Item:</b> Outline of Coverage</p> <p><b>Bypass Reason:</b> N/A Not a health product</p> <p><b>Comments:</b></p>		

Arkansas

READABILITY CERTIFICATION

*The Lincoln National Life Insurance Company*

Re: AMD-2912 – Amendment to Flexible Premium Adjustable Survivorship  
Life Insurance Policy

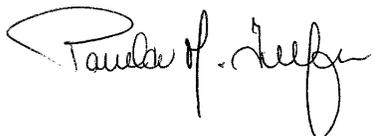
We hereby certify that the attached Form(s) is (are) in compliance with the Rules and Regulation requirements regarding Life, Annuities, and Accident and Sickness Insurance Language Simplification Standards and has (have) achieved a Flesch Reading Ease score of:

Form Number:

Flesch:

AMD-2912

56.71



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Pamela M. Telfer, Assistant Vice President  
Product Compliance

Date: April 22, 2009

**ARKANSAS**

**CERTIFICATE OF COMPLIANCE**

*The Lincoln National Life Insurance Company*

**Re: AMD-2912 – Amendment to Flexible Premium Adjustable  
Survivorship Life Insurance Policy**

To the best of my knowledge and belief, the policy form listed above complies with the provisions of Rule and Regulation 19 as well as all applicable requirements of the Arkansas Insurance department.

To the best of my knowledge and belief we are in compliance with the requirements of Arkansas Code Ann. 23-79-138. We provide a document entitled “Important Information to Policyholders” which contains the required information.

To the best of my knowledge and belief we are in compliance with the requirements of Regulation 49 and we provide the required Guaranty Association notice.



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Pamela M. Telfer, AVP  
Product Compliance

Date: April 22, 2009