

<i>SERFF Tracking Number:</i>	<i>GEFA-126651448</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Genworth Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>45983</i>
<i>Company Tracking Number:</i>	<i>GL1000-0609</i>		
<i>TOI:</i>	<i>L09I Individual Life - Flexible Premium Adjustable Life</i>	<i>Sub-TOI:</i>	<i>L09I.001 Single Life</i>
<i>Product Name:</i>	<i>FlexPlus 2009 - GLIC</i>		
<i>Project Name/Number:</i>	<i>GenGuard UL - SOV/GL1000-0609</i>		

Filing at a Glance

Company: Genworth Life Insurance Company	SERFF Tr Num: GEFA-126651448	State: Arkansas
Product Name: FlexPlus 2009 - GLIC	SERFF Status: Closed-Accepted	State Tr Num: 45983
TOI: L09I Individual Life - Flexible Premium Adjustable Life	For Informational Purposes	
Sub-TOI: L09I.001 Single Life	Co Tr Num: GL1000-0609	State Status: Filed-Closed
Filing Type: Form	Authors: Brenda Bond, Ronald Jackson	Reviewer(s): Linda Bird
	Date Submitted: 06/18/2010	Disposition Date: 06/22/2010
		Disposition Status: Accepted For Informational Purposes
Implementation Date Requested: On Approval		Implementation Date:

State Filing Description:

General Information

Project Name: GenGuard UL - SOV	Status of Filing in Domicile: Pending
Project Number: GL1000-0609	Date Approved in Domicile:
Requested Filing Mode: Informational	Domicile Status Comments: N/A
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Group Market Size:
Overall Rate Impact:	Group Market Type:
Filing Status Changed: 06/22/2010	Explanation for Other Group Market Type:
	State Status Changed: 06/22/2010
Deemer Date:	Created By: Ronald Jackson
Submitted By: Ronald Jackson	Corresponding Filing Tracking Number: GEFA- 126185066; AR file # 42698

Filing Description:

We are submitting this filing to notify your Department of revisions to the Statement of Variability included with the submission of form GL1000-0609 AR, Flexible Premium Adjustable Life Insurance Policy. The policy was approved by your Department on June 23, 2009 (SERFF tracking # GEFA-126185066; AR file # 42698). The variability statement was revised to provide clarity regarding our original intentions and to provide additional flexibility as follows:

- Initial Specified Amount – Changed the minimum from \$25,000 to a range of \$1,000 to \$100,000.
- Minimum Specified Amount – Changed the minimum from \$25,000 to a range of \$1,000 to \$100,000

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- Monthly Administrative Fee – Changed the stated cost of \$8.28 to show a range of \$5 to \$12.
- Coverage Protection Monthly Administrative Fee – Changed the stated cost of \$9.00 to show a range of \$0 to \$30.

In addition, we have revised the actuarial memorandum as follows:

- Revised the second paragraph of the Death Benefits section (page 1) for clarity.
- Revised the description of the Coverage Protection Monthly Deduction by removing reference to the Monthly Administrative fee being a fixed charge of \$9 (page 3).
- Revised item 1 of the Partial Withdrawals section (page 6).
- Revised ECUt in the Terms and Definitions (page 8) for clarity.

The items that have been changed on the variability statement are items that were bracketed on the data pages included with the contract. We certify no other changes have been made to the forms submitted.

Thank you, in advance, for your assistance with this filing. If there are any questions, please contact me using the information provided below.

Sincerely,

Ronald N. Jackson, Sr. Contract Analyst
Email: ronald.jackson@genworth.com
Phone #: (804) 289-6725
Fax #: (804) 281-6057 or (804) 281-6916

Company and Contact

Filing Contact Information

Ronald N. Jackson, Contract Analyst ronald.jackson@genworth.com
Product Compliance 804-289-6725 [Phone]
P O Box 27601 804-281-6916 [FAX]
Richmond, VA 23261-7601

Filing Company Information

Genworth Life Insurance Company CoCode: 70025 State of Domicile: Delaware
6610 W Broad Street Group Code: 350 Company Type: LifeHealth &
Richmond, VA 23230 Group Name: Annuity
(804) 281-6600 ext. [Phone] FEIN Number: 91-6027719 State ID Number:

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Filing Fees

Fee Required? Yes
Fee Amount: \$20.00
Retaliatory? No
Fee Explanation: \$20 per filing when filed without the contract.
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Genworth Life Insurance Company	\$20.00	06/18/2010	37314079
Genworth Life Insurance Company	\$30.00	06/21/2010	37343861

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Linda Bird	06/22/2010	06/22/2010

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	06/21/2010	06/21/2010	Ronald Jackson	06/21/2010	06/21/2010

SERFF Tracking Number: GEFA-126651448 *State:* Arkansas
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Adjustable Life
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Disposition

Disposition Date: 06/22/2010

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification	No	No
Supporting Document	Application	No	No
Supporting Document	Health - Actuarial Justification	No	No
Supporting Document	Outline of Coverage	No	No
Supporting Document	Variability Statement	Yes	Yes
Supporting Document	Actuarial Memorandum	No	No

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Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 06/21/2010
Submitted Date 06/21/2010
Respond By Date 07/21/2010

Dear Ronald N. Jackson,

This will acknowledge receipt of the captioned filing.

Objection 1

No Objections

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 \$30.00 is received.

Please feel free to contact me if you have questions.

Sincerely,

Linda Bird

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Response Letter

Response Letter Status Submitted to State
Response Letter Date 06/21/2010
Submitted Date 06/21/2010

Dear Linda Bird,

Comments:

Per your request today:

Response 1

Comments: The additional \$30 fee has been submitted.

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 \$30.00 is received.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Ronald N. Jackson

Sincerely,

Brenda Bond, Ronald Jackson

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Supporting Document Schedules

Item Status:

Status

Date:

Satisfied - Item: Variability Statement

Comments:

Attachment:

GenGuard UL SOV.pdf

Statement of Variability
 Genworth Life Insurance Company and Genworth Life and Annuity Insurance Company
 Revised May 28, 2010

Variable Data	Explanation
GL1000-0609; GA1000-0609	
Address	Accommodates changes in servicing location address.
Service Center Phone	Accommodates changes in the phone number for the servicing center.
Officer Signature	Accommodates changes of corporate officers.
GL1000-0609-S; GA1000-0609-S	
Policy Number	Reflects a unique number assigned to this policy by the system
Policy Date	Reflects the date that determines monthiversary and anniversary processing. Accommodates backdating and other specific dating requests made by Owner.
Date of Issue	Reflects the date the policy is generated by the system.
Monthly Deduction Stop Date	Reflects the date the company will discontinue subtracting Monthly Deductions from the Policy Value.
Insured	Reflects actual name of Insured
Issue Age	Reflects the insurance age of the insured based on the insured's closest age
Sex	Reflects the sex of the insured at birth
Premium Class	Reflects the premium classification assigned to this Insured.
Owner	Refers to the application and the name of the owner as stated on the application; would permit a change to reflect the actual name of Owner
Beneficiary	Refers to the application and the name of the beneficiary as stated on the application; would permit a change to reflect actual name of Beneficiary
Initial Specified Amount	Reflects the amount of insurance on the Insured's life at inception of the policy. The minimum range is \$1,000 - \$100,000. Unlimited maximum.
Minimum Specified Amount	Reflects the lowest Specified Amount available on this product. The minimum range allowed will be \$1,000 - \$100,000.
Rider Information	Reflects information on any riders selected by the Owner. Available will be: Waiver of Specified Premium, Children's Insurance, Accidental Death, and Accelerated Death Benefit.
Planned Periodic Premium	Reflects the amount (and frequency) of the premiums the Owner plans to pay.
Loan Balance on Policy Date	Reflects the loan amount, if any, on funds rolled over in a 1035 exchange.
Monthly Administrative Fee	Reflects the fee that is part of the Monthly Deduction subtracted from the Policy Value at the beginning of every Policy Month. The range is \$5 - \$12 per policy month.
Monthly Expense Charge For Initial Specified Amount	Reflects the per unit expense charge based on a per thousand of specified amount, the time period for which the charge is made, and the per unit expense charge, if any, beyond the stated time period. This amount is subtracted from the Policy Value at the beginning of every Policy Month.

Premium Expense	Reflects the percentage charge of premium paid and the additional percentage above a specified amount of premium in the year. The premium paid minus the expense charge results in a net premium that is credited to the Policy Value.
Administrative Fee For Withdrawal	Reflects the fee taken for each policy withdrawal.
Surrender Charges and Withdrawal Factors	Reflects the charge that would be applied if the policy is surrendered and the withdrawal factor that would be applied to the amount of withdrawal. The factored withdrawal amount less the withdrawal charge results in the net amount of withdrawal.
Guaranteed Minimum Credited Interest Rate	Reflects the rate of interest credited to the Policy Value
Credited Interest Rate on Loan Balance	Reflects the rate of interest credited to the loaned portion of the Policy Value
Preferred Loan Balance Interest Rate Charged	Reflects the rate of interest charged on the preferred loan portion of the Policy Value. Maximum rate will never exceed 8%.
Non-preferred Loan Balance Interest Rate Charged	Reflects the rate of interest charged on the non-preferred loan portion of the Policy Value. Maximum rate will never exceed 8%.
Nonforfeiture Values Interest Rate	Reflects the rate of interest on nonforfeiture values.
Paid-Up Insurance Interest Rate	Reflects the paid-up insurance rate of interest
Mortality Table	Reflects the Mortality Table that will be used with this product.
Table of Maximum Monthly Risk Rates Per \$1,000 of Net Amount at Risk	Reflects the maximum risk rates applicable for the insured's attained age, sex and premium class.
Table of End-of-Policy-Year Death Benefit Factors for the Initial Specified Amount	Reflects the death benefit factors that apply for the insured's attained age, sex and premium class for the initial specified amount.
GL1000-0609-CS; GA1000-0609-CS	
Coverage Protection Monthly Administrative Fee	Reflects the fee that is part of the Coverage Protection Monthly Deduction subtracted from the Coverage Protection Amount at the beginning of every Policy Month. The range is \$0 - \$30 per policy month.
Coverage Protection Monthly Expense Charge for Specified Amount	Reflects the per unit expense charge based on a per thousand of specified amount, the time period for which the charge is made, and the per unit expense charge, if any, beyond the stated time period. This amount is subtracted from the Coverage Protection Amount at the beginning of every Policy Month for the prior Policy Month.
Coverage Protection Premium Expense Charge each Policy Year On Total premium received	Reflects the amount of total premium on which the Coverage Protection premium expense charge is calculated.
Sub-amount 1	Reflects the Coverage Protection premium expense charge percentage rate on sub-amount 1.
Sub-amount 2	Reflects the Coverage Protection premium expense charge percentage rate on sub-amount 2.
Sub-amount 3	Reflects the Coverage Protection premium expense charge percentage rate on sub-amount 3.
On Total premium received in excess of :	Reflects the amount of total premium above which the Coverage Protection premium expense charge is calculated.
Sub-amount 1	Reflects the Coverage Protection premium expense charge percentage rate on sub-amount 1.

Sub-amount 2	Reflects the Coverage Protection premium expense charge percentage rate on sub-amount 2.
Sub-amount 3	Reflects the Coverage Protection premium expense charge percentage rate on sub-amount 3.
Interest Rate on non-allocated loan balance	Credited rate to Coverage Protection Amount for unloaned amount.
Sub-amount 1	Reflects the rate of interest credited to the unloaned balance for the time period for which interest is credited and the rate of interest credited to the unloaned balance for the time period beyond the stated time period and their monthly equivalents for sub-amount 1.
Sub-amount 2	Reflects the rate of interest credited to the unloaned balance for the time period for which interest is credited and the rate of interest credited to the unloaned balance for the time period beyond the stated time period and their monthly equivalents for sub-amount 2.
Sub-amount 3	Reflects the rate of interest credited to the unloaned balance for the time period for which interest is credited and the rate of interest credited to the unloaned balance for the time period beyond the stated time period and their monthly equivalents for sub-amount 3.
Interest Rates on allocated loan balance	Credited rate to Coverage Protection Amount for loaned amount.
Sub-amount 1	Reflects the rate of interest credited to the loaned balance for the time period for which interest is credited and the rate of interest credited to the loaned balance for the time period beyond the stated time period and their monthly equivalents for sub-amount 1.
Sub-amount 2	Reflects the rate of interest credited to the loaned balance for the time period for which interest is credited and the rate of interest credited to the loaned balance for the time period beyond the stated time period and their monthly equivalents for sub-amount 2.
Sub-amount 3	Reflects the rate of interest credited to the loaned balance for the time period for which interest is credited and the rate of interest credited to the loaned balance for the time period beyond the stated time period and their monthly equivalents for sub-amount 3.
Table of Coverage Protection Monthly Rates applied to the Coverage Protection Charge Basis	Reflects the monthly rates applicable to each table for the insured's attained age, sex and premium class.
GL1000-0609-WS; GA1000-0609-WS	
Insured	Reflects actual name of Insured
Issue age and Sex	Reflects the insurance age of the insured based on the insured's closest age and the sex of the insured at birth.
Premium Class	Reflects the premium classification assigned to this Insured.
Planned Frequency of Premium Payment	Reflects the planned frequency of premium payment
Planned Additional Lump Sums	Reflects the planned additional lump sums
Demonstration of the Operation of the Coverage Protection Benefit	Reflects the total premiums planned to be paid each policy year and the death benefit based on the specific Assumptions described on page 5. The YRT header and footnotes will appear when a person has requested a guarantee to an age lower than age 121.