

SERFF Tracking Number: JEPL-126802737 State: Arkansas  
 Filing Company: The Lincoln National Life Insurance Company State Tracking Number: 46784  
 Company Tracking Number: AMD-5859  
 TOI: L09I Individual Life - Flexible Premium Sub-TOI: L09I.002 Joint (Last Survivor)  
 Adjustable Life  
 Product Name: Amendment to CPG Rider AMD-5859  
 Project Name/Number: /AMD-5859

## Filing at a Glance

Company: The Lincoln National Life Insurance Company

Product Name: Amendment to CPG Rider SERFF Tr Num: JEPL-126802737 State: Arkansas  
 AMD-5859

TOI: L09I Individual Life - Flexible Premium SERFF Status: Closed-Approved- State Tr Num: 46784  
 Adjustable Life Closed

Sub-TOI: L09I.002 Joint (Last Survivor) Co Tr Num: AMD-5859 State Status: Approved-Closed  
 Filing Type: Form Reviewer(s): Linda Bird

Authors: Ray Fortier, James Kane, Jeanine Taylor  
 Disposition Date: 09/17/2010

Date Submitted: 09/14/2010 Disposition Status: Approved-Closed

Implementation Date Requested: On Approval  
 State Filing Description:

Implementation Date:

## General Information

Project Name:  
 Project Number: AMD-5859  
 Requested Filing Mode: Review & Approval  
 Explanation for Combination/Other:  
 Submission Type: New Submission  
 Overall Rate Impact:  
 Filing Status Changed: 09/17/2010

Status of Filing in Domicile: Pending  
 Date Approved in Domicile:  
 Domicile Status Comments:  
 Market Type: Individual  
 Group Market Size:  
 Group Market Type:  
 Explanation for Other Group Market Type:  
 State Status Changed: 09/17/2010  
 Created By: James Kane  
 Corresponding Filing Tracking Number:

Deemer Date:  
 Submitted By: James Kane  
 Filing Description:

Please refer to the Submission Letter attached to the Supporting Documentation tab above.

## Company and Contact

### Filing Contact Information

James Kane, Compliance Analyst james.kane@lfg.com

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One Granite Place 800-258-3648 [Phone] 5426 [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: \$50.00  
 Retaliatory? No  
 Fee Explanation: 1 form filed x \$50.00 per form = \$50.00 TOTAL.  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
The Lincoln National Life Insurance Company	\$50.00	09/14/2010	39483975

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	09/17/2010	09/17/2010

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## Disposition

Disposition Date: 09/17/2010

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

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<b>Schedule</b>	<b>Schedule Item</b>	<b>Schedule Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Flesch Certification		Yes
<b>Supporting Document</b>	Application		No
<b>Supporting Document</b>	Health - Actuarial Justification		No
<b>Supporting Document</b>	Outline of Coverage		No
<b>Supporting Document</b>	Submission Letter		Yes
<b>Form</b>	Amendment to Coverage Protection		Yes
	Guarantee Rider		

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## Form Schedule

Lead Form Number: AMD-5859

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	AMD-5859	Policy/Cont ract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	Initial		50.000	AMD-5859 Joint LG SUL.pdf

# The Lincoln National Life Insurance Company

Service Office: [100 North Greene Street, P.O. Box 21008, Greensboro, NC 27420-1008]

## Amendment to Coverage Protection Guarantee Rider

This Amendment is part of the Coverage Protection Guarantee Rider to which it is attached and takes effect on the Policy Date. This Amendment is subject to the terms and conditions of the policy and Coverage Protection Guarantee Rider unless otherwise stated herein.

The following **Impact on Accelerated Benefits Rider, If Attached to the Policy Provision** has been added:

**Impact on Accelerated Benefits Rider, If Attached to the Policy** As noted in the Right to Exercise Rider Benefit Provision of the Accelerated Benefits Rider, We will consider the Cash Surrender Value of the policy in determining if the accelerated benefit continuation period is satisfied. When a Coverage Protection Guarantee Rider is attached to the policy and the CPG Test is satisfied, the Right to Exercise Rider Benefit Provision of the Accelerated Benefits Rider is expanded to include the Coverage Protection Value as a reference value in determining if the accelerated benefit continuation period is satisfied.

The **Policy Changes and the Coverage Protection Guarantee Provision** has been revised to read as follows:

**Policy Changes and the Coverage Protection Guarantee** Rate Class changes that result in a more favorable mortality rating for either Insured will require a change to the Coverage Protection Guarantee Cost of Insurance Rates.

An increase in Specified Amount will be subject to additional Coverage Protection Guarantee Cost of Insurance Rates, Coverage Protection Guarantee Administrative Charges and Coverage Protection Guarantee Monthly Processing Fee applicable to the increase. A requested decrease in Specified Amount for the policy will require a change to the Coverage Protection Guarantee Administrative Charges. You will be notified should any of these changes occur. Death benefit option changes will not require a change to the Coverage Protection Guarantee Cost of Insurance Rates, Coverage Protection Guarantee Administrative Charges or the Coverage Protection Guarantee Monthly Processing Fee noted on the policy specifications pages.

There will be no impact on the Coverage Protection Guarantee Net Premium Factor noted on the policy specifications page due to any of the changes detailed above.

[  ]

[Secretary]

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## Supporting Document Schedules

**Item Status:** **Status**  
**Date:**

**Satisfied - Item:** Flesch Certification

**Comments:**

Please refer to the Flesch Certification attached below.

**Attachment:**

AR\_Readability.pdf

**Item Status:** **Status**  
**Date:**

**Satisfied - Item:** Submission Letter

**Comments:**

Please refer to the Submission Letter attached below.

**Attachment:**

AR\_Submission Letter.pdf

Arkansas

READABILITY CERTIFICATION

*The Lincoln National Life Insurance Company*

Re: AMD-5859 – Amendment to Coverage Protection Guarantee Rider

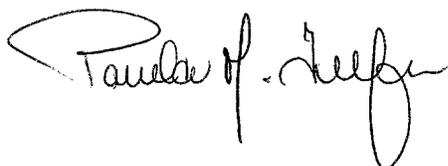
We hereby certify that the attached Form(s) is (are) in compliance with the Rules and Regulation requirements regarding Life, Annuities, and Accident and Sickness Insurance Language Simplification Standards and has (have) achieved a Flesch Reading Ease score of:

Form Number:

Flesch:

AMD-5859

50.00



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Pamela M. Telfer, Assistant Vice President  
Product Compliance

Date: September 9, 2010



Lincoln Financial Group  
One Granite Place  
P.O. Box 515  
Concord, NH 03302  
phone 603 226-5000

September 14, 2010

Hon. Julie Benafield Bowman  
Commissioner of Insurance  
Compliance-Life & Health  
Attn: Joe Musgrove  
1200 West Third Street  
Little Rock, AR 72201-1904

Re. Individual Life Insurance Amendment  
AMD-5859 Amendment to Coverage  
Protection Guarantee Rider

Issued with Previously Approved  
Policy SUL 5030, Coverage Protection Guarantee Rider J-5890,  
and Specification Page F5130-A which were previously approved  
on 04/15/2009 under State Tracking No. 42029.

The Lincoln National Life Insurance Company  
Group & NAIC #: 020-65676

Dear Mr. Musgrove:

We are submitting the required number of copies of the above-referenced form for your review and approval. This is a new form and will not replace any previously approved forms.

This Amendment adds the **Impact on Accelerated Benefits Rider, If Attached to the Policy Provision** and revises the **Policy Changes and the Coverage Protection Guarantee Provision** of the previously approved Coverage Protection Guarantee Rider noted above. Once approved, this Amendment will be included with new issues of the Coverage Protection Guarantee Rider.

This Amendment will offer an improved Coverage Protection Guarantee due to Rate Class changes and Specified Amount decreases as elected by the Owner.

We have bracketed the service office address and officer signature/title 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 require a new filing of these forms. We confirm that the brackets will not actually appear on the form at issue.

This form appears in final printed format as issued from a laser printer. We do, however, use different computer publishing systems. It is therefore possible that the actual issued form may have a different font style than the submitted forms. As a result, page breaks may occur at different lines, line wording may not match up exactly, and the format may change.

The Amendment achieves a Flesch score of 50.00. This filing is being submitted concurrently to our Home State of Indiana and is pending approval. The appropriate certification(s), transmittal and filing fee are included, as applicable. To the best of our knowledge and belief, the filing complies with all 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.

[www.lfg.com](http://www.lfg.com)

Lincoln Financial Group is the marketing name for Lincoln National Corporation and its affiliates

Page 2 of 2  
September 14, 2010

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 toll-free at 1-800-258-3648, ext. 5426, or via the fax number or email address shown below.

Sincerely,

A handwritten signature in cursive script that reads "James P. Kane". The signature is written in black ink and is positioned above the contact information.

E-mail: [James.Kane@lfg.com](mailto:James.Kane@lfg.com)  
Fax: (603) 226-5128