

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

The Guardian Life Insurance Company of America Political Action Committee - Federal (Guardian Life P

ADDRESS (number and street)

7 HANOVER SQUARE

Check if different
than previously
reported. (ACC)

NEW YORK

NY

10004-2616

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00173393

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☒ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y
01 01 2020

through

M M / D D / Y Y Y Y Y Y
01 31 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Skinner, Walter, R, ,

Type or Print Name of Treasurer

Signature of Treasurer

Skinner, Walter, R, ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
02 14 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

The Guardian Life Insurance Company of America Political Action Committee - Federal (Guardian Life P

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
01 / 01 / 2020 To: M M / D D / Y Y Y Y Y Y
01 / 31 / 2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2020		102007.07
(b) Cash on Hand at Beginning of Reporting Period.....	102007.07	
(c) Total Receipts (from Line 19)	16002.12	16002.12
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	118009.19	118009.19
7. Total Disbursements (from Line 31).....	- 951.27	- 951.27
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	118960.46	118960.46
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

The Guardian Life Insurance Company of America Political Action Committee - Federal (Guardian Life P

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
01		01		2020

To:

M M	/	D D	/	Y Y Y Y
01		31		2020

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

3424.96

3424.96

(ii) Unitemized

12577.16

12577.16

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

16002.12

16002.12

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

16002.12

16002.12

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶

16002.12

16002.12

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

16002.12

16002.12

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	48.73	48.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	48.73	48.73
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	- 1000.00	- 1000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	- 951.27	- 951.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	- 951.27	- 951.27

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	16002.12	16002.12
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16002.12	16002.12
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	48.73	48.73
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	48.73	48.73

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 10

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Guardian Life Insurance Company of America Political Action Committee - Federal (Guardian Life P

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Del Vecchio, Dean, , ,

Mailing Address 101 Crawfords Corner Rd
Bldg 4-511

City
Holmdel

State
NJ

Zip Code
07733-1976

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

The Guardian Life Insurance Company of

Occupation (for Individual)

Executive Vice President, Chief of Ope

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 30 / 2020

Transaction ID : A12C1DF4CF3FC4C6CAAe

Amount of Each Receipt this Period

416.66

☐ Memo Item

Payroll Deduction: \$208.33/Bi-Monthly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dinallo, Eric, , ,

Mailing Address 7 Hanover Sq

City

New York

State

NY

Zip Code

10004-2616

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

The Guardian Life Insurance Company of

Occupation (for Individual)

Executive Vice President, Chief Legal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 30 / 2020

Transaction ID : AA6D9C1389C974C1086E

Amount of Each Receipt this Period

416.66

☐ Memo Item

Payroll Deduction: \$208.33/Bi-Monthly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dupont, Douglas, , ,

Mailing Address 7 Hanover Sq

City

New York

State

NY

Zip Code

10004-2616

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

The Guardian Life Insurance Company of

Occupation (for Individual)

Senior Managing Director, Investments;

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 30 / 2020

Transaction ID : A200F0E29E4E24BBC99D

Amount of Each Receipt this Period

300.00

☐ Memo Item

Payroll Deduction: \$150.00/Bi-Monthly

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1133.32

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 10

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Guardian Life Insurance Company of America Political Action Committee - Federal (Guardian Life P

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ferik, Michael, , ,

Mailing Address 7 Hanover Sq

City
New YorkState
NYZip Code
10004-2616FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

The Guardian Life Insurance Company of

Occupation (for Individual)

Executive Vice President, Individual M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 30 / 2020

Transaction ID : A8EF39BEB6A004321B74

Amount of Each Receipt this Period

416.66

☐ Memo Item

Payroll Deduction: \$208.33/Bi-Monthly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Haines, Laura, , ,

Mailing Address 1455 Pennsylvania Ave NW
Ste 680City
WashingtonState
DCZip Code
20004-1029FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

The Guardian Life Insurance Company of

Occupation (for Individual)

Senior Vice President, Government Aff.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 30 / 2020

Transaction ID : A7A05DA53099F4DA584D

Amount of Each Receipt this Period

208.34

☐ Memo Item

Payroll Deduction: \$104.17/Bi-Monthly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McMahon, Andrew, , ,

Mailing Address 7 Hanover Sq

City
New YorkState
NYZip Code
10004-2616FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

The Guardian Life Insurance Company of

Occupation (for Individual)

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 30 / 2020

Transaction ID : A04AE473457BE44F48F0

Amount of Each Receipt this Period

416.66

☐ Memo Item

Payroll Deduction: \$208.33/Bi-Monthly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1041.66

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 10

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Guardian Life Insurance Company of America Political Action Committee - Federal (Guardian Life P

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mulligan, Deanna, , ,

Mailing Address 100 Stamford Pl
Fl 4

City
Stamford

State
CT

Zip Code
06902-6740

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

The Guardian Life Insurance Company of

Occupation (for Individual)

President, Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

MM / DD / YYYY
01 / 30 / 2020

Transaction ID : AD24ACE3AB6954F5C931

Amount of Each Receipt this Period

416.66

☐ Memo Item

Payroll Deduction: \$208.33/Bi-Monthly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Scanlon, Brian, , ,

Mailing Address 10 Hudson Yards

City

New York

State

NY

Zip Code

10001-2157

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

The Guardian Life Insurance Company of

Occupation (for Individual)

Executive Vice President, Commercial

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

MM / DD / YYYY
01 / 30 / 2020

Transaction ID : A7ACDCFE590E546049B3

Amount of Each Receipt this Period

416.66

☐ Memo Item

Payroll Deduction: \$208.33/Bi-Monthly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sorell, Thomas, , ,

Mailing Address 7 Hanover Sq

City

New York

State

NY

Zip Code

10004-2616

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

The Guardian Life Insurance Company of

Occupation (for Individual)

Executive Vice President and Chief Inv

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

416.66

Date of Receipt

MM / DD / YYYY
01 / 30 / 2020

Transaction ID : A7FC8AF523BEF48F3946

Amount of Each Receipt this Period

416.66

☐ Memo Item

Payroll Deduction: \$208.33/Bi-Monthly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1249.98

3424.96

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 10

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Guardian Life Insurance Company of America Political Action Committee - Federal (Guardian Life P

Full Name (Last, First, Middle Initial)

A. JPMorgan Chase Bank N.A. (Federal PAC)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		1	5		2	0	2	0		

Mailing Address 221 Park Ave S

City
New YorkState
NYZip Code
10003-1633Purpose of Disbursement
Bank Service Charge

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : B4B40B7CFF

Amount of Each Disbursement this Period

48.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

48.73

TOTAL This Period (last page this line number only)..... ►

48.73

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 10

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Guardian Life Insurance Company of America Political Action Committee - Federal (Guardian Life P

Full Name (Last, First, Middle Initial)

A. Friends Of Pat Toomey

Mailing Address 228 S. Washington St., Suite 115

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
voided check

Candidate Name

Toomey, Pat, J., ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		0	2		2	0	2	0		

FEC Identification Number

C C00461046

Transaction ID : B7EC181169I

Amount of Each Disbursement this Period

- 1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

- 1000.00

- 1000.00