

**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)

10 Hudson Yards

Check if different  
than previously  
reported. (ACC)

New York

NY

10001

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

D D / D D / Y Y Y Y Y Y

Y Y Y Y Y Y / Y Y Y Y Y Y

in the  
State of

C

(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

D D / D D / Y Y Y Y Y Y

Y Y Y Y Y Y / Y Y Y Y Y Y

in the  
State of

C

5. Covering Period

M M / D D / Y Y Y Y Y Y  
01 01 2023

through

M M / D D / Y Y Y Y Y Y  
01 31 2023

D D / D D / Y Y Y Y Y Y

Y Y Y Y Y Y / Y Y Y Y Y Y

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 16 2023

D D / D D / Y Y Y Y Y Y

Y Y Y Y Y Y / Y Y Y Y Y Y

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
01		01		2023

 To: 

M M	/	D D	/	Y Y Y Y Y
01		31		2023

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2023</div></div>		<div><div></div><div>79780.34</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>79780.34</div></div>	
(c) Total Receipts (from Line 19) .....	<div><div></div><div>13681.83</div></div>	<div><div></div><div>13681.83</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>93462.17</div></div>	<div><div></div><div>93462.17</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>1000.00</div></div>	<div><div></div><div>1000.00</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div><div></div><div>92462.17</div></div>	<div><div></div><div>92462.17</div></div>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	

☒ 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 20463Toll 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	/	2023

To:

M M	/	D D	/	Y Y Y Y
01	/	31	/	2023

**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).....

1394.19

1394.19

(ii) Unitemized .....

12287.64

12287.64

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

13681.83

13681.83

(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) .....

13681.83

13681.83

## 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)) .....

13681.83

13681.83

## 20. Total Federal Receipts

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

13681.83

13681.83

# **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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
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)) ..	1000.00	1000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1000.00	1000.00

**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) .....	13681.83	13681.83
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13681.83	13681.83
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	0.00	0.00

# **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 6 OF 8

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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)

Chief Executive, Information and Opera

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

01 / 27 / 2023

Transaction ID : A93CBDDDEB10C450F8A3

Amount of Each Receipt this Period

192.30

☐ Memo Item

Payroll Deduction: \$192.30/Bi-Monthly

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

**B. Ferik, Michael, , ,**

Mailing Address 100 Stamford Pl  
FI 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)

Chief Executive, Individual Markets

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

01 / 27 / 2023

Transaction ID : A56E1CBB52F5C4255A41

Amount of Each Receipt this Period

192.30

☐ Memo Item

Payroll Deduction: \$192.30/Bi-Monthly

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

**C. LaTorre, Jean, , ,**

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)

Chief Executive, Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.63

Date of Receipt

01 / 27 / 2023

Transaction ID : AEB3D0B4976CA4300A0C

Amount of Each Receipt this Period

208.33

☐ Memo Item

Payroll Deduction: \$208.33/Bi-Monthly

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

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

592.93

# **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 7 OF 8

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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. LaTorre, Jean, , ,**

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)

Chief Executive, Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.63

Date of Receipt

01 / 27 / 2023

Transaction ID : AA5F55F464C004BCE9B3

Amount of Each Receipt this Period

192.30

☐ Memo Item

Payroll Deduction: \$192.30/Bi-Monthly

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

**B. McMahon, Andrew, , ,**

Mailing Address 100 Stamford Pl  
FI 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)

Chief Executive Officer and President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

01 / 27 / 2023

Transaction ID : A4591A2F9C107423BA11

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. Molloy, Kevin, , ,**

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)

Chief Executive, Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.60

Date of Receipt

01 / 27 / 2023

Transaction ID : AE165E2D41B654B9FA63

Amount of Each Receipt this Period

192.30

☐ Memo Item

Payroll Deduction: \$192.30/Bi-Monthly

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

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

801.26

1394.19

**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 8 OF 8

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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 JIM CLYBURN**

Mailing Address POST OFFICE BOX 12567

City  
COLUMBIAState  
SCZip Code  
29211Purpose of Disbursement  
Contribution to Committee

Candidate Name

Clyburn, James, E., ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

State: SC

District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	8			2	0	2	3		

FEC Identification Number

C C00255562

Transaction ID : BD5F255612I

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF JIM CLYBURN**

Mailing Address POST OFFICE BOX 12567

City  
COLUMBIAState  
SCZip Code  
29211Purpose of Disbursement  
VOID - 9/16/22 Contribution

Candidate Name

Clyburn, James, E., ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State: SC

District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	8			2	0	2	3		

FEC Identification Number

C C00255562

Transaction ID : B3D881580B3

Amount of Each Disbursement this Period

- 2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GARBARINO FOR CONGRESS**

Mailing Address PO BOX 101

City  
BAYPORTState  
NYZip Code  
11705Purpose of Disbursement  
Contribution to Committee

Candidate Name

Garbarino, Andrew, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	8			2	0	2	3		

FEC Identification Number

C C00729954

Transaction ID : B4F4A74424

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

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

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

1000.00

1000.00