



ANNUAL STATEMENT

For the Year Ended December 31, 2011

of the Condition and Affairs of the

North American Swiss Alliance

NAIC Group Code.....0000, 0000
(Current Period) (Prior Period)

NAIC Company Code..... 56375

Employer's ID Number..... 34-0719168

Organized under the Laws of OH

State of Domicile or Port of Entry OH

Country of Domicile US

Incorporated/Organized..... September 6, 1889

Commenced Business..... September 6, 1889

Statutory Home Office

26777 Lorain Road, Suite 321..... North Olmsted OH 44070
(Street and Number) (City or Town, State and Zip Code)

Main Administrative Office

26777 Lorain Road, Suite 321..... North Olmsted OH 44070
(Street and Number) (City or Town, State and Zip Code)

(Area Code) (Telephone Number)

Mail Address

26777 Lorain Road, Suite 321..... North Olmsted OH 44070
(Street and Number or P. O. Box) (City or Town, State and Zip Code)

Primary Location of Books and Records

26777 Lorain Road, Suite 321..... North Olmsted OH 44070
(Street and Number) (City or Town, State and Zip Code)

(Area Code) (Telephone Number)

Internet Web Site Address

N/A

Statutory Statement Contact

Lynn Kosin
(Name)
naswiss@sbcglobal.net
(E-Mail Address)

440-777-7114
(Area Code) (Telephone Number) (Extension)

(Fax Number)

OFFICERS

Name	Title	Name	Title
1. Alois W. Amstutz	President	2. William G. Preslock	Secretary
3. William G. Preslock	Treasurer	4.	

OTHER

Richard Hubler

Vice President

DIRECTORS OR TRUSTEES

Alois Wendelin Amstutz	Richard Alan Rowland	William George Preslock	Richard Charles Hubler
Donald Phillips Robison	Richard Herman Hardt	Marilyn Almo Kozma	Carl Hans Kunzler
Suzanne Lynn Sarasin			

State of..... Ohio

County of..... Cuyahoga

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature)

Alois W. Amstutz

1. (Printed Name)

President

(Title)

(Signature)

William G. Preslock

2. (Printed Name)

Secretary

(Title)

(Signature)

William G. Preslock

3. (Printed Name)

Treasurer

(Title)

Subscribed and sworn to before me

This _____ day of _____ 2012

a. Is this an original filing? Yes [X] No []

b. If no

1. State the amendment number _____

2. Date filed _____

3. Number of pages attached _____



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR

NAIC Group Code.....0000 NAIC Society Code.....56375

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Life and Annuities
1. Life insurance.....		274
2. Annuity considerations.....		
3. Deposit-type contract funds.....		
4. Other considerations.....		
5. Total (Lines 1 to 4).....		274
DIRECT REFUNDS TO MEMBERS		
Life Insurance:		
6.1 Paid in cash or left on deposit.....		
6.2 Applied to pay renewal premiums.....		
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		42
6.4 Other.....		
6.5 Total (Sum of Lines 6.1 to 6.4).....		42
Annuities:		
7.1 Paid in cash or left on deposit.....		
7.2 Applied to provide paid-up annuities.....		
7.3 Other.....		
7.4 Total (Sum of Lines 7.1 to 7.3).....		0
8. Total (Line 6.5 plus Line 7.4).....		42
DIRECT CLAIMS AND BENEFITS PAID		
9. Death benefits.....		497
10. Matured endowments.....		
11. Annuity benefits.....		
12. Surrender values. and withdrawals for life contracts.....		1,757
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0
14. All other benefits, except accident & health.....		
15. Total.....		2,253

DETAILS OF WRITE-INS	
1301.	
1302.	
1303.	
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0
1399. Totals (Items 1301 thru 1303 plus 1398) (Line 13 above).....	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1 Number of Certificates	2 Amount
16. Unpaid December 31, prior year.....			
17. Incurred during current year.....	1		497
Settled during current year:			
18.1 By payment in full.....	1		497
18.2 By payment on compromised claims.....			
18.3 Total paid.....	1		497
18.4 Reduction by compromise.....			
18.5 Amount rejected.....			
18.6 Total settlements.....	1		497
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0		0
POLICY EXHIBIT			
20. In force December 31, prior year.....	161		219,758
21. Issued during year.....			
22. Other changes to in force (net).....	(2)		(3,497)
23. In force December 31, current year.....	159		216,261

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Refunds Paid or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Collectively Renewable Certificates.....	NONE				
Other Individual Certificates:					
25.1 Non-cancelable.....					
25.2 Guaranteed renewable.....					
25.3 Non-renewable for stated reasons only.....					
25.4 Other accident only.....					
25.5 Medicare Title XVIII exempt from state taxes or fees.....					
25.6 All Other.....					
25.7 Totals (sum of Lines 25.1 to 25.6).....		0	0	0	0
26. Totals (Line 24 + 25.7).....		0	0	0	0



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF COLORADO DURING THE YEAR

NAIC Group Code.....0000 NAIC Society Code.....56375

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Life and Annuities
1. Life insurance.....		261
2. Annuity considerations.....		
3. Deposit-type contract funds.....		
4. Other considerations.....		
5. Total (Lines 1 to 4).....		261
DIRECT REFUNDS TO MEMBERS		
Life Insurance:		
6.1 Paid in cash or left on deposit.....		
6.2 Applied to pay renewal premiums.....		
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		85
6.4 Other.....		
6.5 Total (Sum of Lines 6.1 to 6.4).....		85
Annuities:		
7.1 Paid in cash or left on deposit.....		
7.2 Applied to provide paid-up annuities.....		
7.3 Other.....		
7.4 Total (Sum of Lines 7.1 to 7.3).....		0
8. Total (Line 6.5 plus Line 7.4).....		85
DIRECT CLAIMS AND BENEFITS PAID		
9. Death benefits.....		
10. Matured endowments.....		
11. Annuity benefits.....		
12. Surrender values. and withdrawals for life contracts.....		
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0
14. All other benefits, except accident & health.....		
15. Total.....		0

DETAILS OF WRITE-INS	
1301. ....	.....
1302. ....	.....
1303. ....	.....
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0
1399. Totals (Items 1301 thru 1303 plus 1398) (Line 13 above).....	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1 Number of Certificates	2 Amount
16. Unpaid December 31, prior year.....			
17. Incurred during current year.....			
Settled during current year:			
18.1 By payment in full.....			
18.2 By payment on compromised claims.....			
18.3 Total paid.....		0	0
18.4 Reduction by compromise.....			
18.5 Amount rejected.....			
18.6 Total settlements.....		0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....		0	0
POLICY EXHIBIT			
20. In force December 31, prior year.....		51	67,500
21. Issued during year.....		3	3,000
22. Other changes to in force (net).....			
23. In force December 31, current year.....		54	70,500

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Refunds Paid or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Collectively Renewable Certificates.....	NONE				
Other Individual Certificates:					
25.1 Non-cancelable.....					
25.2 Guaranteed renewable.....					
25.3 Non-renewable for stated reasons only.....					
25.4 Other accident only.....					
25.5 Medicare Title XVIII exempt from state taxes or fees.....					
25.6 All Other.....					
25.7 Totals (sum of Lines 25.1 to 25.6).....	0	0	0	0	0
26. Totals (Line 24 + 25.7).....	0	0	0	0	0



LIFE INSURANCE

DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR

NAIC Group Code.....0000

NAIC Society Code.....56375

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Life and Annuities
1. Life insurance.....		15,514
2. Annuity considerations.....		
3. Deposit-type contract funds.....		
4. Other considerations.....		
5. Total (Lines 1 to 4).....		15,514
DIRECT REFUNDS TO MEMBERS		
Life Insurance:		
6.1 Paid in cash or left on deposit.....		73
6.2 Applied to pay renewal premiums.....		
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		8,131
6.4 Other.....		
6.5 Total (Sum of Lines 6.1 to 6.4).....		8,204
Annuities:		
7.1 Paid in cash or left on deposit.....		
7.2 Applied to provide paid-up annuities.....		
7.3 Other.....		
7.4 Total (Sum of Lines 7.1 to 7.3).....		0
8. Total (Line 6.5 plus Line 7.4).....		8,204
DIRECT CLAIMS AND BENEFITS PAID		
9. Death benefits.....		43,102
10. Matured endowments.....		5,987
11. Annuity benefits.....		
12. Surrender values. and withdrawals for life contracts.....		19,203
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0
14. All other benefits, except accident & health.....		
15. Total.....		68,292

DETAILS OF WRITE-INS	
1301.	
1302.	
1303.	
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0
1399. Totals (Items 1301 thru 1303 plus 1398) (Line 13 above).....	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 Number of Certificates	2 Amount
16. Unpaid December 31, prior year.....	4	4,647
17. Incurred during current year.....	36	49,089
Settled during current year:		
18.1 By payment in full.....	36	49,089
18.2 By payment on compromised claims.....		
18.3 Total paid.....	36	49,089
18.4 Reduction by compromise.....		
18.5 Amount rejected.....		
18.6 Total settlements.....	36	49,089
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	4	4,647
POLICY EXHIBIT		
20. In force December 31, prior year.....	2,258	4,501,950
21. Issued during year.....	31	68,000
22. Other changes to in force (net).....	8	137,060
23. In force December 31, current year.....	2,297	4,707,010

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Refunds Paid or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Collectively Renewable Certificates.....	NONE				
Other Individual Certificates:					
25.1 Non-cancelable.....					
25.2 Guaranteed renewable.....					
25.3 Non-renewable for stated reasons only.....					
25.4 Other accident only.....					
25.5 Medicare Title XVIII exempt from state taxes or fees.....					
25.6 All Other.....					
25.7 Totals (sum of Lines 25.1 to 25.6).....	0	0	0	0	0
26. Totals (Line 24 + 25.7).....	0	0	0	0	0



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR

NAIC Group Code.....0000

NAIC Society Code.....56375

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Life and Annuities
1. Life insurance.....		80
2. Annuity considerations.....		
3. Deposit-type contract funds.....		
4. Other considerations.....		
5. Total (Lines 1 to 4).....		80
DIRECT REFUNDS TO MEMBERS		
Life Insurance:		
6.1 Paid in cash or left on deposit.....		1
6.2 Applied to pay renewal premiums.....		
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		50
6.4 Other.....		
6.5 Total (Sum of Lines 6.1 to 6.4).....		51
Annuities:		
7.1 Paid in cash or left on deposit.....		
7.2 Applied to provide paid-up annuities.....		
7.3 Other.....		
7.4 Total (Sum of Lines 7.1 to 7.3).....		0
8. Total (Line 6.5 plus Line 7.4).....		51
DIRECT CLAIMS AND BENEFITS PAID		
9. Death benefits.....		2,259
10. Matured endowments.....		
11. Annuity benefits.....		
12. Surrender values. and withdrawals for life contracts.....		7,853
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0
14. All other benefits, except accident & health.....		
15. Total.....		10,112

DETAILS OF WRITE-INS	
1301.	
1302.	
1303.	
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0
1399. Totals (Items 1301 thru 1303 plus 1398) (Line 13 above).....	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1 Number of Certificates	2 Amount
16. Unpaid December 31, prior year.....		1	739
17. Incurred during current year.....		2	2,259
Settled during current year:			
18.1 By payment in full.....		2	2,259
18.2 By payment on compromised claims.....			
18.3 Total paid.....		2	2,259
18.4 Reduction by compromise.....			
18.5 Amount rejected.....			
18.6 Total settlements.....		2	2,259
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....		1	739
POLICY EXHIBIT			
20. In force December 31, prior year.....		52	85,712
21. Issued during year.....			
22. Other changes to in force (net).....		(7)	(3,259)
23. In force December 31, current year.....		45	82,453

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Refunds Paid or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Collectively Renewable Certificates.....	NONE				
Other Individual Certificates:					
25.1 Non-cancelable.....					
25.2 Guaranteed renewable.....					
25.3 Non-renewable for stated reasons only.....					
25.4 Other accident only.....					
25.5 Medicare Title XVIII exempt from state taxes or fees.....					
25.6 All Other.....					
25.7 Totals (sum of Lines 25.1 to 25.6).....		0	0	0	0
26. Totals (Line 24 + 25.7).....		0	0	0	0



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR

NAIC Group Code.....0000

NAIC Society Code.....56375

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1
		Life and Annuities
1.	Life insurance.....	13
2.	Annuity considerations.....	
3.	Deposit-type contract funds.....	
4.	Other considerations.....	
5.	Total (Lines 1 to 4).....	13
DIRECT REFUNDS TO MEMBERS		
Life Insurance:		
6.1	Paid in cash or left on deposit.....	
6.2	Applied to pay renewal premiums.....	
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	8
6.4	Other.....	
6.5	Total (Sum of Lines 6.1 to 6.4).....	8
Annuities:		
7.1	Paid in cash or left on deposit.....	
7.2	Applied to provide paid-up annuities.....	
7.3	Other.....	
7.4	Total (Sum of Lines 7.1 to 7.3).....	0
8.	Total (Line 6.5 plus Line 7.4).....	8
DIRECT CLAIMS AND BENEFITS PAID		
9.	Death benefits.....	617
10.	Matured endowments.....	
11.	Annuity benefits.....	
12.	Surrender values. and withdrawals for life contracts.....	
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0
14.	All other benefits, except accident & health.....	
15.	Total.....	617

DETAILS OF WRITE-INS	
1301.	
1302.	
1303.	
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0
1399. Totals (Items 1301 thru 1303 plus 1398) (Line 13 above).....	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1	2
		Number of Certificates	Amount
16.	Unpaid December 31, prior year.....		
17.	Incurred during current year.....	1	617
Settled during current year:			
18.1	By payment in full.....	1	617
18.2	By payment on compromised claims.....		
18.3	Total paid.....	1	617
18.4	Reduction by compromise.....		
18.5	Amount rejected.....		
18.6	Total settlements.....	1	617
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0
POLICY EXHIBIT			
20.	In force December 31, prior year.....	29	54,500
21.	Issued during year.....		
22.	Other changes to in force (net).....	(1)	(617)
23.	In force December 31, current year.....	28	53,883

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Refunds Paid or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Collectively Renewable Certificates.....	NONE				
Other Individual Certificates:					
25.1 Non-cancelable.....					
25.2 Guaranteed renewable.....					
25.3 Non-renewable for stated reasons only.....					
25.4 Other accident only.....					
25.5 Medicare Title XVIII exempt from state taxes or fees.....					
25.6 All Other.....					
25.7 Totals (sum of Lines 25.1 to 25.6).....	0	0	0	0	0
26. Totals (Line 24 + 25.7).....	0	0	0	0	0



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR

NAIC Group Code.....0000 NAIC Society Code.....56375

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1
		Life and Annuities
1.	Life insurance.....	
2.	Annuity considerations.....	
3.	Deposit-type contract funds.....	
4.	Other considerations.....	
5.	Total (Lines 1 to 4).....	0
DIRECT REFUNDS TO MEMBERS		
Life Insurance:		
6.1	Paid in cash or left on deposit.....	
6.2	Applied to pay renewal premiums.....	
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	
6.4	Other.....	
6.5	Total (Sum of Lines 6.1 to 6.4).....	0
Annuities:		
7.1	Paid in cash or left on deposit.....	
7.2	Applied to provide paid-up annuities.....	
7.3	Other.....	
7.4	Total (Sum of Lines 7.1 to 7.3).....	0
8.	Total (Line 6.5 plus Line 7.4).....	0
DIRECT CLAIMS AND BENEFITS PAID		
9.	Death benefits.....	
10.	Matured endowments.....	
11.	Annuity benefits.....	
12.	Surrender values. and withdrawals for life contracts.....	
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0
14.	All other benefits, except accident & health.....	
15.	Total.....	0

DETAILS OF WRITE-INS

1301.	.....	
1302.	.....	
1303.	.....	
1398.	Summary of remaining write-ins for Line 13 from overflow page.....	0
1399.	Totals (Items 1301 thru 1303 plus 1398) (Line 13 above).....	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1	2
		Number of Certificates	Amount
16.	Unpaid December 31, prior year.....	1	1,654
17.	Incurred during current year.....		
Settled during current year:			
18.1	By payment in full.....		
18.2	By payment on compromised claims.....		
18.3	Total paid.....	0	0
18.4	Reduction by compromise.....		
18.5	Amount rejected.....		
18.6	Total settlements.....	0	0
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	1,654
POLICY EXHIBIT			
20.	In force December 31, prior year.....	9	24,415
21.	Issued during year.....		
22.	Other changes to in force (net).....		
23.	In force December 31, current year.....	9	24,415

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Refunds Paid or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Collectively Renewable Certificates.....				
Other Individual Certificates:					
25.1	Non-cancelable.....				
25.2	Guaranteed renewable.....				
25.3	Non-renewable for stated reasons only.....				
25.4	Other accident only.....				
25.5	Medicare Title XVIII exempt from state taxes or fees.....				
25.6	All Other.....				
25.7	Totals (sum of Lines 25.1 to 25.6).....	0	0	0	0
26.	Totals (Line 24 + 25.7).....	0	0	0	0



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF **MISSOURI** DURING THE YEAR
NAIC Group Code.....0000 NAIC Society Code.....56375

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Life and Annuities
1. Life insurance.....		
2. Annuity considerations.....		
3. Deposit-type contract funds.....		
4. Other considerations.....		
5. Total (Lines 1 to 4).....		0
DIRECT REFUNDS TO MEMBERS		
Life Insurance:		
6.1 Paid in cash or left on deposit.....		
6.2 Applied to pay renewal premiums.....		
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		
6.4 Other.....		
6.5 Total (Sum of Lines 6.1 to 6.4).....		0
Annuities:		
7.1 Paid in cash or left on deposit.....		
7.2 Applied to provide paid-up annuities.....		
7.3 Other.....		
7.4 Total (Sum of Lines 7.1 to 7.3).....		0
8. Total (Line 6.5 plus Line 7.4).....		0
DIRECT CLAIMS AND BENEFITS PAID		
9. Death benefits.....		865
10. Matured endowments.....		
11. Annuity benefits.....		
12. Surrender values. and withdrawals for life contracts.....		
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0
14. All other benefits, except accident & health.....		
15. Total.....		865

DETAILS OF WRITE-INS	
1301.	
1302.	
1303.	
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0
1399. Totals (Items 1301 thru 1303 plus 1398) (Line 13 above).....	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1 Number of Certificates	2 Amount
16. Unpaid December 31, prior year.....			
17. Incurred during current year.....	1		865
Settled during current year:			
18.1 By payment in full.....	1		865
18.2 By payment on compromised claims.....			
18.3 Total paid.....	1		865
18.4 Reduction by compromise.....			
18.5 Amount rejected.....			
18.6 Total settlements.....	1		865
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0		0
POLICY EXHIBIT			
20. In force December 31, prior year.....	37		32,955
21. Issued during year.....			
22. Other changes to in force (net).....	(1)		(865)
23. In force December 31, current year.....	36		32,090

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Refunds Paid or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Collectively Renewable Certificates.....	NONE				
Other Individual Certificates:					
25.1 Non-cancelable.....					
25.2 Guaranteed renewable.....					
25.3 Non-renewable for stated reasons only.....					
25.4 Other accident only.....					
25.5 Medicare Title XVIII exempt from state taxes or fees.....					
25.6 All Other.....					
25.7 Totals (sum of Lines 25.1 to 25.6).....	0	0	0	0	0
26. Totals (Line 24 + 25.7).....	0	0	0	0	0



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR

NAIC Group Code.....0000

NAIC Society Code.....56375

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Life and Annuities
1. Life insurance.....		13,758
2. Annuity considerations.....		
3. Deposit-type contract funds.....		
4. Other considerations.....		
5. Total (Lines 1 to 4).....		13,758
DIRECT REFUNDS TO MEMBERS		
Life Insurance:		
6.1 Paid in cash or left on deposit.....		67
6.2 Applied to pay renewal premiums.....		
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		7,405
6.4 Other.....		
6.5 Total (Sum of Lines 6.1 to 6.4).....		7,472
Annuities:		
7.1 Paid in cash or left on deposit.....		
7.2 Applied to provide paid-up annuities.....		
7.3 Other.....		
7.4 Total (Sum of Lines 7.1 to 7.3).....		0
8. Total (Line 6.5 plus Line 7.4).....		7,472
DIRECT CLAIMS AND BENEFITS PAID		
9. Death benefits.....		33,757
10. Matured endowments.....		5,987
11. Annuity benefits.....		
12. Surrender values. and withdrawals for life contracts.....		9,028
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0
14. All other benefits, except accident & health.....		
15. Total.....		48,772

DETAILS OF WRITE-INS	
1301.	
1302.	
1303.	
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0
1399. Totals (Items 1301 thru 1303 plus 1398) (Line 13 above).....	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1 Number of Certificates	2 Amount
16. Unpaid December 31, prior year.....		2	2,254
17. Incurred during current year.....		28	39,744
Settled during current year:			
18.1 By payment in full.....		28	39,744
18.2 By payment on compromised claims.....			
18.3 Total paid.....		28	39,744
18.4 Reduction by compromise.....			
18.5 Amount rejected.....			
18.6 Total settlements.....		28	39,744
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....		2	2,254
POLICY EXHIBIT			
20. In force December 31, prior year.....		1,647	3,605,471
21. Issued during year.....		27	60,000
22. Other changes to in force (net).....		23	151,061
23. In force December 31, current year.....		1,697	3,816,532

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Refunds Paid or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Collectively Renewable Certificates.....	NONE				
Other Individual Certificates:					
25.1 Non-cancelable.....					
25.2 Guaranteed renewable.....					
25.3 Non-renewable for stated reasons only.....					
25.4 Other accident only.....					
25.5 Medicare Title XVIII exempt from state taxes or fees.....					
25.6 All Other.....					
25.7 Totals (sum of Lines 25.1 to 25.6).....	0	0	0	0	0
26. Totals (Line 24 + 25.7).....	0	0	0	0	0



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF OREGON DURING THE YEAR
NAIC Group Code.....0000 NAIC Society Code.....56375

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Life and Annuities
1. Life insurance.....		
2. Annuity considerations.....		
3. Deposit-type contract funds.....		
4. Other considerations.....		
5. Total (Lines 1 to 4).....		0
DIRECT REFUNDS TO MEMBERS		
Life Insurance:		
6.1 Paid in cash or left on deposit.....		
6.2 Applied to pay renewal premiums.....		
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		
6.4 Other.....		
6.5 Total (Sum of Lines 6.1 to 6.4).....		0
Annuities:		
7.1 Paid in cash or left on deposit.....		
7.2 Applied to provide paid-up annuities.....		
7.3 Other.....		
7.4 Total (Sum of Lines 7.1 to 7.3).....		0
8. Total (Line 6.5 plus Line 7.4).....		0
DIRECT CLAIMS AND BENEFITS PAID		
9. Death benefits.....		
10. Matured endowments.....		
11. Annuity benefits.....		
12. Surrender values. and withdrawals for life contracts.....		565
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0
14. All other benefits, except accident & health.....		
15. Total.....		565
DETAILS OF WRITE-INS		
1301.		
1302.		
1303.		
1398. Summary of remaining write-ins for Line 13 from overflow page.....		0
1399. Totals (Items 1301 thru 1303 plus 1398) (Line 13 above).....		0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1 Number of Certificates	2 Amount
16. Unpaid December 31, prior year.....			
17. Incurred during current year.....			
Settled during current year:			
18.1 By payment in full.....			
18.2 By payment on compromised claims.....			
18.3 Total paid.....		0	0
18.4 Reduction by compromise.....			
18.5 Amount rejected.....			
18.6 Total settlements.....		0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....		0	0
POLICY EXHIBIT			
20. In force December 31, prior year.....		31	63,013
21. Issued during year.....			
22. Other changes to in force (net).....		(1)	(656)
23. In force December 31, current year.....		30	62,357

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Refunds Paid or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Collectively Renewable Certificates.....	NONE				
Other Individual Certificates:					
25.1 Non-cancelable.....					
25.2 Guaranteed renewable.....					
25.3 Non-renewable for stated reasons only.....					
25.4 Other accident only.....					
25.5 Medicare Title XVIII exempt from state taxes or fees.....					
25.6 All Other.....					
25.7 Totals (sum of Lines 25.1 to 25.6).....	0	0	0	0	0
26. Totals (Line 24 + 25.7).....	0	0	0	0	0



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR

NAIC Group Code.....0000

NAIC Society Code.....56375

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1
		Life and Annuities
1.	Life insurance.....	678
2.	Annuity considerations.....	.....
3.	Deposit-type contract funds.....	.....
4.	Other considerations.....	.....
5.	Total (Lines 1 to 4).....	678
DIRECT REFUNDS TO MEMBERS		
Life Insurance:		
6.1	Paid in cash or left on deposit.....	4
6.2	Applied to pay renewal premiums.....	.....
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	410
6.4	Other.....	.....
6.5	Total (Sum of Lines 6.1 to 6.4).....	414
Annuities:		
7.1	Paid in cash or left on deposit.....	.....
7.2	Applied to provide paid-up annuities.....	.....
7.3	Other.....	.....
7.4	Total (Sum of Lines 7.1 to 7.3).....	0
8.	Total (Line 6.5 plus Line 7.4).....	414
DIRECT CLAIMS AND BENEFITS PAID		
9.	Death benefits.....	3,341
10.	Matured endowments.....	.....
11.	Annuity benefits.....	.....
12.	Surrender values. and withdrawals for life contracts.....	.....
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0
14.	All other benefits, except accident & health.....	.....
15.	Total.....	3,341

DETAILS OF WRITE-INS		
1301.	.....	.....
1302.	.....	.....
1303.	.....	.....
1398.	Summary of remaining write-ins for Line 13 from overflow page.....	0
1399.	Totals (Items 1301 thru 1303 plus 1398) (Line 13 above).....	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1	2
		Number of Certificates	Amount
16.	Unpaid December 31, prior year.....	.....	.....
17.	Incurred during current year.....	2	3,341
Settled during current year:			
18.1	By payment in full.....	2	3,341
18.2	By payment on compromised claims.....	.....	.....
18.3	Total paid.....	2	3,341
18.4	Reduction by compromise.....	.....	.....
18.5	Amount rejected.....	.....	.....
18.6	Total settlements.....	2	3,341
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0
POLICY EXHIBIT			
20.	In force December 31, prior year.....	138	196,415
21.	Issued during year.....	.....	.....
22.	Other changes to in force (net).....	(2)	(3,341)
23.	In force December 31, current year.....	136	193,074

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Refunds Paid or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Collectively Renewable Certificates.....	NONE				
Other Individual Certificates:					
25.1 Non-cancelable.....					
25.2 Guaranteed renewable.....					
25.3 Non-renewable for stated reasons only.....					
25.4 Other accident only.....					
25.5 Medicare Title XVIII exempt from state taxes or fees.....					
25.6 All Other.....					
25.7 Totals (sum of Lines 25.1 to 25.6).....		0	0	0	0
26. Totals (Line 24 + 25.7).....		0	0	0	0



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR

NAIC Group Code.....0000

NAIC Society Code.....56375

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Life and Annuities
1. Life insurance.....		450
2. Annuity considerations.....		
3. Deposit-type contract funds.....		
4. Other considerations.....		
5. Total (Lines 1 to 4).....		450
DIRECT REFUNDS TO MEMBERS		
Life Insurance:		
6.1 Paid in cash or left on deposit.....		1
6.2 Applied to pay renewal premiums.....		
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		132
6.4 Other.....		
6.5 Total (Sum of Lines 6.1 to 6.4).....		133
Annuities:		
7.1 Paid in cash or left on deposit.....		
7.2 Applied to provide paid-up annuities.....		
7.3 Other.....		
7.4 Total (Sum of Lines 7.1 to 7.3).....		0
8. Total (Line 6.5 plus Line 7.4).....		133
DIRECT CLAIMS AND BENEFITS PAID		
9. Death benefits.....		1,766
10. Matured endowments.....		
11. Annuity benefits.....		
12. Surrender values. and withdrawals for life contracts.....		
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0
14. All other benefits, except accident & health.....		
15. Total.....		1,766

DETAILS OF WRITE-INS	
1301. ....	.....
1302. ....	.....
1303. ....	.....
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0
1399. Totals (Items 1301 thru 1303 plus 1398) (Line 13 above).....	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1 Number of Certificates	2 Amount
16. Unpaid December 31, prior year.....			
17. Incurred during current year.....	1		1,766
Settled during current year:			
18.1 By payment in full.....	1		1,766
18.2 By payment on compromised claims.....			
18.3 Total paid.....	1		1,766
18.4 Reduction by compromise.....			
18.5 Amount rejected.....			
18.6 Total settlements.....	1		1,766
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0		0
POLICY EXHIBIT			
20. In force December 31, prior year.....	103		152,211
21. Issued during year.....	1		5,000
22. Other changes to in force (net).....	(1)		(1,766)
23. In force December 31, current year.....	103		155,445

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Refunds Paid or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Collectively Renewable Certificates.....	NONE				
Other Individual Certificates:					
25.1 Non-cancelable.....					
25.2 Guaranteed renewable.....					
25.3 Non-renewable for stated reasons only.....					
25.4 Other accident only.....					
25.5 Medicare Title XVIII exempt from state taxes or fees.....					
25.6 All Other.....					
25.7 Totals (sum of Lines 25.1 to 25.6).....	0	0	0	0	0
26. Totals (Line 24 + 25.7).....	0	0	0	0	0

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year.....	153,482
2. Current year's realized pre-tax capital gains/(losses) of \$.....0 transferred into the reserve net of taxes of \$.....0.....	57,810
3. Adjustment for current year's liability gains/(losses) released from the reserve.....	
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3).....	211,292
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4).....	32,364
6. Reserve as of December 31, current year (Line 4 minus Line 5).....	178,929

Amortization

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released from the Reserve	4 Balance Before Reduction for the Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2011.....	25,956	6,408		32,364
2. 2012.....	20,555	12,957		33,511
3. 2013.....	15,920	11,877		27,797
4. 2014.....	12,171	9,735		21,906
5. 2015.....	9,840	7,550		17,390
6. 2016.....	8,499	5,217		13,716
7. 2017.....	7,257	3,636		10,893
8. 2018.....	5,483	2,829		8,312
9. 2019.....	4,490	1,973		6,463
10. 2020.....	4,065	1,097		5,162
11. 2021.....	4,009	165		4,174
12. 2022.....	4,328	(306)		4,022
13. 2023.....	4,381	(277)		4,104
14. 2024.....	4,131	(249)		3,882
15. 2025.....	3,763	(227)		3,536
16. 2026.....	3,563	(186)		3,377
17. 2027.....	3,435	(194)		3,240
18. 2028.....	3,225	(219)		3,006
19. 2029.....	2,931	(261)		2,670
20. 2030.....	2,383	(285)		2,097
21. 2031.....	1,570	(329)		1,241
22. 2032.....	738	(354)		383
23. 2033.....	214	(369)		(155)
24. 2034.....	3	(384)		(381)
25. 2035.....	(8)	(415)		(422)
26. 2036.....	114	(430)		(315)
27. 2037.....	211	(399)		(189)
28. 2038.....	195	(317)		(122)
29. 2039.....	62	(234)		(171)
30. 2040.....	(4)	(151)		(155)
31. 2041 and Later.....		(45)		(45)
32. Total (Lines 1 to 31).....	153,482	57,810	0	211,292

ASSET VALUATION RESERVE

	Default Component			Equity Component			7
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	Total Amount (Cols. 3 + 6)
1. Reserve as of December 31, prior year.....	4,649		4,649			0	4,649
2. Realized capital gains/(losses) net of taxes - General Account.....			0			0	0
3. Realized capital gains/(losses) net of taxes - Separate Accounts.....			0			0	0
4. Unrealized capital gains/(losses) - net of deferred taxes - General Account.....			0			0	0
5. Unrealized capital gains/(losses) - net of deferred taxes - Separate Accounts.....			0			0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves.....			0			0	0
7. Basic contribution.....	1,056		1,056			0	1,056
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7).....	5,705	0	5,705	0	0	0	5,705
9. Maximum reserve.....	7,213		7,213			0	7,213
10. Reserve objective.....	5,383		5,383			0	5,383
11. 20% of (Line 10 minus Line 8).....	(64)	0	(64)	0	0	0	(64)
12. Balance before transfers (Lines 8 + 11).....	5,640	0	5,640	0	0	0	5,640
13. Transfers.....			0			0	XXX
14. Voluntary contribution.....			0			0	0
15. Adjustment down to maximum/up to zero.....			0			0	0
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15).....	5,640	0	5,640	0	0	0	5,640

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
		LONG-TERM BONDS										
1		Exempt obligations.....	1,093,616	XXX	XXX	1,093,616	0.0000	0	0.0000	0	0.0000	0
2	1	Highest quality.....	2,001,601	XXX	XXX	2,001,601	0.0004	801	0.0023	4,604	0.0030	6,005
3	2	High quality.....	134,299	XXX	XXX	134,299	0.0019	255	0.0058	779	0.0090	1,209
4	3	Medium quality.....		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
5	4	Low quality.....		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
6	5	Lower quality.....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
7	6	In or near default.....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
8		Total unrated multi-class securities acquired by conversion.....		XXX	XXX	0	XXX	0	XXX	0	XXX	
9		Total bonds (sum of Lines 1 through 8) (Page 2, Line 1, Column 3 plus Schedule DL, Part 1, Column 6, Line 6599999).....	3,229,516	XXX	XXX	3,229,516	XXX	1,056	XXX	5,383	XXX	7,213
		PREFERRED STOCKS										
10	1	Highest quality.....		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
11	2	High quality.....		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
12	3	Medium quality.....		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
13	4	Low quality.....		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
14	5	Lower quality.....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
15	6	In or near default.....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
16		Affiliated life with AVR.....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
17		Total preferred stocks (sum of Lines 10 through 16) (Page 3, Line 2.1, Column 3 plus Schedule DL, Part 1, Column 6, Line 7099999).....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
		SHORT-TERM BONDS										
18		Exempt obligations.....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19	1	Highest quality.....		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
20	2	High quality.....		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
21	3	Medium quality.....		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
22	4	Low quality.....		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
23	5	Lower quality.....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
24	6	In or near default.....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
25		Total short-term bonds (sum of Lines 18 thru 24).....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
DERIVATIVE INSTRUMENTS												
26		Exchange-traded.....		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
27	1	Highest quality.....		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
28	2	High quality.....		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
29	3	Medium quality.....		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
30	4	Low quality.....		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
31	5	Lower quality.....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
32	6	In or near default.....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
33		Total derivative instruments.....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
34		TOTAL (Lines 9 + 17 + 25 + 33).....	3,229,516	XXX	XXX	3,229,516	XXX	1,056	XXX	5,383	XXX	7,213
MORTGAGE LOANS												
In good standing:												
35		Farm mortgages.....			XXX	0	(a)	0	(a)	0	(a)	0
36		Residential mortgages-insured or guaranteed.....			XXX	0	0.0003	0	0.0006	0	0.0010	0
37		Residential mortgages-all other.....			XXX	0	0.0013	0	0.0030	0	0.0040	0
38		Commercial mortgages-insured or guaranteed.....			XXX	0	0.0003	0	0.0006	0	0.0010	0
39		Commercial mortgages-all other.....			XXX	0	(a)	0	(a)	0	(a)	0
40		In good standing with restructured terms.....			XXX	0	(b)	0	(b)	0	(b)	0
Overdue, not in process:												
41		Farm mortgages.....			XXX	0	0.0420	0	0.0760	0	0.1200	0
42		Residential mortgages-insured or guaranteed.....			XXX	0	0.0005	0	0.0012	0	0.0020	0
43		Residential mortgages-all other.....			XXX	0	0.0025	0	0.0058	0	0.0090	0
44		Commercial mortgages-insured or guaranteed.....			XXX	0	0.0005	0	0.0012	0	0.0020	0
45		Commercial mortgages-all other.....			XXX	0	0.0420	0	0.0760	0	0.1200	0
In process of foreclosure:												
46		Farm mortgages.....			XXX	0	0.0000	0	0.1700	0	0.1700	0
47		Residential mortgages-insured or guaranteed.....			XXX	0	0.0000	0	0.0040	0	0.0040	0
48		Residential mortgages-all other.....			XXX	0	0.0000	0	0.0130	0	0.0130	0
49		Commercial mortgages-insured or guaranteed.....			XXX	0	0.0000	0	0.0040	0	0.0040	0
50		Commercial mortgages-all other.....			XXX	0	0.0000	0	0.1700	0	0.1700	0
51		Total Schedule B mortgages (sum of Lines 35 through 50) (Page 2, Line 3, Column 3 plus Schedule DL, Part 1, Column 6, Line 8799999).....	0	0	XXX	0	XXX	0	XXX	0	XXX	0
52		Schedule DA mortgages.....			XXX	0	(c)	0	(c)	0	(c)	0
53		Total mortgage loans on real estate (Lines 51 + 52).....	0	0	XXX	0	XXX	0	XXX	0	XXX	0

(a) Times the company's experience adjustment factor (EAF).

(b) Column 9 is the greater of 6.4% without any EAF adjustments or a company's EAF adjusted In Good Standing (IGS) factor plus 150 basis points. Columns 5 and 7 are 28% and 62% respectively of Column 9.

(c) Determined using the same factors and breakdowns used for directly owned mortgage loans.

AVR-Equity Component (Lines 1-30)
NONE

AVR-Equity Component (Lines 31-55) (Cont.)
NONE

AVR-Equity Component (Lines 56-74) (Cont.)
NONE

AVR-Replications (Synthetic) Assets
NONE

Sch. F
NONE

Sch. H-Pt. 1
NONE

Sch. H-Pt. 2
NONE

Sch. H-Pt. 3
NONE

Sch. H-Pt. 4
NONE

Sch. H-Pt. 5
NONE

Sch. S-Pt. 1-Sn. 1
NONE

Sch. S-Pt. 1-Sn. 2
NONE

Sch. S-Pt. 2
NONE

Sch. S-Pt. 3-Sn. 1
NONE

Sch. S-Pt. 3-Sn. 2
NONE

Sch. S-Pt. 4
NONE

Sch. S-Pt. 5
NONE

SCHEDULE S - PART 6

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	3,372,963		3,372,963
2. Reinsurance (Line 16).....			0
3. Premiums and considerations (Line 15).....			0
4. Net credit for ceded reinsurance.....	XXX	0	0
5. All other admitted assets (balance).....	33,058		33,058
6. Total assets excluding separate accounts (Line 26).....	3,406,021	0	3,406,021
7. Separate account assets (Line 27).....			0
8. Total assets (Line 28).....	3,406,021	0	3,406,021
LIABILITIES, SURPLUS AND OTHER FUNDS (Page 3)			
9. Contract reserves (Lines 1 and 2).....	2,504,000		2,504,000
10. Liability for deposit-type contracts (Line 3).....			0
11. Claim reserves (Line 4).....	5,000		5,000
12. Member refunds/reserves (Lines 5 through 6).....	10,000		10,000
13. Premium & annuity considerations received in advance (Line 7).....			0
14. Other contract liabilities (Line 8).....	178,929		178,929
15. Reinsurance in unauthorized companies (Line 21.2).....			0
16. Funds held under reinsurance with unauthorized reinsurance (Line 21.3).....			0
17. All other liabilities (balance).....	23,803		23,803
18. Total liabilities excluding Separate Accounts (Line 23).....	2,721,732	0	2,721,732
19. Separate Account liabilities (Line 24).....			0
20. Total liabilities (Line 25).....	2,721,732	0	2,721,732
21. Capital & surplus (Line 30).....	684,289	XXX	684,289
22. Total liabilities, capital & surplus (Line 31).....	3,406,021	0	3,406,021
NET CREDIT FOR CEDED REINSURANCE			
23. Contract reserves.....	0		
24. Claim reserves.....	0		
25. Member refunds/reserves.....	0		
26. Premium & annuity considerations received in advance.....	0		
27. Liability for deposit-type contracts.....	0		
28. Other contract liabilities.....	0		
29. Reinsurance ceded assets.....	0		
30. Other ceded reinsurance recoverables.....	0		
31. Total ceded reinsurance recoverables.....	0		
32. Premiums and considerations.....	0		
33. Reinsurance in unauthorized companies.....	0		
34. Funds held under reinsurance treaties with unauthorized reinsurers.....	0		
35. Other ceded reinsurance payables/offsets.....	0		
36. Total ceded reinsurance payables/offsets.....	0		
37. Total net credit for ceded reinsurance.....	0		

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

			Direct Business Only				
			1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
States, Etc.							
1.	Alabama.....	AL					0
2.	Alaska.....	AK					0
3.	Arizona.....	AZ					0
4.	Arkansas.....	AR					0
5.	California.....	CA	274				274
6.	Colorado.....	CO	261				261
7.	Connecticut.....	CT					0
8.	Delaware.....	DE					0
9.	District of Columbia.....	DC					0
10.	Florida.....	FL					0
11.	Georgia.....	GA					0
12.	Hawaii.....	HI					0
13.	Idaho.....	ID					0
14.	Illinois.....	IL	80				80
15.	Indiana.....	IN					0
16.	Iowa.....	IA					0
17.	Kansas.....	KS					0
18.	Kentucky.....	KY	13				13
19.	Louisiana.....	LA					0
20.	Maine.....	ME					0
21.	Maryland.....	MD					0
22.	Massachusetts.....	MA					0
23.	Michigan.....	MI					0
24.	Minnesota.....	MN					0
25.	Mississippi.....	MS					0
26.	Missouri.....	MO					0
27.	Montana.....	MT					0
28.	Nebraska.....	NE					0
29.	Nevada.....	NV					0
30.	New Hampshire.....	NH					0
31.	New Jersey.....	NJ					0
32.	New Mexico.....	NM					0
33.	New York.....	NY					0
34.	North Carolina.....	NC					0
35.	North Dakota.....	ND					0
36.	Ohio.....	OH	13,758				13,758
37.	Oklahoma.....	OK					0
38.	Oregon.....	OR					0
39.	Pennsylvania.....	PA	678				678
40.	Rhode Island.....	RI					0
41.	South Carolina.....	SC					0
42.	South Dakota.....	SD					0
43.	Tennessee.....	TN					0
44.	Texas.....	TX					0
45.	Utah.....	UT					0
46.	Vermont.....	VT					0
47.	Virginia.....	VA					0
48.	Washington.....	WA					0
49.	West Virginia.....	WV					0
50.	Wisconsin.....	WI	450				450
51.	Wyoming.....	WY					0
52.	American Samoa.....	AS					0
53.	Guam.....	GU					0
54.	Puerto Rico.....	PR					0
55.	US Virgin Islands.....	VI					0
56.	Northern Mariana Islands.....	MP					0
57.	Canada.....	CN					0
58.	Aggregate Other Alien.....	OT					0
59.	Totals.....		15,514	0	0	0	15,514

Sch. Y-Pt. 1A
NONE

Sch. Y-Pt. 2
NONE

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING		Responses
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will an actuarial opinion be filed with this statement by March 1?	YES
3.	Will the confidential Risk-Based Capital Report be filed with the NAIC by March 1?	YES
4.	Will the confidential Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?	YES
APRIL FILING		
5.	Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
JUNE FILING		
7.	Will an audited financial report be filed by June 1?	NO
8.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	NO
AUGUST FILING		
9.	Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?	SEE EXPLANATION

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING		
10.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
11.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
12.	Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	YES
13.	Will the statement on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	YES
14.	Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	NO
15.	Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	NO
16.	Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	NO
17.	Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
18.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
19.	Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	NO
20.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be field with the state of domicile and electronically with the NAIC by March 1?	NO
21.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
22.	Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23.	Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	NO
24.	Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	NO
25.	Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?	NO
26.	Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
27.	Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
28.	Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
29.	Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
30.	Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?	NO
31.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
32.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partners be filed electronically with the NAIC by March 1?	NO
33.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
34.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
APRIL FILING		
35.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
36.	Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?	YES
37.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
38.	Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1?	YES
39.	Will the Analysis of Increase in Annuity Reserves During the Year be filed with the state of domicile and the NAIC by April 1?	YES
40.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
41.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO
AUGUST FILING		
42.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

1. EXPLANATIONS:

BARCODES:

2.

3.

4.

5.

6.

7.

8.

9. EXEMPT

10.

11.

12.

13.

14.

15.

16.

17.

18.

19.

20.

21.

22.

23.

24.

25.

26.

27.

28.

29.

30.

31.

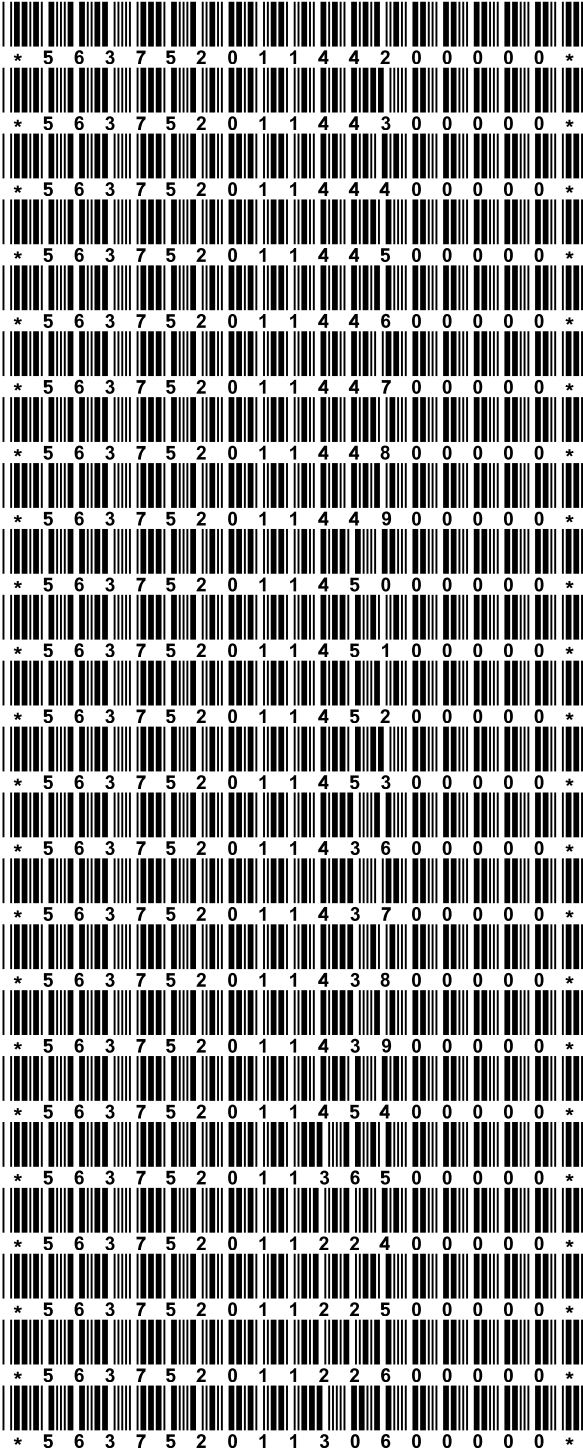
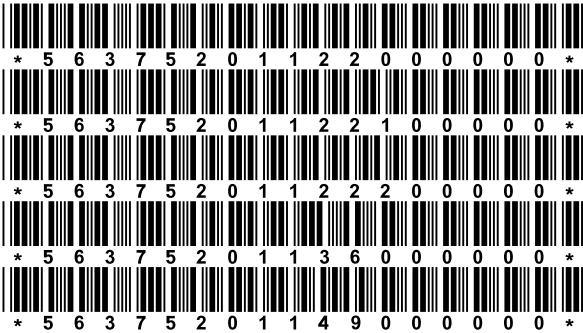
32.

33.

34.

35.

36.



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

37.



38.

39.

40.



41.



42.

**Overflow Page
NONE**

**Overflow Page
NONE**

2011 ALPHABETICAL INDEX
FRATERNAL ANNUAL STATEMENT BLANK

Analysis of Increase in Reserves During The Year	7	Schedule D – Part 2 – Section 1	E11
Analysis of Operations By Lines of Business	6	Schedule D – Part 2 – Section 2	E12
Asset Valuation Reserve (Replications (Synthetic) Assets	32	Schedule D – Part 3	E13
Asset Valuation Reserve Default Component	27	Schedule D – Part 4	E14
Asset Valuation Reserve Equity Component	29	Schedule D – Part 5	E15
Asset Valuation Reserve	26	Schedule D – Part 6 – Section 1	E16
Assets	2	Schedule D – Part 6 – Section 2	E16
Cash Flow	5	Schedule D – Summary By Country	SI04
Exhibit 1 – Part 1 – Premiums and Annuity Considerations for Life and Accident and Health Contracts	9	Schedule D – Verification Between Years	SI03
Exhibit 1 – Part 2 – Refunds Applied, Reinsurance Commissions and Expense	10	Schedule DA – Part 1	E17
Exhibit 2 – General Expenses	11	Schedule DA – Part 2 – Verification Between Years	SI10
Exhibit 3 – Taxes, Licenses and Fees	11	Schedule DB – Part A – Section 1	E18
Exhibit 4 – Dividends	11	Schedule DB – Part A – Section 2	E19
Exhibit 5 – Aggregate Reserve for Life Contracts	12	Schedule DB – Part A – Verification Between Years	SI11
Exhibit 5 – Interrogatories	13	Schedule DB – Part B – Section 1	E20
Exhibit 5A – Changes in Bases of Valuation During The Year	13	Schedule DB – Part B – Section 2	E21
Exhibit 6 – Aggregate Reserves for Accident and Health Contracts	14	Schedule DB – Part B – Verification Between Years	SI11
Exhibit 7 – Deposit-Type Contracts	14	Schedule DB – Part C – Section 1	SI12
Exhibit 8 – Claims for Life and Accident and Health Contracts - Part 1	15	Schedule DB – Part C – Section 2	SI13
Exhibit 8 – Claims for Life and Accident and Health Contracts - Part 2	16	Schedule DB – Part D	E22
Exhibit of Capital Gains (Losses)	8	Schedule DB – Verification	SI14
Exhibit of Life Insurance	24	Schedule DL – Part 1	E23
Exhibit of Net Investment Income	8	Schedule DL – Part 2	E24
Exhibit of Nonadmitted Assets	17	Schedule E – Part 1 – Cash	E25
Exhibit of Number of Certificates for Supplementary Contracts, Annuities and Accident and Health Insurance	24	Schedule E – Part 2 – Cash Equivalents	E26
Five-Year Historical Data	21	Schedule E – Part 3 – Special Deposits	E27
Form for Calculating the Interest Maintenance Reserve (IMR)	25	Schedule E – Verification Between Years	SI15
General Interrogatories	19	Schedule F	33
Jurat Page	1	Schedule H – Accident and Health Exhibit – Part 1	34
Liabilities, Surplus and Other Funds	3	Schedule H – Part 5 – Health Claims	36
Life Insurance (State Page)	23	Schedule H – Parts – 2, 3, and 4	35
Notes To Financial Statements	18	Schedule S – Part 1 – Section 1	37
Overflow Page For Write-Ins	51	Schedule S – Part 1 – Section 2	38
Schedule A – Part 1	E01	Schedule S – Part 2	39
Schedule A – Part 2	E02	Schedule S – Part 3 – Section 1	40
Schedule A – Part 3	E03	Schedule S – Part 3 – Section 2	41
Schedule A – Verification Between Years	SI02	Schedule S – Part 4	42
Schedule B – Part 1	E04	Schedule S – Part 5	43
Schedule B – Part 2	E05	Schedule S – Part 6	44
Schedule B –Part 3	E06	Schedule T – Part 2 – Interstate Compact	46
Schedule B – Verification Between Years	SI02	Schedule T – Premiums and Annuity Considerations	45
Schedule BA – Part 1	E07	Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group	47
Schedule BA – Part 2	E08	Schedule Y – Part 1A – Detail of Insurance Holding Company System	48
Schedule BA –Part 3	E09	Schedule Y – Part 2 – Summary of Insurer’s Transactions With Any Affiliates	49
Schedule BA – Verification Between Years	SI03	Summary Investment Schedule	SI01
Schedule D – Part 1	E10	Summary of Operations	4
Schedule D – Part 1A – Section 1	SI05	Supplemental Exhibits and Schedules Interrogatories	50
Schedule D – Part 1A – Section 2	SI08		

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1	2	3	4	5	6	7	8	9	Letter of Credit Issuing or Confirming Bank (a)			13	14	15	16	17
									10	11	12					
NAIC Company Code	Federal ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total (Cols. 5 + 6 + 7)	Letters of Credit	American Bankers Association (ABA) Routing Number	Letter of Credit Code	Bank Name	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols. 9 + 13 + 14 + 15 + 16 But Not in Excess of Col. 8

NONE

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*

NONE